



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: 14894 Roxbury Rd
City: Glenelg State: M Zip Code: _____
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: Merrivether Farm II
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____
Existing Use: Vacant
Proposed Use: Construction Trailer
Estimated Construction Cost: \$ 19000
Description of Work: Construction Trailer
13' x 60'
Occupant or Tenant: _____
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: Toll MD III Limited Partnership
Address: 7164 Columbia Gateway Dr. # 230
City: Columbia State: MD Zip Code: 21046
Phone: 410 489 7408 Fax: _____
Email: _____
Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Steve Lenchell
Address: 8838 Sweet Gum Rd
City: Springdale State: Va Zip Code: 22153
Phone: 703 403 7621 Fax: _____
Email: peckpermits@gmail.com
Contractor Company: Toll MD III Limited Partnership
Contact Person: Mike
Address: 7164 Columbia Gateway Dr. # 230
City: Columbia State: MD Zip Code: 21046
License No.: _____
Phone: _____ Fax: _____
Email: _____

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	<u>Depth</u> <u>Width</u>
Gross area, sq. ft./floor:	1 st floor: 2 nd floor:
Area of construction (sq. ft.):	Basement:
Use group:	<input type="checkbox"/> Finished Basement
	<input type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
<u>Construction type:</u>	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>
<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:
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

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 type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Heating System</u>
<input 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 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: Steve Lenchell Print Name: Steve Lenchell
Email Address: peckpermits@gmail.com Date: 6/2/15
Title/Company: Samant Management

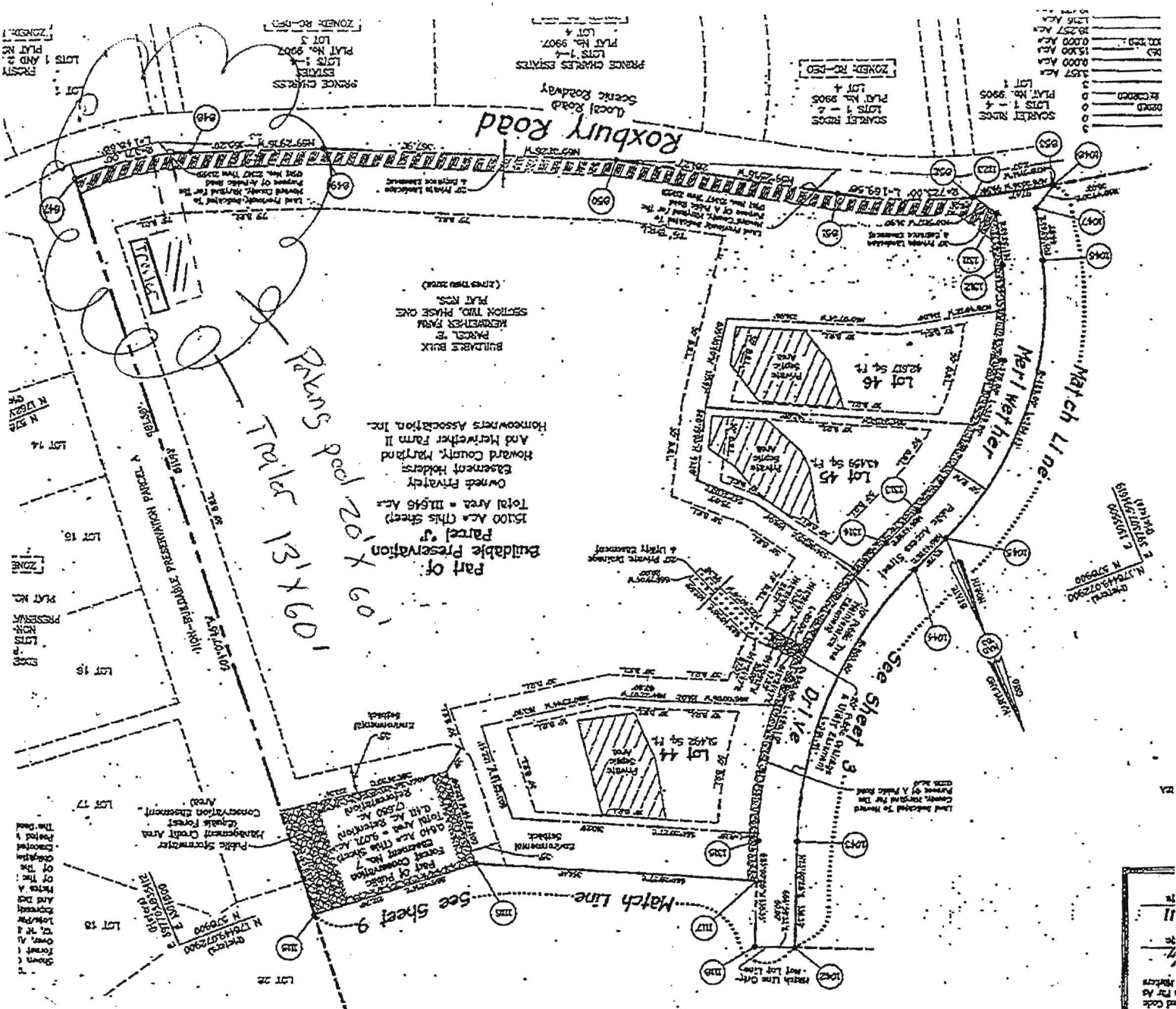
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
PLEASE WRITE NEATLY & LEGIBLY
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	6/3/15	[Signature]

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	#



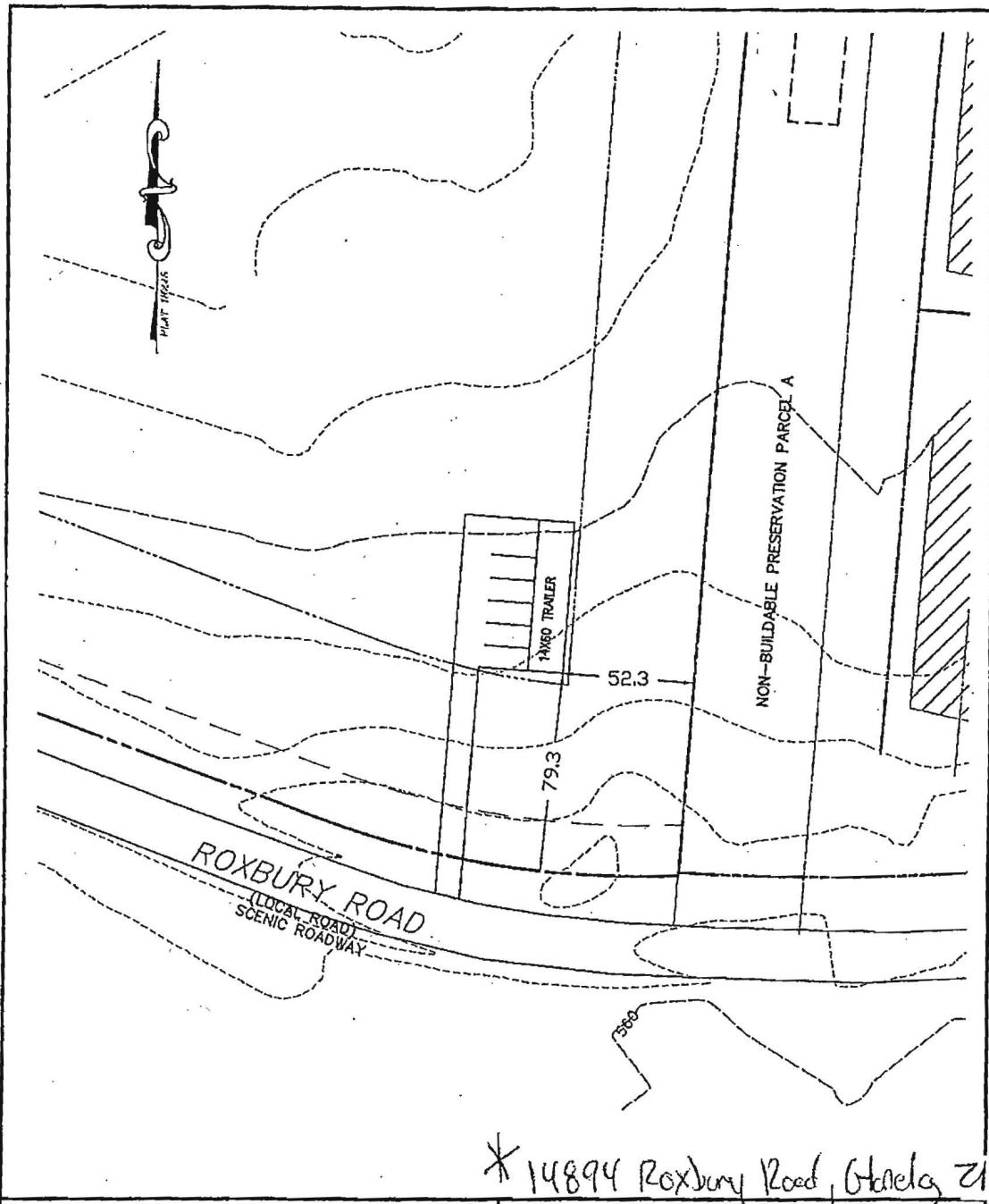
APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____
 APP. SAN Phyllis DATE: 6/3/5
 DESC. OF WORK:

* Approved Re-location of
 self-contained trailer.

Site plan
 Walk down
 on set backs
 Walk Plan
 Wed 1+3
 Thu 1+3
 1 1/2 2 weeks



* 14894 Roxbury Road, Gladys 21737

BUILDING SETBACKS (B.R.L.'s) SHOWN HEREON PER SITE
DEVELOPMENT PLAN SETBACK DISTANCES SHOWN HEREON AS "±"
HAVE AN ACCURACY OF ±0.1' FOOT.

PLOT PLAN

CATTAIL

D.E. 12124, P.C. 120

PLAT No. 21735

FOURTH ELECTION DISTRICT

HOWARD COUNTY



Land Planning
Engineering
Land Surveying

ESE Consultants Inc.
7164 Columbia Gateway Dr.
Suite 203
Columbia, MD 21046
TEL: 410-872-9105
FAX: 410-872-4870

DATE: 04/09/15

SCALE: 1"=50'

FILE: TRAILER RELOCATION

CHK'D: MJB

JOB#: 1214

DRAWN: MJB