

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
B0015654D

Building Address **626 RIVER ROAD**
Subsistence MD 21784
Suite/Apt. #: **03-38273** SDP/NP/Petition #:
Census Tract **603000** Subdivision **Cold Property**
Section _____ Area _____ Lot **1**
Tax Map **NO. 4** Parcel **NO 11** Grid **23**
Zoning **RR-DEU** Map Coordinates **5.07** Lot size **3.035 AC.**

Existing Use **Lot**
Proposed Use **Single Family Dwelling**
Estimated Construction Cost \$ **225,000.00**
Description of Work **Construct 5 bedroom 3 1/2 bath**
3400 sq. ft. House, poured concrete foundation
partial stone/siding - stick built.

Occupant or Tenant _____
Contact Name **Erik Ricca**
Address **4713 Hallowed Stream**
City **Ellicott City** State **MD.** Zip Code **21042**
Phone **410-997-0123** Fax **301-417-2500**

Property Owner's Name **Erik Ricca**
Address **4713 Hallowed Stream**
City **Ellicott City** State **MD.** Zip Code **21042**
Home Phone **410-997-0123** Work Phone **301-252-3455**
Applicant's Name & Mailing Address, (if other than stated hereon):

Phone **Same** Fax _____
Contractor Company **Windsor Design + Build**
Contact Person **Erik Ricca**
Address **63 Orchard Way North**
15744 Crabbs Branch Way
City **Rockville Potomac** State **MD.** Zip Code **20854**
License No. **122-108 3643**
Phone **301-417-2700** Fax **301-417-2500**

Engineer or Architect Company _____
Contact Person **John L. Schneider P.E.**
Address **100 N. Zelling Rd.**
City **Baltimore** State **MD** Zip Code **21228**
Phone **410-744-1745** Fax _____

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes ☐ No ☐ Gas Yes ☐ No ☐
Use group: _____	Heating System: _____ Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: N/A ☐ Full _____ Partial _____ Other Suppression _____ # of Heads _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling ☒ SF Townhouse ☐ Depth _____ Width _____ 1st floor: 46' 54' 2nd floor: 42' 54' Basement: 46' 54' Finished Basement ☐ Unfinished Basement ☐ Crawl space ☐ Slab on Grade ☐ No. of Bedrooms _____ Height: 32'-6" Multi-family dwellings: _____ No. of efficiency units: _____ No. of 1 BR units: N/A No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: _____ Dimensions: _____ Footings: N/A Roof Height: _____ State Certified Modular _____ Manufactured Home _____	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 ☒ 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 _____
Supervisor / Windsor Design + Build
Title/Company

Print Name **Erik Ricca**
Date **10/14/05**

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE	APPROVAL
Land Development, DPZ			
Public Works			
Building Official			
Env. Engineering, DPZ			
Health			
Fire Protection			
Is Sediment Control approval required prior to issuance?			
YES ☐ NO ☐			
CONTINGENCY CONSTRUCTION START: ☐			
ONE STOP SHOP: ☐			

DPZ SETBACK INFORMATION	PROPERTY IDE
Front: _____	Filing fee \$ 100
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES ☐ NO ☐	TOTAL FEES \$ _____
Is Entrance Permit required? YES ☐ NO ☐	Sub-total paid \$ _____
Historic District? YES ☐ NO ☐	Balance due \$ 1303
Lot Coverage for New Town Zone _____	Check \$ 1000
SDP/Red-line approval date _____	Validation \$ 1000
Accepted by _____	

Distribution of Copies: _____
Writer: Building Official _____
Green: LDB, DPZ _____
Yellow: DED, DPZ _____
Pink: Health _____
Gold: SHA _____

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

Building Address 626 River Rd
Sykesville, MD. 21784

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

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot 1

Tax Map 4 Parcel 11 Grid _____

Zoning RR-DDP Map Coordinates 5C6 Lot size 3.035 Acres

Existing Use Single Family Dwelling

Proposed Use _____

Estimated Construction Cost \$ 6000.00

Description of Work Above ground pool, retaining wall around portion of pool

Occupant or Tenant _____

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Property Owner's Name Erik + Kristin Ricasa

Address 626 River Rd. Sykesville, MD. 21784

City Sykesville State MD Zip Code 21784

Home Phone 410-489-9659 Work Phone 443-864-9029

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

Phone _____ Fax _____

Contractor Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. _____

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: _____

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 _____

Height: _____

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

____ Private

Sewage Disposal:

____ Public

____ Private

Electric Yes ☒ No ☐

Gas Yes ☐ No ☐

Heating System:

Electric ☐ Oil ☐

Natural Gas ☐

Propane Gas ☐

Sprinkler system: N/A ☐

____ NFPA #13D

____ NFPA #13R

____ Other:

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Applicant's Signature

Print Name

Title/Company

Date

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

** PLEASE WRITE NEATLY AND LEGIBLY. **

- FOR OFFICE USE ONLY -

AGENCY DATE SIGNATURE APPROVAL

Land Development, DPZ

State Highways

Building Official

Dev. Engineering, DPZ

Health

Fire Protection

Is Sediment Control approval required prior to issuance?

YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐

ONE STOP SHOP: ☐

Distribution of Copies-

White: Building Official

Green: LDD, DPZ

T:\norm\PERMIT.FRM

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

Yellow: DED, DPZ

Pink: Health

Accepted by

Gold: SHA

PROPERTY ID#:

Filing fee \$

Permit fee \$

Excise tax \$

Add'l per. fee \$

TOTAL FEES \$

Sub-total paid \$

Balance due \$

Check #

Validation #

TRIBUTION BOX
IN. GRADE 516.3
INV. -IN 513.3

Well

APPROVED
WALK-THRU BUILDING PERMIT
BP# _____ A# 49 343
APP SAN SFO DATE: 5/16/07
DESC. OF WORK: None
Grading Road

1500 GAL. SEPTIC TANK
FIN. GRADE 497.5
INV. IN 495.3
INV. OUT 495.8

PUMP TANK
FIN. GRADE 497.5
INV. 494.9

Opt. 20'x25'
Deck
498.50

INV. 496.3
RICA SA RESIDENCE
FF 508.80
B 498.80
Gar.
507/201

75' STREAM
SSF
BUFFER

4" PVC UNDERDRAIN

75' BTL
L.O.D.

L.O.D.

S75°39'51"E 167.99'

L.O.D.

L=112.79'

RIVER ROAD

30' R/W

