

Building Permit Application
Howard County Maryland
Department of Inspections, Licenses and Permits 3430 Court House Drive

Permits: 410-313-2455 www.howardcountymd.gov

Permit No.: ___

Building Address: 1483 Syk	sovelle Rel	Property Owner's Name: TO ANNO VATZ	
City: Suffervelle State:		Address: 1483 Sukesville Kul	
Suite/Apt. #SDP/		City: 5 1/25 VI/27 State: MD Zip Code: 217 6 4 Phone: 443-324-966 Fax:	
		Email: Treane @ Thenty Home	
Census Tract:			
Section:Area	:Lot:	Applicant's Name & Mailing Address, (If other than stated herein)	
Tax Map: Parcel: Grid:		Applicant's Name: Tim Reant Address: 3675 Park and	
Zoning: Map Coordinates: Lot Size:		City: & State: M.P. Zip Code: 21043	
		Phone: 443. 324-4,606 Fax:	
Existing Use: Single Family home		Email: Theane a Trentytimes, com	
Proposed Use: New Deck - SFD.		Contractor Company: TRints homes	
Estimated Construction Cost: \$ 3500 2/		Contact Person: Tim Keaml	
		Address: Scanie	
Description of Work: New Deck		City: & State: MP Zip Code: 7/043	
7'x7' w/ 3 styps to grade		License No. : 699	
vrap snown steps		Phone: Fax: Fax:	
Occupant or Tenant:		Email:	
Was tenant space previously occupied?	□Yes □No	Engineer/Architect Company:	
Contact Name:		Responsible Design Prof.:	
Address:		Address:	
City:		City:State:Zip Code:	
Phone:	Fax:	Phone:Fax:	
Email:		Email:	
Commercial Building Characteristics	Residential Building Characteristics	Utilities	
Height:	SF Dwelling ☐ SF Townhouse	Water Supply	
No. of stories:	Depth Width	□ Public	
Gross area, sq. ft./floor:	1 st floor:	Skrivate	
	2 nd floor:	Sewage Disposal	
Area of construction (sq. ft.):	Basement:		
Lla a receive	☐ Finished Basement	□ Public	
Use group:	Unfinished Basement	Perivate	
Construction type:	☐ Crawl Space ☐ Slab on Grade	Electric:	
Reinforced Concrete	No. of Bedrooms:	Gas: Yes No	
☐ Structural Steel	Multi-family Dwelling	Heating System	
☐ Masonry	No. of efficiency units:		
☐ Wood Frame	No. of 1 BR units:	□ Natural Gas □ Propane Gas	
☐ State Certified Modular	No. of 2 BR units:		
	No. of 3 BR units:	Other:	
	Other Structure:	Sprinkler System:	
	Dimensions:	– No	
> Roadside Tree Project Permit	Footings:		
Yes □No	Roof:	Grading Permit Number:	
Roadside Tree Project Permit #	☐ State Certified Modular		
No Thesa	☐ Manufactured Home	Building Shell Permit Number:	
WITH ALL REGULATIONS OF HOWARD COUNTY IN THIS APPLICATION; (5) THAT HE/SHE SRANTS COUNTY IN THE SHE SHANTS COUNTY IN THE SHE SHANTS COUNTY IN THE SHANTS COUNTY COUNTY COUNTY IN THE SHANTS COUNTY COU	WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE	TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY E WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN ROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES. Print Name Date	
Title/Company	7 / / / / / / / / / / / / / / / / / / /		

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

-FOR OFFICE USE ONLY-

	
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8/14	PRustes
	S/IS

<i>*</i>		*
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	\$ 6/00
Permit Fee	\$ 55
Tech Fee	\$ 0
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# 051760

Distribution of Copies: White: Building Officials

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Plnk: Health

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