



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.: B15001037

Building Address: 4875 TEN OAKS ROAD
City: DAYTON State: MD Zip Code: 21036
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: 2
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: 3.880 ACRES

Existing Use: SINGLE FAMILY RESIDENTIAL
Proposed Use: SINGLE FAMILY RESIDENTIAL
Estimated Construction Cost: \$ 120,000
Description of Work: ADDITION OVER EXG. 1-STORY GARAGE, RAGE FAMILY ROOM FLOOR, (1) INTERIOR WALL REMOVAL, MUDROOM
Occupant or Tenant: JEFF & JOANNA KUFEL

Was tenant space previously occupied? ☒ Yes ☐ No
Contact Name: MELISSA CLARK
Address: 1993 BARLEY RD
City: MARRIOTTVILLE State: MD Zip Code: 21104
Phone: 410549 3377 Fax: 410549 3377
Email: MCLARK@BLUEHOUSEARCH.COM

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: <u>26'-1"</u> <u>66'-4"</u>
Area of construction (sq. ft.): _____	2 nd floor: <u>28'-4"</u> <u>44'-4"</u>
Use group: _____	Basement: <u>26'-1"</u> <u>44'-4"</u>
Construction type: _____	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Wood Frame	No. of Bedrooms: <u>4 TOTAL</u>
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>
	No. of efficiency units: _____
	No. of 1 BR units: _____
	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 checked="" type="checkbox"/> No	Roof: _____
Roadside Tree Project Permit # _____	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: JEFF & JOANNA KUFEL
Address: 4875 TEN OAKS ROAD
City: DAYTON State: MD Zip Code: 21036
Phone: 410-377-2385 Fax: _____
Email: JOZAB78@HOTMAIL.COM

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: MELISSA CLARK
Address: 1993 BARLEY ROAD
City: MARRIOTTVILLE State: MD Zip Code: 21104
Phone: 410549 3377 Fax: 410549 3377
Email: MCLARK@BLUEHOUSEARCH.COM

Contractor Company: TBD
Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: _____
License No.: _____
Phone: _____ Fax: _____
Email: _____

Engineer/Architect Company: BLUEHOUSE ARCHITECTURE
Responsible Design Prof.: MELISSA CLARK
Address: 1993 BARLEY RD
City: MARRIOTTVILLE State: MD Zip Code: 21104
Phone: 410549 3377 Fax: 410549 3377
Email: MCLARK@BLUEHOUSEARCH.COM

Utilities
<u>Water Supply</u>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
<u>Sewage Disposal</u>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<u>Heating System</u>
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
<u>Sprinkler System:</u>
<input type="checkbox"/> Yes <input checked="" 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: MCLARK Print Name: MELISSA CLARK
Email Address: MCLARK@BLUEHOUSEARCH.COM Date: 03/26/2015
Title/Company: ARCHITECT/BLUEHOUSE ARCHITECTURE

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY
FOR OFFICE USE ONLY

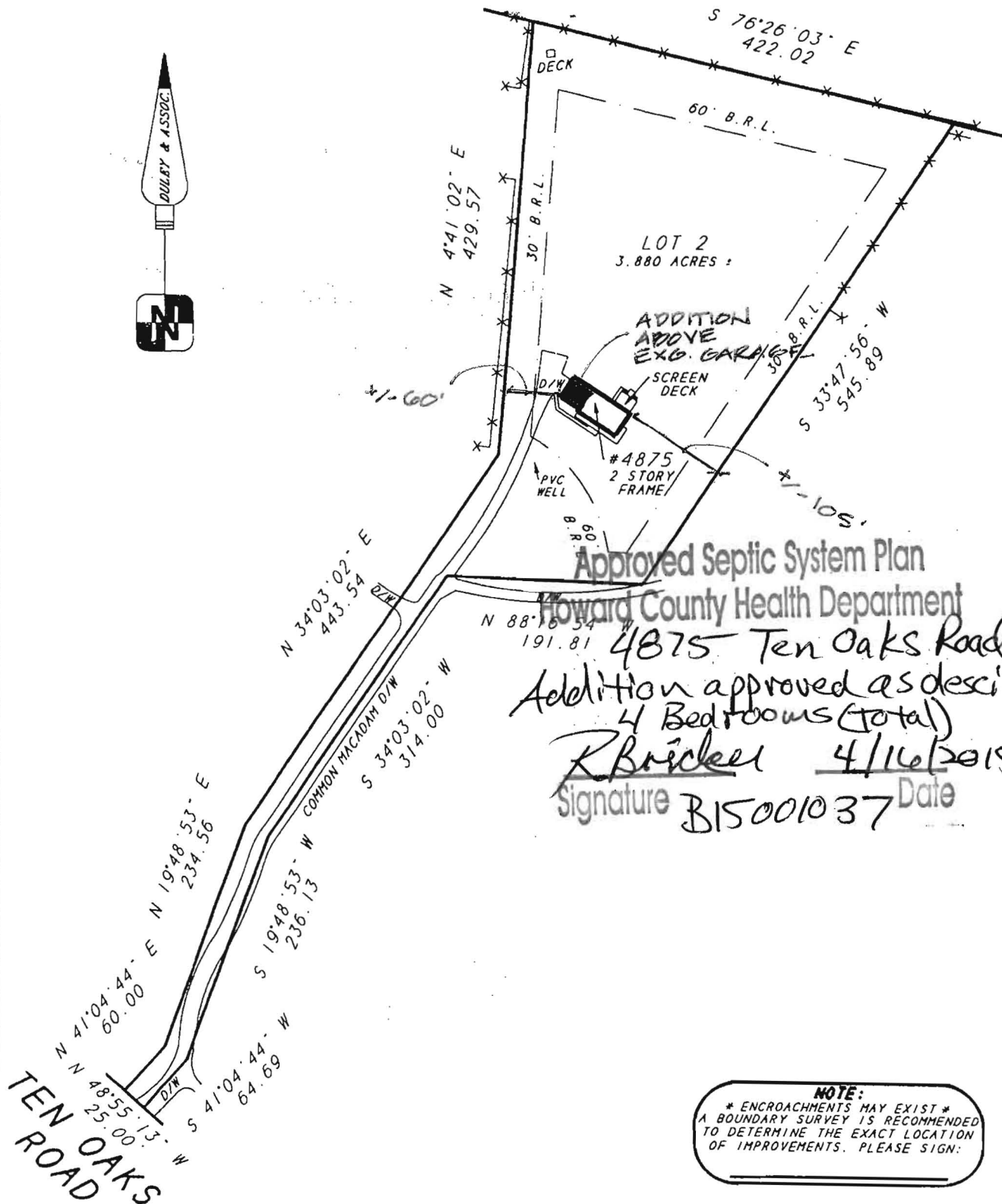
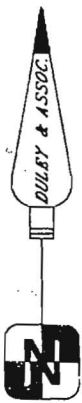
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START		

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	\$ <u>25.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>0658</u>

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



FOR SURVEY ORDER/APPROVAL FORMS, PRICES & MORE VISIT US AT WWW.DULEY.BIZ
LOCATION DRAWING OF:

#4875 TEN OAKS ROAD

LOT 2

ORNDORFF PROPERTY

PLAT NO. 8829

HOWARD COUNTY, MD

SCALE: 1"=140'

DATE: 10-11-10

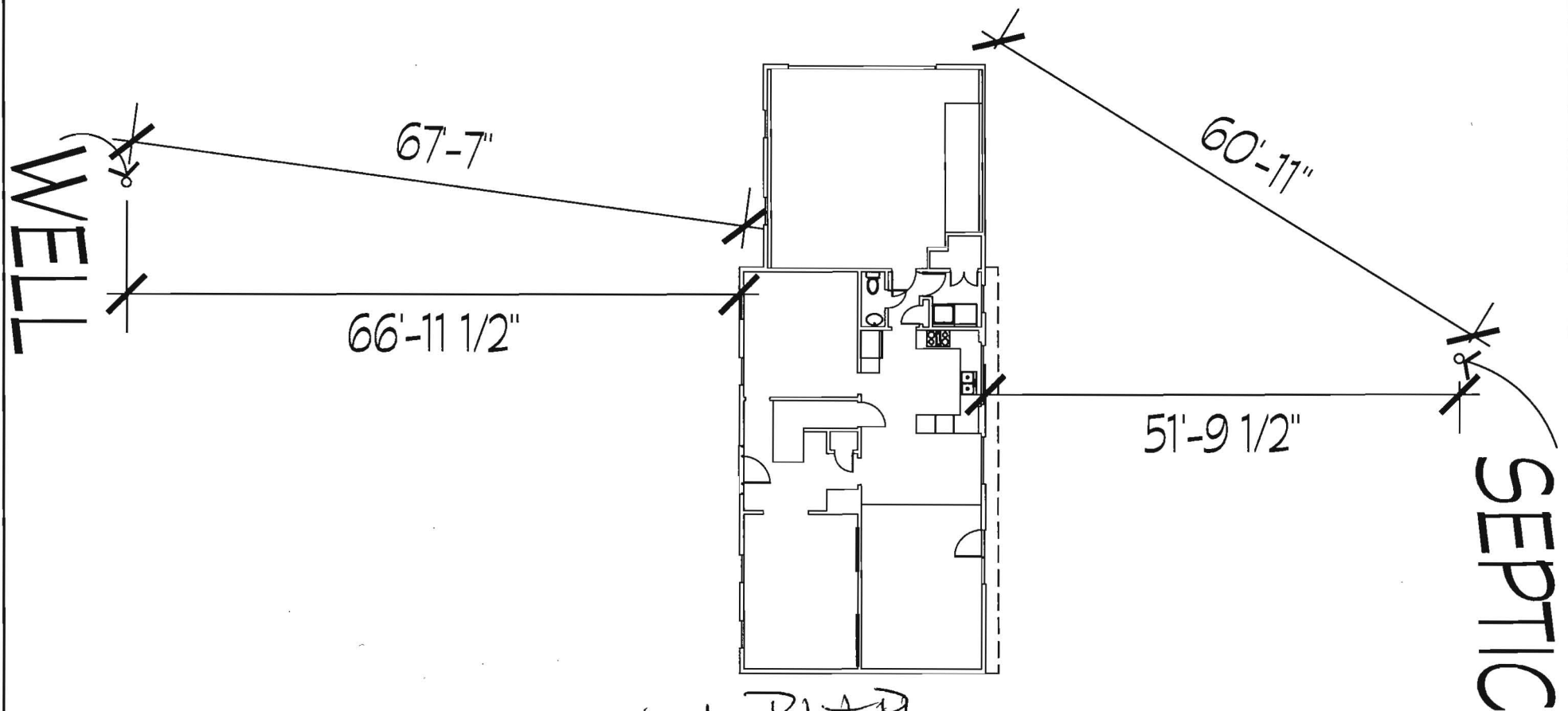
A LAND SURVEYING COMPANY



DULEY
AND
ASSOCIATES, INC.
SERVING D.C. & MD.

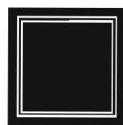


14604 ELM STREET



DRAWING TITLE
EXG. WELL & SEPTIC LOCATIONS

PROJECT NAME
KUFEL RESIDENCE ADDITION



bluehouse architecture, llc
1993 Barley Road
Marriottsville, Maryland 21104
mclark@bluehouseARCH.com
Phone: 410-549-3377
Fax: 410-549-3377
www.bluehouseARCH.com

FOR DESIGN
REVIEW ONLY -
NOT FOR
CONSTRUCTION

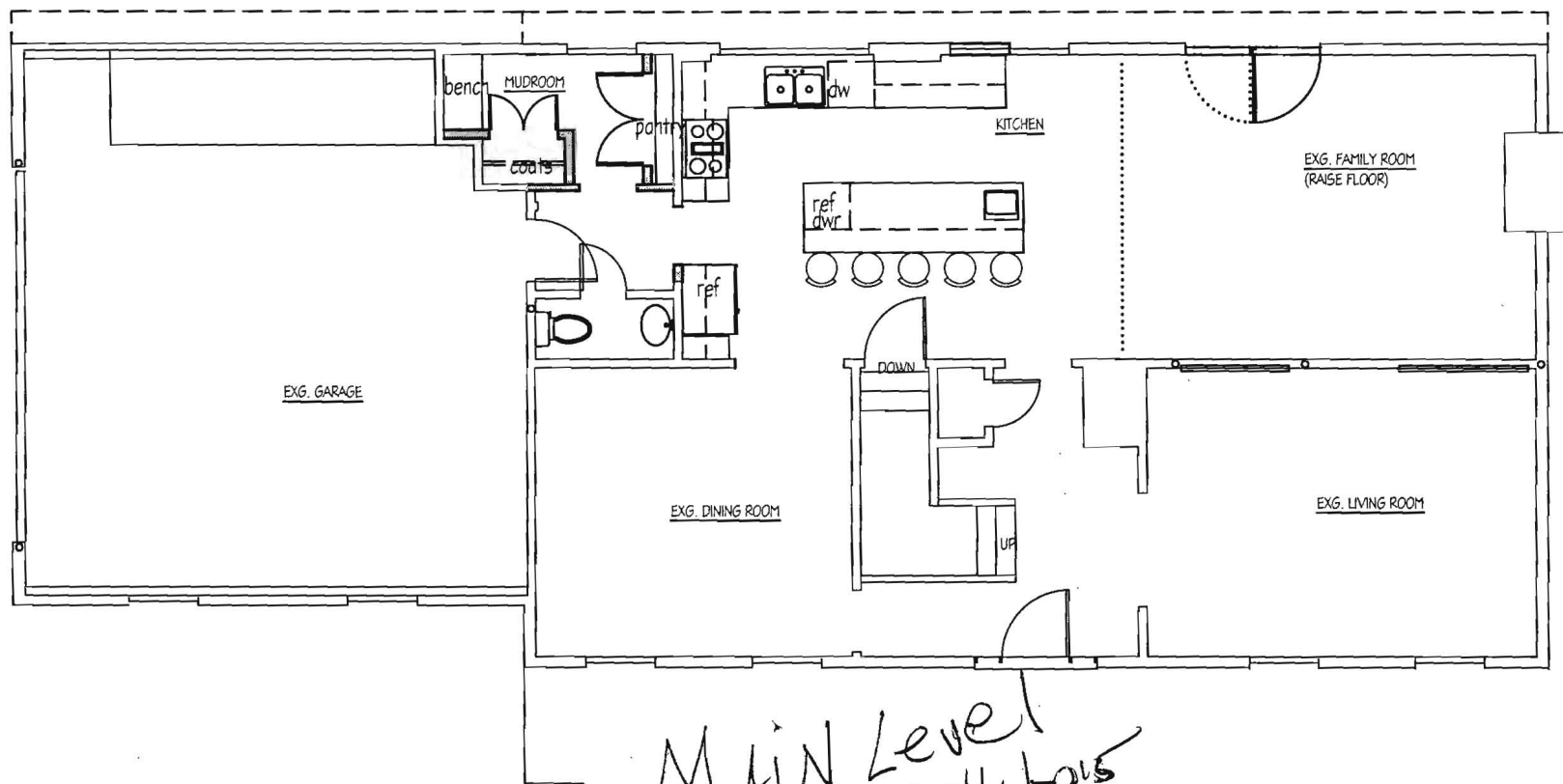
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DATE :
©04/15/2015

FILE No. :
15003-CD

PROJ. NO.
5003

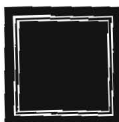
DRAWING NO.
SITE
1 of XX



MAIN Level
'OK' sub 4/16/2015

DRAWING TITLE
proposed first floor plan

PROJECT NAME
kufel residence addition



bluehouse architecture, llc

1993 Barley Road
Marriottsville, Maryland 21104
mclark@bluehouseARCH.com

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Fax: 410-549-3377
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SCALE :
1/8"=1'-0"

DATE :
©04/14/2015

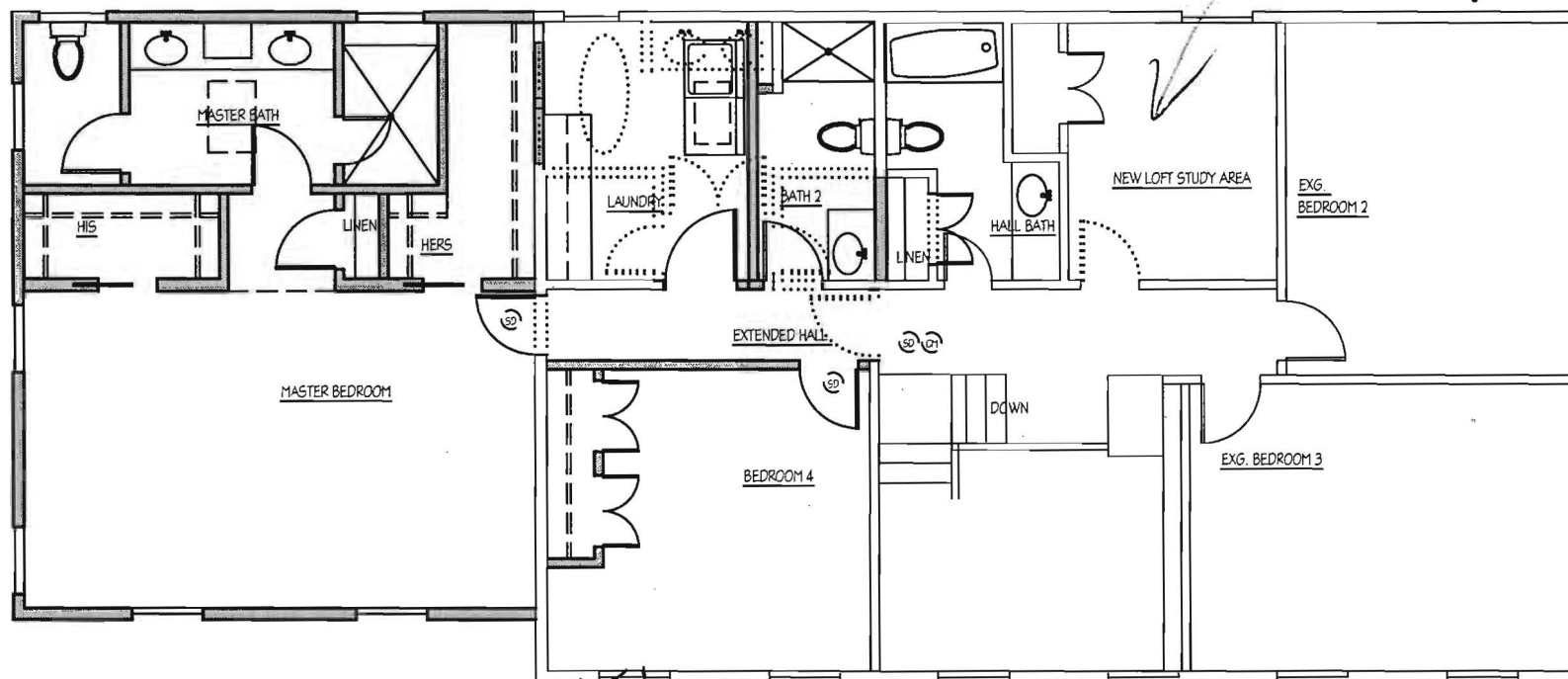
FILE No. :
15003-ex1

PROJ. NO.
15003

DRAWING NO.

pl-1

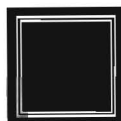
1 of XX



UPPER LEVEL
4 Bedroom OK
4/16/2015

DRAWING TITLE
proposed second floor plan

PROJECT NAME
kufel residence addition



bluehouse architecture, llc

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Marriottsville, Maryland 21104
mclart@bluehouseARCH.com

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SCALE :
1/8"=1'-0"

DATE :
©04/14/2015

FILE No. :
15003-ex1

PROJ. NO.
15003

DRAWING NO.

pl-2

1 of XX