



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: <u>11790 Triadelphia Rd</u>		Property Owner's Name: <u>Henry & Jessy Acosta</u>	
City: <u>Ellicott City</u> State: <u>MD</u> Zip Code: <u>21042</u>		Address: <u>11790 Triadelphia Rd</u>	
Suite/Apt. #: _____ SDP/WP/BA #: _____		City: <u>Ellicott City</u> State: <u>MD</u> Zip Code: <u>21042</u>	
Census Tract: _____ Subdivision: _____		Phone: <u>(443) 742 5375</u> Fax: _____	
Section: _____ Area: _____ Lot: <u>1</u>		Email: <u>Jessyda2000@tch.net</u>	
Tax Map: <u>0616</u> Parcel: <u>0386</u> Grid: <u>0014</u>		Applicant's Name & Mailing Address, (If other than stated herein)	
Zoning: _____ Map Coordinates: _____ Lot Size: <u>1.66 AC</u>		Applicant's Name: _____	
Existing Use: <u>SFD</u>		Address: _____	
Proposed Use: <u>SFD w/ Front Porch</u>		City: _____ State: _____ Zip Code: _____	
Estimated Construction Cost: \$ _____		Phone: _____ Fax: _____	
Description of Work: <u>Construct 8x56 open Front Porch</u>		Email: _____	
Occupant or Tenant: _____		Contractor Company: _____	
Was tenant space previously occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No		Contact Person: _____	
Contact Name: _____		Address: _____	
Address: _____		City: _____ State: _____ Zip Code: _____	
City: _____ State: _____ Zip Code: _____		License No.: _____	
Phone: _____ Fax: _____		Phone: _____ Fax: _____	
Email: _____		Email: _____	
Engineer/Architect Company: _____		Responsible Design Prof.: _____	
Responsible Design Prof.: _____		Address: _____	
Address: _____		City: _____ State: _____ Zip Code: _____	
City: _____ State: _____ Zip Code: _____		Phone: _____ Fax: _____	
Phone: _____ Fax: _____		Email: _____	
Email: _____			

Commercial Building Characteristics	Residential Building Characteristics
Height: _____	<input checked="" 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: _____
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings: _____
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof: _____
<input checked="" type="checkbox"/> Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Utilities
Water Supply
<input type="checkbox"/> Public
<input type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input 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
Other: _____
Sprinkler System:
<input type="checkbox"/> Yes <input type="checkbox"/> No
Grading Permit Number: _____
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; (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: Jessy D. Acosta Print Name: Jessy D. Acosta

Email Address: Jessyda2000@tch.net Date: 3/25/15

Title/Company: _____

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	3/25/15	H. O. O. O.

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

Distribution of Copies: White: Building Officials

Green: PSZA,Zoning

Yellow: PSZA,Engineering

Pink: Health

Gold: SHA

T:\Operations\Updated Forms\Building applmp 8.2012.docx

- NOTES:
1. THIS PLAT IS A BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING PURPOSES. THIS PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE STRUCTURES. THIS PLAT DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR FOR SECURING FINANCING OR REFINANCING.
 2. THE +/- SETBACK ACCURACY IS 1 FOOT.
 3. THIS PLAN OR PLAT IS NOT INTENDED TO SHOW ALL MATTERS RELATED TO THE PROPERTY SHOWN HEREON.
 4. B.R.L. = BUILDING RESTRICTION LINE

APPROVED

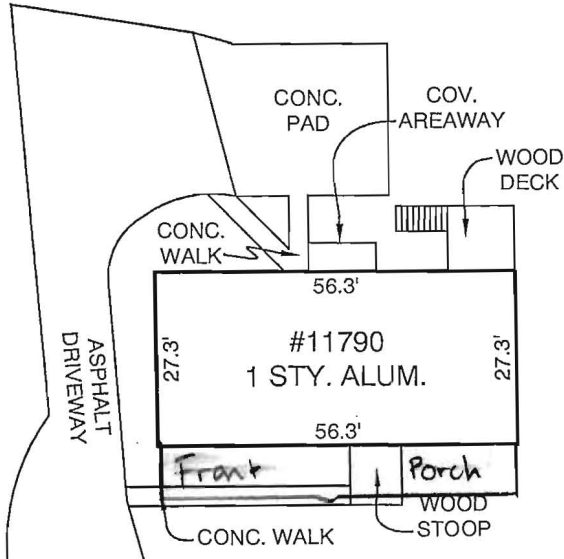
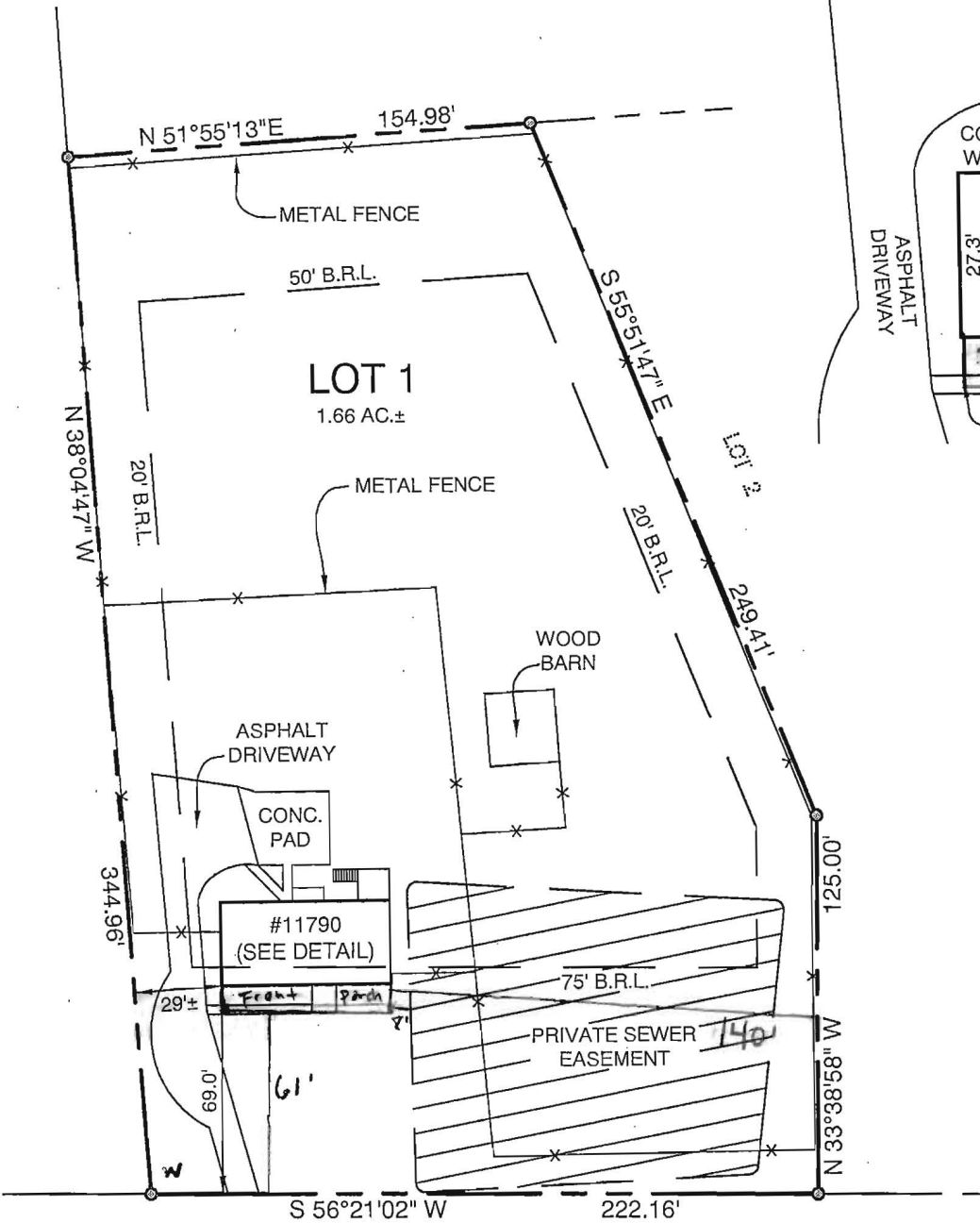
WALK-THRU BUILDING PERMIT

BP#

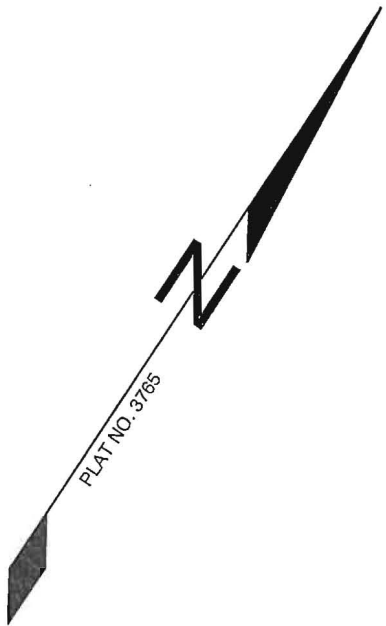
A#

APE SAN H. Oswald DATE: 3/25/15

DESC. OF WORK: construct 8 x 56 open front porch



DETAIL
SCALE: 1"=30'



TRIADELPHIA ROAD

LOCATION DRAWING
11790 TRIADELPHIA ROAD
LOT 1

HOPKINS PROPERTY

ELECTION DISTRICT NO. 3
HOWARD COUNTY, MARYLAND

THIS LOT DOES NOT APPEAR TO LIE WITHIN THE 100 YEAR FLOOD PLAIN AS SHOWN ON THE F.E.M.A. FLOOD HAZARD MAP 240044-0016-B AS REVISED DECEMBER 4, 1986.

I HEREBY CERTIFY THAT I WAS A RESPONSIBLE CHARGE OVER THE PREPARATION OF THIS LOCATION DRAWING AND THE SURVEY WORK REFLECTED IN IT, IS IN COMPLIANCE WITH REQUIREMENTS SET FORTH IN THE CODE OF MARYLAND TITLE 9, SUBTITLE 3, CHAPTER 2, SECTION 12, AND THE POSITION OF EXISTING IMPROVEMENTS AS SHOWN HEREON, ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

MICHAEL D. ADCOCK
PROFESSIONAL LAND SURVEYOR
NO. 21257, EXPIRATION DATE: 06-16-2015

Sill · Adcock &
Associates · LLC

Engineers · Surveyors · Planners

3300 North Ridge Road, Suite 160
Ellicott City, Maryland 21043
Phone: 443.325.7682 Fax: 443.325.7685
Email: mike@saaland.com

REFERENCE:

PLAT NO. 3765

DATE:

JUNE 18, 2013

SCALE:

1"=60'

FILE NO.:

13-001-151