



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: 11/18/15

Permit No.: B15005126

Building Address: 3540 Countryside Drive
City: Shinnwood State: MD Zip Code: 21788
Suite/Apt. # SDP/WP/BA #:
Census Tract: Subdivision:
Section: Area: Lot:
Tax Map: Parcel: Grid:
Zoning: Map Coordinates: Lot Size:
Existing Use:
Proposed Use:
Estimated Construction Cost: \$ 144000
Description of Work: 2-30' x 24' x 30' (SEE B15003801) FOR FOUNDATION
Occupant or Tenant:
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name:
Address:
City: State: Zip Code:
Phone: Fax:
Email:

Property Owner's Name:
Address:
City: State: Zip Code:
Phone: Fax:
Email:
Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name:
Address:
City: State: Zip Code:
Phone: Fax:
Email:
Contractor Company:
Contact Person:
Address:
City: State: Zip Code:
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:	Depth Width
Gross area, sq. ft./floor:	1 st floor: 24
	2 nd floor: 24
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:
➤ 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
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
<input type="checkbox"/> 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:
Email Address:
Title/Company:

Print Name:
Date:

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	\$
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

THIS DOCUMENT IS CERTIFIED TO:

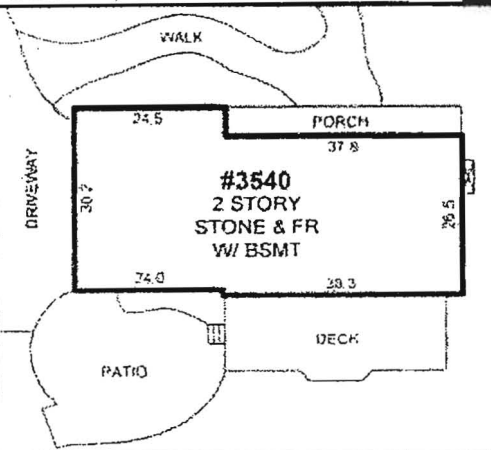


MID-ATLANTIC
SETTLEMENT SERVICES

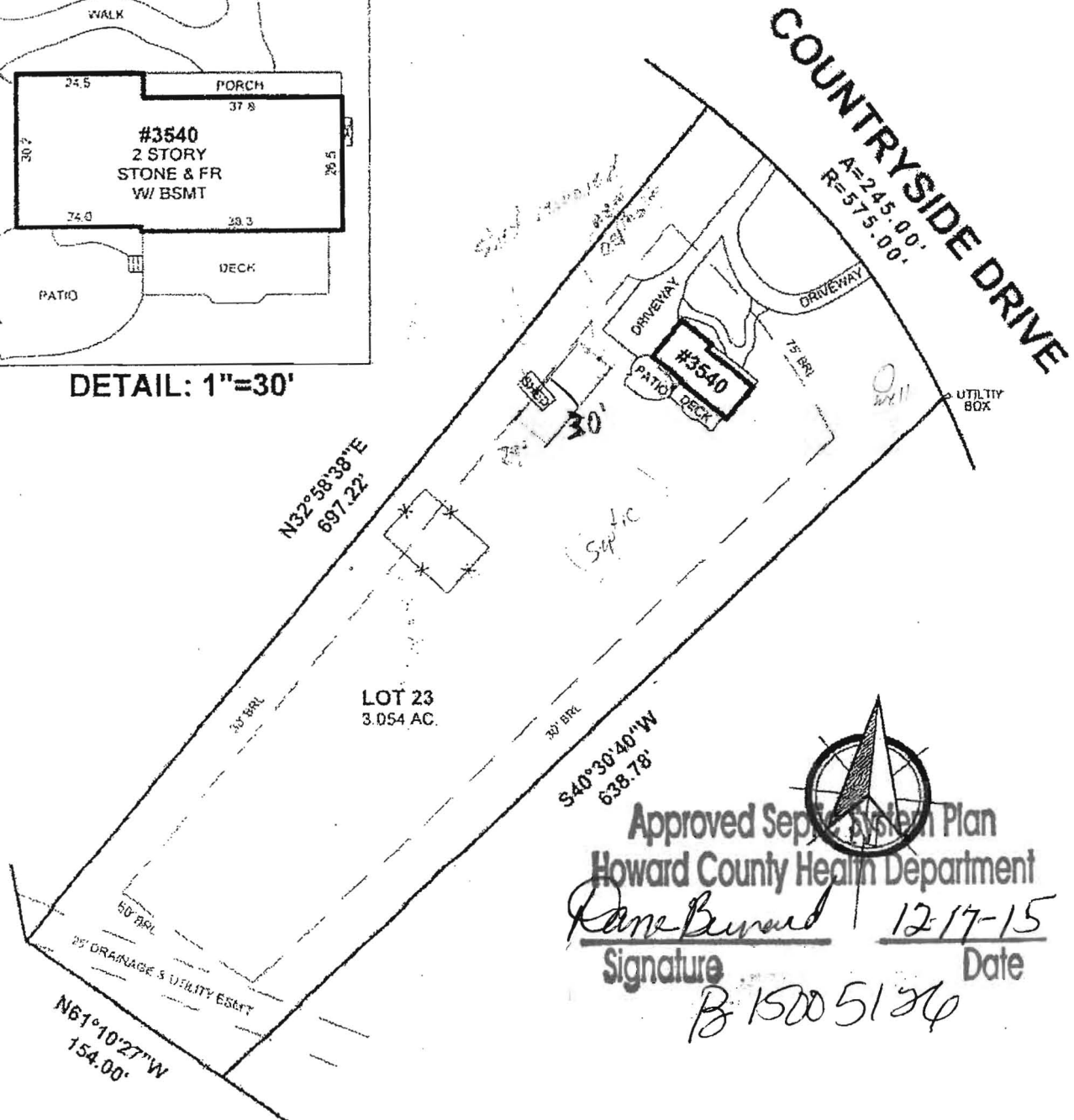
CASE #: 71886



TL TRIMLINE
TECHNOLOGIES



DETAIL: 1"=30'



Approved Septic System Plan
Howard County Health Department
Rene Burd 12/17-15
Signature Date
B 15005126

LOCATION DRAWING OF:

#3540 COUNTRYSIDE DRIVE

LOT 23

COUNTRYSIDE

PLAT NO. 4782

LEGEND:

W - FENCE
BE - BASEMENT ENTRANCE
BW - BAY WINDOW
BR - BRICK
BRL - BLDG. RESTRICTION LINE
BSMT - BASEMENT
CS - CONCRETE STOOP
CONC - CONCRETE
DR - DRIVEWAY
FR - FRAME
MAC - MACADAM
OH - OVERHANG

A Land Surveying Company

DULEY

and
Associates, Inc.

Serving D.C. and MD.