G00009112

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B--154759 PPM

Building Address 14306 Roxbury Lake Dr. Glenelg, MD 21737

Suite/Apt. #: 04-369130 SDP/WP/Petition #:

Census Tract 604002 Subdivision Triadelphia Crossing #17233

Section ____ Area ____ Lot 8

Tax Map 21 Parcel 97 Grid 17

Zoning RC DEO Map Coordinates ____ Lot size 1.130A

Property Owner's Name Toll Bros. Inc

Address 7164 Columbia Gateway Dr. #230

City Columbia State MD Zip Code 21046

Home Phone ____ Work Phone 410-872-9165

Applicant's Name & Mailing Address, (if other than stated hereon): (C) 301-370-0633

Phone ____ Fax 410-872-9141

Existing Use Vacant Lot

Proposed Use Single Family Dwelling

Estimated Construction Cost $ 135,000

Description of Work Henley Federal 4 Bed, 1½ Bath Expanded Family Room, Expandly Elite Bathrooms

Contractor Company Toll MD II LP

Contact Person Brett Roberts

Address 7164 Columbia Gateway Dr. #230

City Columbia State MD Zip Code 21046

License No.

Phone 410-872-9165 Fax 410-872-9141

Occupant or Tenant Toll Bros. Inc.

Contact Name Brett Roberts

Address 7164 Columbia Gateway Dr. #230

City Columbia State MD Zip Code 21046

Phone 410-872-9165 Fax 410-872-9141

Engineer or Architect Company Benchmark Engineering

Contact Person Dave Thompson

Address 8480 Balt. Nat'l Pk. #418

City Ellicott City State MD Zip Code 21043

Phone 410-465-6105 Fax 410-465-6694

BUILDING DESCRIPTION - COMMERCIAL

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 ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
____ Full
____ Partial
____ Other Suppression
____ # of Heads

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

SF Dwelling ☒ SF Townhouse ☐

	Depth	Width
1st floor:		
2nd floor:		
Basement:		

Finished Basement ☐ Unfinished Basement ☒
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms 4
Height: 33

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 Height: ____

____ State Certified Modular
____ Manufactured Home

Utilities

Water Supply:
____ Public
X Private

Sewage Disposal:
____ Public
X Private

Electric Yes ☒ No ☐
Gas Yes ☐ No ☒

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☒

Sprinkler system: N/A ☒
____ 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.

Brett Roberts
Applicant's Signature

Brett Roberts
Print Name

Construction Manager Toll Bros. Inc
Title/Company

5/30/05
Date

Checks payable to: ***DIRECTOR OF FINANCE OF HOWARD COUNTY***

** PLEASE WRITE NEATLY AND LEGIBLY. **

66271

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	7/1/05	[signature]
Fire Protection		

Is Sediment Control approval required prior to issuance?
YES ☒ NO ☐

CONTINGENCY CONSTRUCTION START: ☐
ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION

Front: ____
Rear: ____
Side: ____
Side St: ____

All minimum setbacks met? YES ☐ NO ☐
Is Entrance Permit required? YES ☐ NO ☐
Historic District? YES ☐ NO ☐

Lot Coverage for NewTown Zone ____
SDP/Red-line approval date ____

PROPERTY ID#

Filing fee	$ 100.00
Permit fee	$
Excise tax	$
Add'l per. fee	$
TOTAL FEES	$
Sub-total paid	$
Balance due	$
Check	# 1161802
Validation	# 93214

Accepted by [initials]

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

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Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning Map Coordinates Lot size

Property Owner's Name HYONG PAK

Address 14306 Roxbury Lake Dr

City GLENELG State MD Zip Code 21737

Home Phone 443-904-0320 Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone Fax

Existing Use SFD

Proposed Use SFD & DECK

Estimated Construction Cost $ 24,000.00

Description of Work 16x38 W/STEPS TO GRADE, ELEVATED

Contractor Company TERRAIN DECKING

Contact Person RAY TANENBAUM

Address 407 CREST LN

City GLENELG State MD Zip Code 21737

License No. 121773

Phone 410-991-8932 Fax

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone Fax

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone Fax

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

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Construction type:
_____ Reinforced Concrete
_____ Structural Steel
_____ Masonry
_____ Wood Frame

_____ State Certified Modular

Utilities

Water Supply:
____ Public
____ Private

Sewage Disposal:
____ Public
____ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

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____ Full
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Footings: _____
Roof Height: _____

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_____ Manufactured Home

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✓ Private

Sewage Disposal:
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Gas Yes ☑ No ☐

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Propane Gas ☐

Sprinkler system: N/A ☐
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Ray Jan
Applicant's Signature

RAY TANENBAUM
Print Name

OWNER
Title/Company

4/5/07
Date

Checks payable to: ***DIRECTOR OF FINANCE OF HOWARD COUNTY***

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Lot Coverage for NewTown Zone _____
SDP/Red-line approval date _____

PROPERTY ID#:	
Filing fee	$
Permit fee	$
Excise tax	$
Add'l per. fee	$
TOTAL FEES	$
Sub-total paid	$
Balance due	$
Check	#
Validation	#

Accepted by ____

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