

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.: <u>815003174</u>

Building Address:	Zip Code: 2777 #: vision: Lot: Grid: Lot Size:	Property Owner's Name Address:  City:  Phone:  Email:  Applicant's Name & Mailing Address, (If ot Applicant's Name:  Address:  City:  Phone:  Email:  Contractor Company:  Contact Person:	Zip Code Zip Code:Zip Code:
City: MI9h/AND State: MO  Suite/Apt. # SDP/WP/BA  Census Tract: Subdi  Section: Area:  Tax Map: Parcel:  Zoning: Map Coordinates:  Existing Use: Mo  Proposed Use: Map Coordinates: Description of Work: Mo  Description of Work: Mo  State: Map Coordinates: Mo  Subdi  Subdi Su	Zip Code: 2777 #: vision: Lot: Grid: Lot Size:	Address: City State: Phone: Email:  Applicant's Name & Mailing Address, (If ot Applicant's Name: Address: City: Phone: Email:  Contractor Company: Contact Person:	Zip Code Zip Code:Zip Code:
Suite/Apt. # SDP/WP/BA  Census Tract: Subdi  Section: Area:  Tax Map: Parcel:  Zoning: Map Coordinates:  Existing Use: Area:  Existing Use: Area:  Existing Use: Area:  Description of Work: Area:  SDP/WP/BA  Subdi  Subdi	#:  vision:  Lot:  Grid:  Lot Size:  OUTS CAR Only	Phone: Fax: Contractor Company: Fax: Contact Person: Fax: Fax: Contact Person: Fax: Fax: Fax: Fax: Fax: Fax: Fax: Fax	her than stated herein)  Zip Code:
Census Tract: Subdi Section: Area:  Tax Map: Parcel:  Zoning: Map Coordinates:  Existing Use: Proposed Use: Formula Construction Cost: \$ 6700  Description of Work: 1000 U/6	vision:Lot:Grid: Lot Size:	Applicant's Name & Mailing Address, (If ot Applicant's Name: Address: City: Phone: Email:  Contractor Company:	her than stated herein)  Zip Code:
Section: Area:  Tax Map: Parcel:  Zoning: Map Coordinates:  Existing Use: /	Lot:  Grid:  Lot Size:  OUTS CAR Only	Applicant's Name & Mailing Address, (If ot Applicant's Name: Address: City: Phone: Email:  Contractor Company: Contact Person:	her than stated herein)  Zip Code:
Tax Map: Parcel: Zoning: Map Coordinates:  Existing Use: And Proposed Use: And Estimated Construction Cost: \$ 6700  Description of Work: /4002 U/6 =	Grid: Lot Size:  OUTS CAR Only	Applicant's Name:  Address: City: Phone: Email:  Contractor Company: Contact Person:	Zip Code:
Tax Map: Parcel: Zoning: Map Coordinates:  Existing Use: And Conv  Proposed Use: And Conv  Estimated Construction Cost: \$ 6700  Description of Work: / 4000 U/6 =	Grid: Lot Size:  OUTS CAR Only	Applicant's Name:  Address: City: Phone: Email:  Contractor Company: Contact Person:	Zip Code:
Existing Use:  Existing Use:  Proposed Use:  Estimated Construction Cost: \$ 6700  Description of Work: / 600 U/6 =	Lot Size:	Address: City: Phone: Fax: Email:  Contractor Company: Contact Person:	Zip Code:
Existing Use: VPD  Proposed Use: Log - Gen  Estimated Construction Cost: \$ 6700  Description of Work: 1000 U/6 -	outscal only	Phone: Fax: Contractor Company: Fax: Contractor Company: Fax: Contact Person: Fax: Fax: Contact Person: Fax: Contact Person: Fax: Fax: Contact Person: Fax:	
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Estimated Construction Cost: \$ 6700.  Description of Work: 1000.	outscal only	Contact Person:	<u>C</u> .
Estimated Construction Cost: \$ 6700.  Description of Work: 1000 U/6 -	outsial only	Contact Person:	TOTAL IN
Description of Work: 1000 U/6 -	outsial only	Light Alamanth	000
Description of Work: Propos	100/3122009	Address 1354 NORAISUM	
Flopm	11 0	City: White Hour State: MA	Zip Code: 2//6/
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*		Phone: 406920471 Fax: 1	11-775005)8
O		Email:	
Occupant or Tenant:			
Was tenant space previously occupied?	□Yes □No	Engineer/Architect Company:	
Contact Name: John & CA MOL	NCBeth	Responsible Design Prof.:	4.
Address: 6530 River Cly	ocks		
		Address:	
City: Att In P State:	Zip Code:	City:State:	Zip Code:
Phone: 30/ 554 - 037/Fax:		Phone: Fax:	
Email: CANOL. Moberth & C	19 A - 30N - NIPE	Email:	
Lindin		Email:	
Commercial Building Characteristics Resid	dential Building Characteristics	Utilities	ENGROVE DUFFE
	Dwelling ☐ SF Townhouse	Water Supply	
No. of stories:	<u>Depth</u> <u>Width</u>	□ Public	
Gross area, sq. ft./floor: 1 <sup>st</sup> flo	The state of the s	☑ Private	
2 <sup>nd</sup> flo		Sewage Disposal	
	nent:	□ Public	
	ished Basement finished Basement	10 X 8 MACO	
5 1	awl Space	□ Private	
	b on Grade	Electric:	
Li Reilloicea conciete	f Bedrooms:	Gas: Yes No	
☐ Structural Steel		Gas: Yes No <u>Heating System</u>	
☐ Structural Steel	f Bedrooms:		
☐ Structural Steel ☐ Masonry     No. o ☐ Wood Frame     No. o	f Bedrooms:  Multi-family Dwelling  f efficiency units:  f 1 BR units:	Heating System	
☐ Structural Steel ☐ Masonry No. o ☐ Wood Frame No. o ☐ State Certified Modular No. o	f Bedrooms:  Multi-family Dwelling  f efficiency units:  f 1 BR units:  f 2 BR units:	Heating System  ☐ Electric ☐ Oil	
☐ Structural Steel ☐ Masonry No. o ☐ Wood Frame No. o ☐ State Certified Modular No. o No. o	f Bedrooms:  Multi-family Dwelling  f efficiency units: f 1 BR units: f 2 BR units: f 3 BR units:	Heating System  ☐ Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas	
☐ Structural Steel ☐ Masonry ☐ Wood Frame ☐ State Certified Modular No. o Other	f Bedrooms:  Multi-family Dwelling  f efficiency units: f 1 BR units: f 2 BR units: f 3 BR units: r Structure:	Heating System  ☐ Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐ Other:	
☐ Structural Steel ☐ Masonry ☐ Wood Frame ☐ State Certified Modular No. o Other Dime	f Bedrooms:  Multi-family Dwelling  f efficiency units: f 1 BR units: f 2 BR units: f 3 BR units: r Structure: nsions:	Heating System  ☐ Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐ Other: Sprinkler System:	
☐ Structural Steel ☐ Masonry ☐ Wood Frame ☐ State Certified Modular No. o  Othe  Dime  Roadside Tree Project Permit Footi	f Bedrooms:  Multi-family Dwelling  f efficiency units:  f 1 BR units:  f 2 BR units:  f 3 BR units:  r Structure:  nsions:  ngs:	Heating System  ☐ Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐ Other: Sprinkler System:	
Structural Steel  ☐ Masonry    No. o  ☐ Wood Frame    No. o  ☐ State Certified Modular    No. o  Other  Dime  Roadside Tree Project Permit    Footi  ☐ Yes  ☐ No. o  Roof:	f Bedrooms:  Multi-family Dwelling  f efficiency units:  f 1 BR units:  f 2 BR units:  f 3 BR units:  r Structure:  nsions:  ngs:	Heating System  ☐ Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐ Other:  Sprinkler System: ☐ Yes ☐ No	

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA ( Engineering )		
Health	7/29	15 H.Oswal

CONTINGENCY CONSTRUCTION START

Front:		
Rear:		
Side:	e Article	
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	\$
Permit Fee	\$ 100.00
Tech Fee	\$ 10.00
Excise Tax	\$
PSFS	\$:
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ 0.00
Sub-Total Paid	\$
Balance Due	\$
Check	# 1076

Distribution of Copies: White; Building Officials

Yellow: PSZA, Engineering

Pink: Health

Gold: SHA

