

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:	
		

Permit No.: Building Address: 52/8 Sweet Mandaw LANG Property Owner's Name: QUEABSTH COLUIN Address: 5218 Sweet Modern LHAG

City: CIAKUSUTILE State: MD Zip Co

Phone: 303-842-126 | Fax: City: CLARKS VILLE State: MD Zip Code: 21029 Suite/Apt. #_____ SDP/WP/BA #: Subdivision: WALNUT G-ROVG Census Tract: Section: _____ Area: ____ Lot: ____ Applicant's Name & Mailing Address, (If other than stated herein) Tax Map: ______ Parcel: 74 _____ Grid: _____ Applicant's Name: SAME AS MEOVE Address: ___ Zoning: _____ Map Coordinates: ____ Lot Size: ___ City: ___ _____ Zip Code: ____ Phone: Existing Use: RUAR YARD Contractor Company: Conceptual Building and Candecage
Contact Person: RAFFACTE MANNAKELLI
Address: 9396 BACT, NATIONAL Pike
City: GZLICOTT CITState: MD Zip Code: 21042 Proposed Use: CONCRETE Swimming POOL Estimated Construction Cost: \$ 45,000 Description of Work: Constant 22 × 40 Concrete pool License No.: 506 36

Phone: 40-750-7740 Fax: 40-750-2009

Email: RMCBLANDSCAPES 481@ 3mail. com Occupant or Tenant: OCCUPANT Was tenant space previously occupied? □No Engineer/Architect Company: ____ Contact Name: Responsible Design Prof.: _____ Address: Address: _____ ______ State: _____ Zip Code: _____ _____ State: _____ Zip Code: ___ City: ___Fax: Phone: Fax: Email: Commercial Building Characteristics Residential Building Characteristics Utilities SF Dwelling SF Townhouse Height: Water Supply No. of stories: Depth ☐ Public 1st floor: Gross area, sq. ft./floor: Private 2nd floor: Sewage Disposal Area of construction (sq. ft.): Basement: ☐ Public ☐ Finished Basement Private ☐ Unfinished Basement Use group: ☐ Crawl Space ☐ Yes Electric: □ No ☐ Slab on Grade Construction type: Gas: ☐ Yes □ No ☐ Reinforced Concrete No. of Bedrooms: **Heating System** ☐ Structural Steel Multi-family Dwelling Electric □ Oil No. of efficiency units: ☐ Masonry Natural Gas Propane Gas ☐ Wood Frame No. of 1 BR units: ☐ State Certified Modular No. of 2 BR units: ☐ Other: No. of 3 BR units: Sprinkler System: Other Structure: ☐ Yes □ No Dimensions: Roadside Tree Project Permit Footings: □Yes □No **Grading Permit Number:** Roof: Roadside Tree Project Permit # ☐ State Certified Modular ☐ Manufactured Home **Building Shell Permit Number:** 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; IT HAT 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

Print Name RMCBCALDSCAPES 481@ SMQ; 1.com Email Address PROSIDONT Title/Company

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

-FOR OFFICE USE ONLY-

STEELING ENGINEERING TO BE AND ADDRESS OF THE PROPERTY OF THE	Property Services Services		
AGENCY	DATE	SIG	NATURE OF APPROVAL
State Highways			
Building Officials			
PSZA (Zoning)			
PSZA (Engineering)			
Health	1413	14	H. Oswald
1 6 11 1 6 1 1		. 1.6	

Is Sediment Control approval required for issuance? ☐ Yes ☐ No

☐ CONTINGENCY CONSTRUCTION START

F4.		
Front:		
Rear:		
Side:		
Side St.:		
All minimum setbacks met?	☐ Yes	□No
Is Entrance Permit Required?	☐ Yes	□No
Historic District?	☐ Yes	□No
Lot Coverage for New Town Z	one:	
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	#

Distribution of Copies: White: Building Officials

Green: PSZA,Zoning

Yellow: PSZA,Engineering

Pink: Health

Gold: SHA



