

Permits: 410-313-2455
Inspections: 410-313-1810
Automated Line: 410-313-3800
G-08 0000100 - MMS

G12000248

Howard County Building/Fire Permit Application
Department of Inspections, Licenses & Permits
3430 Court House Drive
Ellicott City, MD 21043

Permit Number:

B12003075

Building Address: 15335 Sweetbay St.
Woodbine, MD 21797
Suite/Apt. # SDP/WP/BA #:
Census Tract: Subdivision: Belle Haven
Section: Area: Lot: 5
Tax Map: 0014 Parcel: 0066 Grid: 20
Zoning: Map Coordinates: Lot Size: 40,019
Existing Use: vacant lot
Proposed Use: single fam. dwelling
Estimated Construction Cost: \$ 199,000
Description of Work: Colorado w/morning rm. 6 ft. fam.
& library ext. 2 story, full bsmt., 3 full Baths
1 BR, 2 car garage side entry (4 BR)
Occupant or Tenant: none
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: Address:
City: State: Zip Code:
Phone: Fax:
Email:

Property Owner's Name: Belle Haven Baker LLC
Address: 10751 Falls Rd. Ste. 405
City: LUTHERVILLE State: MD Zip Code: 21093
Home Phone: Work Phone:
Applicant's Name & Mailing Address, (If other than stated herein):
Vicky Meyer 410-296-6900
Phone: Fax:
Email: MDBLDGPERMITS@COMCAST.NET
Contractor Company: K HOYNANIAN HOMES
Contact Person: Chester Willett
Address: 1802 Brightseat Rd.
City: Landover State: MD Zip Code: 20785
License No.: 3149
Phone: 301-683-6268 Fax: Email:
Engineer/Architect Company: DDC
Responsible Design Prof.: Brian
Address: 192 MAIN ST.
City: Westminister State: MD Zip Code: 21157
Phone: 410-386-0560 Fax: Email:

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
Construction type:	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit #	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
Depth Width	<input type="checkbox"/> Public
1 st floor:	<input checked="" type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input checked="" type="checkbox"/> Unfinished Basement	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input checked="" type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> Manufactured Home	

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

V. Meyer
Applicant's Signature

Victoria Meyer, agent
Print Name

MDBLDGPERMITS@COMCAST.NET
Email Address

Sept. 11, 2012
Date

agent, Md Bldg. Permits, Inc.
Title/Company

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE EARLY & LEGIBLY
FOR OFFICE USE ONLY

(2679 CR #)

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		
Fire Protection		

Is Sediment Control approval required for issuance? ☐ Yes ☐ No
☐ CONTINGENCY CONSTRUCTION START
☐ ONE STOP SHOP

DPZ SETBACK INFORMATION

Front: Side: Side St.:
Rear: All minimum setbacks met? ☐ Yes ☐ No
Is Entrance Permit Required? ☐ Yes ☐ No
Historic District? ☐ Yes ☐ No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$ 100
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$

Building Address 15335 Sweetbay St. Woodlawn MD 21797	Property Owner's Name Union Chapel Road LLC Address 9025 Chevrolet DR. City Ellicott City State MD Zip Code 21042 Home Phone 410-461-5900 Work Phone 410-461-5900 Applicant's Name & Mailing Address, (if other than stated hereon): Victoria Meyer Md Bldg. Permits, Inc. Phone 410-296-6900 Fax 410-296-7992
Suite/Apt. #: SDP/WP/Petition #: Census Tract Subdivision Belle Haven Est. Section Area Lot S Tax Map 14 Parcel 66 Grid 20 Zoning Map Coordinates Lot size 40,019 SF	Contractor Company Belle Haven Est. LLC Contact Person Wayne Alexander Address 9025 Chevrolet DR, Ste K City Ellicott City State MD Zip Code 21042 License No. SP37 Phone 410-461-5900 Fax
Existing Use Vacant lot Proposed Use New S.F.D. Estimated Construction Cost \$ 300,000 Description of Work Construct new 2 story town single fam. Dwelling with 4 bedrooms, 3 gas fireplace, central air conditioning, etc.	Engineer or Architect Company DEMARCO DESIGN Contact Person LORI CUNNINGHAM Address 192 E. MAIN ST. City Westminster State MD Zip Code 21157 Phone 410-386-0560 Fax 410-386-0564
Occupant or Tenant See owner Contact Name Address City State Zip Code Phone Fax	

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics Height: No. of stories: Gross area, sq. ft. per floor: Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular	Utilities Water Supply: Public Private Sewage Disposal: Public Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> Full Partial Other Suppression # of Heads	Building Characteristics SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth Width 1st floor: 2nd floor: Basement: Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms 4 Multi-family dwellings: No. of efficiency units: No. of 1 BR units: No. of 2 BR units: No. of 3 BR units: Other Structure: Dimensions: Footings: Roof: State Certified Modular Manufactured Home	Utilities Water Supply: Public Private Sewage Disposal: Public Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> NFPA #13D NFPA #13R Other:

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature Victoria Meyer Agent, MD Bldg Permits, Inc. Title/Company	Print Name Victoria Meyer Date Feb 2011
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Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:
Land Development, DPZ			Front:	Filing fee \$150
State Highways			Rear:	Permit fee \$
Building Official			Side:	Excise tax \$
Dev. Engineering, DPZ			Side St.:	Add'l per. fee \$
Health	2-23-11	Dana Bernard	All minimum setbacks met?	TOTAL FEES \$
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # 3175
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation #
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
			Lot Coverage for NewTown Zone	
			SDP/Red-line approval date	Accepted by



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: 12/18/12

Permit No.: B13000002

Building Address: 15335 Sweetbay St
City: Woodbine State: md Zip Code: 21797
Suite/Apt. # SDP/WP/BA #:
Census Tract: Subdivision: Belle Haven Estates
Section: Area: 2 Lot: 5
Tax Map: 14 Parcel: 66 Grid: 20
Zoning: Map Coordinates: Lot Size: 40,019 sq ft

Existing Use: SFD
Proposed Use: SFD w/ propane tank
Estimated Construction Cost: \$ 8000
Description of Work:
Install 1000 gal in-ground propane tank

Occupant or Tenant:
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name:
Address: Owner
City: State: Zip Code:
Phone: Fax:
Email:

Property Owner's Name: K. Hovarian Homes
Address: 802 Bostwick Rd
City: Landover State: md Zip Code: 20785
Phone: Fax:
Email:

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Jeremy Clancy
Address: PO Box 1253
City: Odensburg State: md Zip Code: 21784
Phone: (443) 340-1229 Fax:
Email: Jeremy@AppliedandApproved.com

Contractor Company: Valley National Coas
Contact Person: William Greenwig
Address: 7201 Monticello Rd
City: Jessup State: md Zip Code: 20794
License No.: 61793
Phone: 410-799-1114 Fax:
Email:

Engineer/Architect Company:
Responsible Design Prof.:
Address: Contractor
City: State: Zip Code:
Phone: Fax:
Email:

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	Depth Width
Gross area, sq. ft./floor:	1 st floor:
	2 nd floor:
Area of construction (sq. ft.):	Basement:
	<input type="checkbox"/> Finished Basement
Use group:	<input type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
Construction type:	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:
<input type="checkbox"/> Structural Steel	Multi-family Dwelling
<input type="checkbox"/> Masonry	No. of efficiency units:
<input type="checkbox"/> Wood Frame	No. of 1 BR units:
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
5 Roadside Tree Project Permit	Footings:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Utilities
Water Supply
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Heating System
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:
Sprinkler System:
<input type="checkbox"/> Yes <input type="checkbox"/> No
Grading Permit Number:
Building Shell Permit Number:

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Applicant's Signature: [Signature]
Email Address: Jeremy@AppliedandApproved.com
Title/Company: permits

Print Name: Jeremy Clancy
Date: 12/18/12

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY
FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START		

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# 3225

Distribution of Copies: White: Building Officials

Green: PSZA, Zoning

Yellow: PSZA, Engineering

Pink: Health

Gold: SHA