

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: 21215

Permit No.: 815000574

Building Address: 16155	TINKERTI	MINKE!	Property Owner's Name:	<u> </u>	<u> </u>	
City COLOINO State: 1	Zip Code:	1.7617	City)	State:	Zip Code:	20177
Suite/Apt #: SDP/WP/BA #:			City: State: Zip Code: VO 1771 Phone: Fax:			
Census Tract:	Subdivision: MOG CO	CU15 .	Email:			
Census Tract:	Subulvision	3	Applicant's Name & Mailing		ner than stated l	nerein)
Section: Area	iLot:	,,,,	Applicant's Name:	11.6.116	. O. C.	
Tax Map: Parcel:		. 75 7	Applicant's Name:	1) / 3	1.157	
Zoning: Map Coordinat	es: Lot Size	:: [,] x/(City: AVE TO THE Phone: AVE TO THE PHONE	State:\	Zip Code	# <u></u>
Existing Use:			Email:		· · · · · ·	
Proposed Use:	i. The in		Contractor Company:	10.V15	Oil	,
			Contact Person:	301 4161	IN COM	·
Estimated Construction Cost: \$\			Address: Males M	- 1171618	· 54	
Description of Work:			City:S	tate: 1111)	_ Zip Code: 立	1(1)-1-
1.75+011 1000 Gal	· Liston Corr	331 (1)	License No.:	on god		
Dicocis Acare			Phone: 110 29	Fax:		
Occupant or Tenant:		- 5	Email:			
and the second control of the second control		ПМо	Engineer/Architect Compar		1.	
Was tenant space previously occupied?		. LINO				
Contact Name:			Responsible Design Prof.: _			 ~
Address:			Address:		14.	
City:	State:Zip Code:		City:S	tate:	Zip Code:	- m ²
Phone:			Phone:			
				,		
Email:			Email:			
Commercial Building Characteristics	Residential Building Ch	naracteristics	Utilities	× :		
Height:	☐ SF Dwelling ☐ SF To		Water Supp	ly .		
No. of stories:	Depth	<u>Width</u>	☐ Public		H STEED STORY	
Gross area, sq. ft./floor:	1 st floor:		Private			
	2 nd floor:		Sewage Dispo	sal .		
Area of construction (sq. ft.):	Basement:		□ Public			
Use group:	☐ Unfinished Basement	t	Private	· · · · · ·		
	☐ Crawl Space		Electric: Yes	- FINO		
Construction type:	☐ Slab on Grade		Gas: Yes		Andrew grant Andrew A	
☐ Reinforced Concrete	No. of Bedrooms:		Heating Syste			
☐ Structural Steel	Multi-family Dv	velling	☐ Electric ☐ Oil		Manager and	
☐ Masonry ☐ Wood Frame	No. of efficiency units: No. of 1 BR units:		□ Natural Gas □ Propa	no Gas	Burger Andrew Action	Chiefe by tacks
☐ State Certified Modular	No. of 2 BR units:	·	Other:	ane Gas	是我自身的特殊性。	
	No. of 3 BR units:		Sprinkler System	em:		
	Other Structure:		☐ Yes ☐ No			
	Dimensions:		1 100		- 0740 mich	
> Roadside Tree Project Permit	Footings:		Grading D.	ermit Number:	ALTERNATION OF THE PARTY OF THE	NAME OF TAXABLE
☐Yes ☐No Roadside Tree Project Permit #	Roof: State Certified Modu	ılar	Graungr	errine Namber.		
Roadside Tree Project Permit #	☐ Manufactured Home		Building Shell Permit Number:			
THE UNDERSIGNED HEREBY CERTIFIES AND AGRE WITH ALL REGULATIONS OF HOWARD COUNTY OF THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OF THE APPLICATION OF THE APPLICATIO	WHICH ARE APPLICABLE THERETO UNITY OFFICIALS THE RIGHT TO EN	D; (4) THAT HE/SHE V NTER ONTO THIS PROI	VILL PERFORM NO WORK ON THE ABO	VE REFERENCED PRO	PERTY NOT SPECIFIC	ALLY DESCRIBED I
Chira card carabatanasa a como		*PLEASE WRITE NE	ATLY & LEGIBLY**	-54 97 10.00	and restoration and	SCHOOL COMMON
	10 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-FOR OFFICE	USE ONLY-		THY BEET	
AGENCY DATE S	SIGNATURE OF APPROVAL		INFORMATION	Filing Fee	\$	
State Highways		Front:	4.	Permit Fee	\$ \$	

Distribution of Conjes:

Building Officials

PSZA (Zoning)

PSZA (Engineering)

White: Building Officials

Health

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

Green: PSZA, Zoning

Yellow: PSZA, Engineering

SDP/Red-line approval date:

Lot Coverage for New Town Zone:

All minimum setbacks met? ☐ Yes ☐ No
Is Entrance Permit Required? ☐ Yes ☐ No

☐ Yes ☐ No

Rear

Side:

Side St.:

Historic District?

Tech Fee **Excise Tax** PSFS . **Guaranty Fund** Add'I per Fee **Total Fees** \$ **Sub-Total Paid Balance Due** Check #

Pink: Health

Gold: SHA

W.

☐ CONTINGENCY CONSTRUCTION START



Building Permit Application

Howard County Maryland

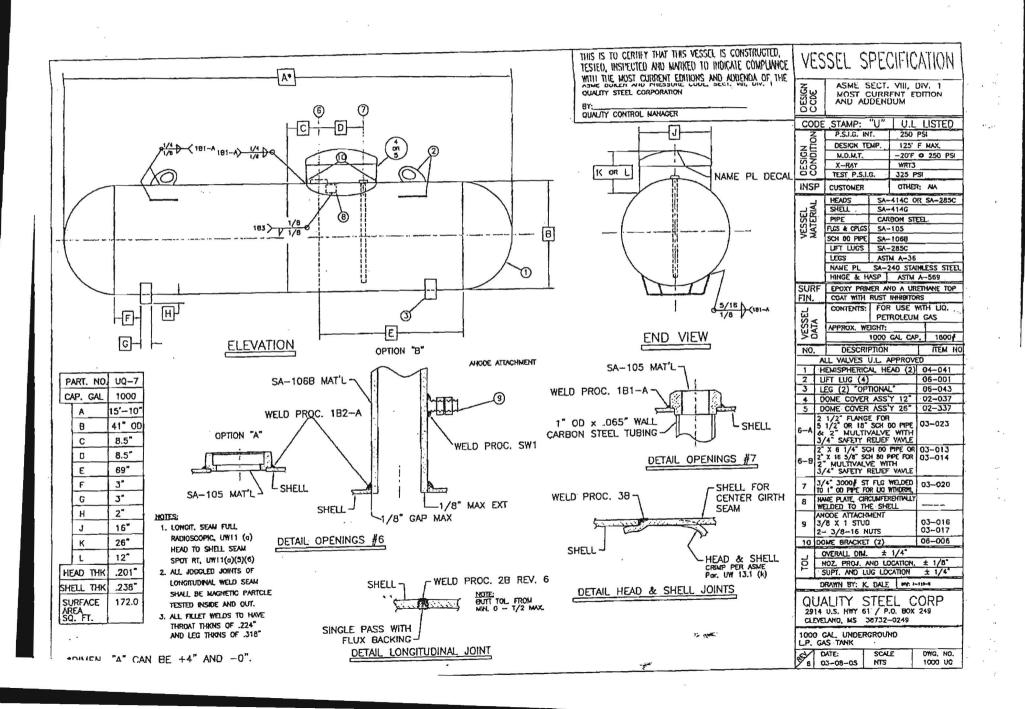
Department of Inspections, Licenses and Permits

3430 Court House Drive Permits: 410-313-2455 www.howardcountymd.gov

Date Received: 2/2/15

Permit No.: 815000 574

	Zip Code: 21797 WP/BA #: Subdivision: Madaws a: Lot: 3	Property Owner's Name: Address: 7000 Gar Chr. City State: Phone: Email: Applicant's Name & Mailing Address, (if of Applicant's Name: Address: City: Phone: Fax: Fax: Fax: Property Owner's Name: State: Fax: Fax: Fax: Property Owner's Name: State:	Zip Code 20177 ax: other than stated herein) Zip Code 2128
Existing Use: Proposed Use:	TOK	Email:Contractor Company:	ri T
		Contact Person:	
Estimated Construction Cost: \$ 4	000	Address: (018 N) May	~ 5t
Description of Work:	1100	City:State: YV	Zip Code: 2074
install 1000 gul	man franci	License No. : 468	
BUDGOUT FOUR		Phone: 410 239 9515 Fax:	
Occupant or Tenant:	2.0	Email:	
Was tenant space previously occupied?	V Yes □No	Facines (Asshitant Company C	
		Engineer/Architect Company	
Contact Name:		Responsible Design Prof.:	Macket -
Address:		Address:	
City:		City:State:	
Phone:	Fax:	Phone:Fax: _	
Email:		Email:	
Commercial Building Characteristics	Residential Building Characteristics	Utilities	m 2000
Height:	☐ SF Dwelling ☐ SF Townhouse	Water Supply	
No. of stories:	Depth Width	Public	
Gross area, sq. ft./floor:	1 st floor:	Private	
	2 nd floor:	Sewage Disposal	
Area of construction (sq. ft.):	Basement:	□ Public	
Hea groups	☐ FinIshed Basement ☐ Unfinished Basement	Private	
Use group:	☐ Crawl Space		
Construction type:	☐ Slab on Grade	Electric: Yes	
☐ Reinforced Concrete	No. of Bedrooms:	Gas: Yes No	
☐ Structural Steel	Multi-family Dwelling	<u>Heating System</u>	
☐ Masonry	No. of efficiency units:	☐ Electric ☐ Oil	
☐ Wood Frame	No. of 1 BR units:	☐ Natural Gas ☐ Propane Gas	
☐ State Certified Modular	No. of 2 BR units:	☐ Other:	
	No. of 3 BR units:	Sprinkler System:	
	Other Structure:	☐ Yes ☐ No	CAST SINGULA
> Roadside Tree Project Permit	Dimensions:	II X	
□Yes □No	Footings: Roof:	Grading Permit Number:	
Roadside Tree Project Permit #	☐ State Certified Modular		
	☐ Manufactured Home	Building Shell Permit Number:	
WITH ALL REGULATIONS OF HOWARD COUNTY W THIS APPLICATION (5) THAT HE/SHE GRANTS COU Applicance Signature	/HICH ARE APPLICABLE THERETO; (4) THAT HE/SHE \ INTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PRO	MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS C WILL PERFORM NO WORK ON THE ABOVE REFERENCED PRO PERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMI	OPERTY NOT SPECIFICALLY DESCRIBED IN





Puilding Permit ApplicationHoward County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455 www.howardcountymd.gov

Date Received: 2/3///

Existing Use:		E FAMILY FINE		Email:	Sec. Bu	v les	
	PROPERTY CONTRACTOR			Contact Person:	Island A		
Estimated Construction				Address:	11/2/0	Kalas I dan sa	
Description of Work:		rit to reuning	649646	City:State License No. : Phone:			
				Email:	Tax.	Janes Cantie met	
Occupant or Tenant:							
Was tenant space previous			□No	Engineer/Architect Company: _			
Contact Name:				Responsible Design Prof.:			
Address:	2000			Address:			
City:		State: Zip Code:	4999	City:State	:	Zip Code:	
Phone:	1103	Fax:		Phone: Fax:			
Email: 25 To State of the Control of			Email:				
				211011	*		
Commercial Building Cl Height:	haracteristics			Utilities			
No. of stories:		☐ SF Dwelling ☐ SF Tov	Width	Water Supply			
Gross area, sq. ft./floor:		1 st floor:	7,00910	Public			
	1000	2 nd floor:		☐ Private Sewage Disposal			
Area of construction (sq	. ft.):	Basement:	100191	Public			
Use group:		☐ Unfinished Basement		Private			
		☐ Crawl Space		Electric: ☐ Yes ☐	No		
<u>Construction t</u>	ype:	☐ Slab on Grade			No		
Reinforced Concrete		No. of Bedrooms:	-112	Heating System			
☐ Structural Steel ☐ Masonry		Multi-family Dw No. of efficiency units:		☐ Electric ☐ Oil			
☐ Wood Frame			3/8	☐ Natural Gas ☐ Propane	Gas		
☐ State Certified Modul	lar		OLA -	☐ Other:			
		No. of 3 BR units:	MA	Sprinkler System:	desert i		
			44	☐ Yes ☐ No			
	ioct Pormit				I RESERVE	SIMPLY OF A STATE OF	
Poadside Tree Proj	□No	Roof:	314	Grading Permi	t Number:	G14000245	
➤ Roadside Tree Proj		☐ State Certified Modul	ar NA				
	ct Permit #		23/12	Building Shell Permit Number:			
	the same of the same of the same of	Dimensions: Footings: Roof: State Certified Modul	ija. Na	Grading Permit Number: Building Shell Permit Number: TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) HE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND PO		GIYQQQYS	
□Yes Roadside Tree Projec		☐ Manufactured Home EES AS FOLLOWS: (1) THAT HE/SHE	IS AUTHORIZED TO	MAKE THIS APPLICATION; (2) THAT THE INFO	RMATION IS CO	PRRECT; (3) THAT HE/SHE WILL COMP	
☐Yes Roadside Tree Project THE UNDERSIGNED HEREBY CE WITH ALL REGULATIONS OF HE	RTIFIES AND AGR	EES AS FOLLOWS: (1) THAT HE/SHE WHICH ARE APPLICABLE THERETO	(4) THAT HE/SHE W	ILL PERFORM NO WORK ON THE ABOVE RE ERTY FOR THE PURPOSE OF INSPECTING THE	FERENCED PROI WORK PERMIT	PERTY NOT SPECIFICALLY DESCRIBED	
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THE UNDERSIGNED HEREBY CE WITH ALL REGULATIONS OF HE THIS APPLICATION; (5) THAT HE Applicant's Signature	RTIFIES AND AGR OWARD COUNTY E/SHE GRANTS CO	EES AS FOLLOWS: (1) THAT HE/SHE WHICH ARE APPLICABLE THÉRETO UNTY OFFICIALS THE RIGHT TO EN	; (4) THAT HE/SHE W TER ONTO THIS PROF	ILL PERFORM NO WORK ON THE ABOVE RE ERTY FOR THE PURPOSE OF INSPECTING THE INT Name	FERENCED PROI WORK PERMIT	PERTY NOT SPECIFICALLY DESCRIBED	
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☐Yes Roadside Tree Project THE UNDERSIGNED HEREBY CE WITH ALL REGULATIONS OF HOTHIS APPLICATION; (5) THAT HE Applicant's Signature Email Address	ERTIFIES AND AGR OWARD COUNTY E/SHE GRANTS CO	EES AS FOLLOWS: (1) THAT HE/SHE WHICH ARE APPLICABLE THÉRETO UNTY OFFICIALS THE RIGHT TO EN	(4) THAT HE/SHE WITER ONTO THIS PROF	ILL PERFORM NO WORK ON THE ABOVE RE ERTY FOR THE PURPOSE OF INSPECTING THE INTERIOR OF HOWARD COUNTY TLY & LEGIBLY**	FERENCED PROI WORK PERMIT	PERTY NOT SPECIFICALLY DESCRIBED	
☐Yes Roadside Tree Project THE UNDERSIGNED HEREBY CE WITH ALL REGULATIONS OF HO THIS APPLICATION; (5) THAT HE Applicant's Signature Email Address	ERTIFIES AND AGR OWARD COUNTY E/SHE GRANTS CO	EES AS FOLLOWS: (1) THAT HE/SHE WHICH ARE APPLICABLE THÉRETO UNTY OFFICIALS THE RIGHT TO EN	; (4) THAT HE/SHE WITER ONTO THIS PROF	ILL PERFORM NO WORK ON THE ABOVE RE ERTY FOR THE PURPOSE OF INSPECTING THE INTERIOR OF HOWARD COUNTY TLY & LEGIBLY**	FERENCED PROI WORK PERMIT	PERTY NOT SPECIFICALLY DESCRIBED	
THE UNDERSIGNED HEREBY CE WITH ALL REGULATIONS OF HOTHIS APPLICATION; (5) THAT HE Applicant's Signature	RTIFIES AND AGR OWARD COUNTY E/SHE GRANTS CO	EES AS FOLLOWS: (1) THAT HE/SHE WHICH ARE APPLICABLE THÉRETO UNTY OFFICIALS THE RIGHT TO EN	O: DIRECTOR OF FOLEASE WRITE NEA	ILL PERFORM NO WORK ON THE ABOVE RE ERTY FOR THE PURPOSE OF INSPECTING THE INTERIOR OF HOWARD COUNTY TLY & LEGIBLY**	FERENCED PROI WORK PERMIT	PERTY NOT SPECIFICALLY DESCRIBED	

Heath

Is Sediment Control approval required for issuance?

Yes
No
CONTINGENCY CONSTRUCTION START

Building Officials

PSZA (Zoning)

tribution of Copies:

PSZA (Engineering)

White: Building Officials

Green: PSZA,Zoning

Yellow: PSZA, Engineering

Lot Coverage for New Town Zone:

SDP/Red-line approval date:

Side St.:

Excise Tax PSFS **Guaranty Fund** Add'I per Fee **Total Fees** \$ **Sub-Total Paid Balance Due** Check

Pink: Health

Gold: SHA



Building Permit Application

Howard ©ounty Maryland

Department of Inspections, Licenses and Permits

3430 Court House Drive

Permits: 410-313-2455

www.howardcountymd.gov

Date Received: <u>7/30/14</u>

Permit No.: <u>B14002762</u>

Building Address: 16455 Tintel the LD		Property Owner's Name:	off schom		
City: LIKEDRINE State: MD Zip Code:	21797	Address: 110455 TINK	CECHNICO		
Suite/Apt. #SDP/WP/BA #:		Phone: 301-922-112	tate: MO Zip Code: 2179		
Census Tract: Subdivision: Chap		Email: Scott Schume	commont, net		
Section:Area:Lot:		Applicant's Name & Mailing A Applicant's Name: Scott	ddress, (If other than stated herein)		
Tax Map: 13 Parcel: Grid:	25_	Address: 1001 Garan	er Lone		
Zoning: <u>PC-DEO</u> Map Coordinates:Lot	Size: 1,206	City: Highland !	State: MD Zip Code: 81797		
		Phone: 39-922-1123	Fax:		
Existing Use: ODEW LOT		Email:			
Proposed Use: 12W SINGLE FAMILY HO	m E	Contractor Company: Clas	SIC Homes OF MANYland		
Estimated Construction Cost: \$ 355,000		Contact Person: Colleen	Swisher		
Description of Work: New SINGLE FAMILY	1 11	Address: 50 W. Edmonston RD			
Description of Work: NEW STORCE PATTICE	romo_	City: Cockwille State	e: MD Zip Code: 20852		
		License No. : 5421	1		
		Phone: 301 301 3001			
Occupant or Tenant: VACANT		Email:	net-		
Was tenant space previously occupied? ☐Yes	DANO.	Engineer/Architect Company:			
Contact Name: Scott Schum		1			
		Responsible Design Prof.:			
Address: 7001 Gardner Lone		Address:			
City: Anghand State: MD Zip Co	de: <u>21197</u>	City:State	e: Zip Code:		
Phone: 30 1922-1123 Fax:		Phone:	Fax:		
Email: Scott, schume comcast. net		Email:			
		Lilian.			
Commercial Building Characteristics Residential Building		Utilities	经济的 的现在分类的		
Height: 22' 71/8'' □SF Dwelling □SF		Water Supply			
No. of stories: Gross area, sq. ft./fioor: 1 ¹¹ floor: 641	Width	☐ Public			
2 nd floor: 4)/A		(D) Private	22/17/2016		
2 nd floor: N/A Area of construction (sq. ft.): Basement: المنا	60'9"	<u>Sewage Disposal</u>			
☐ Finished Basemen		☐ Public			
Use group: Onfinished Basem	ent	Private			
☐ Crawl Space Construction type: ☐ Slab on Grade			No		
☐ Reinforced Concrete No. of Bedrooms:	5		No		
☐ Structural Steel <u>Multi-family</u>	Dwelling	Heatina System Electric □ OII			
☐ Masonry No. of efficiency unit		The State of the S			
□ Wood Frame No. of 1 BR units: □ State Certified Modular No. of 2 BR units:	A A	☐ Natural Gas ☐ Propane	Gas		
No. of 3 BR units:	DIA	☐ Other: Sprinkler System:	STATE CAMBO SALESTON		
Other Structure:		Yes No			
Dimensions:	NIA	[] [] [] [] [] [] [] [] [] []			
Roadside tree Project Parmit Footings:	NA	Grading Perm	it Number: G1 40002 45		
Roof: Roof: State Certified Mo					
☐ Manufactured Hor		Building Shell Perm	it Number:		
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE, WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THER					
THIS APPLICATION; (5) THAN HEISHE GRANTS COUNTY OFFICIALS THE RIGHT TO	ENTER ONTO THIS PROF	PERTY FOR THE PURPOSE OF INSPECTING THE	E WORK PERMITTED AND POSTING NOTICES.		
		L: 11:00 K	NA CONTRACTOR OF THE PARTY OF T		
Applicant's Signature	Pi		CEIVED		
LRIGOS (a) MIN. (OM.	_ _	7 30 14			
(2 . ' (2		ute -	JUL 3 0 2014		
Title/Company					
	le to: DIRECTOR OF F	INANCE OF HOWARD COUNTY	NSES & PERMITS		
THE CHARLES AND THE STATE OF TH	**PLEASE WRITE NEA	ATLY & LEGIBLY**	DIVISION		
	FOR OFFICE	BARROOM A SELECT SPECIAL SERVICE OF THE PARTY OF THE PART			
AGENCY DATE SIGNATURE OF APPROVAL		INFORMATION	Filing Fee \$ 100,00		
State Highways	Front:		Tech Fee \$		
Building Officials	Side:	Ti	Excise Tax \$ 0		
SIA (Zoning)	Side St.:	collingte mat2 Divor Divo	PSFS \$ Guaranty Fund \$ 50.00		
PSZA (Engineering)		settjacks met? ☐ Yes ☐No ermit Required? ☐ Yes ☐No	Add'l per Fee \$		
Health	Historic Distri	ct?	Total Fees \$		
Is Sediment Control approval required for issuance? Wes No		for New Town Zone:	Sub-Total Paid \$ Balance Due \$		
☐ CONTINGENCY CONSTRUCTION START	SUP/Red-line	approval date:	Balance Due \$ Check # 7 1 0 4		

Green: PSZA,Zoning

