

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER

Building Address 8449 Church Lane Dr. Ellicott City MD 21043  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_  
Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_  
Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_  
Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot Size \_\_\_\_\_

Property Owner's Name OSVALDINA L. GROSS  
Address 8449 Church Lane Dr.  
City Ellicott City State MD Zip Code 21043  
Home Phone 410 750 0479 Work Phone \_\_\_\_\_  
Applicant's Name & Mailing Address, (if other than stated herein): \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use SFD  
Proposed Use Same  
Estimated Construction Cost \$ 4,000.00

Contractor Company \_\_\_\_\_  
Contact Person \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
License No. \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Description of Work Installing above ground soft side pool with 6' fence around it.

Engineer or Architect Company \_\_\_\_\_

Occupant or Tenant \_\_\_\_\_

Contact Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

**Building Characteristics**  
Height: \_\_\_\_\_  
No. of stories: \_\_\_\_\_  
Gross area, sq. ft. per floor: \_\_\_\_\_  
Use group: \_\_\_\_\_  
Construction type:  
☐ Reinforced Concrete  
☐ Structural Steel  
☐ Masonry  
☐ Wood Frame  
☐ State Certified Modular  
**Utilities**  
Water Supply:  
☐ Public  
☐ Private  
Sewage Disposal:  
☐ Public  
☐ Private  
Electric Yes ☐ No ☐  
Gas Yes ☐ No ☐  
Heating System:  
Electric ☐ Oil ☐  
Natural Gas ☐  
Propane Gas ☐  
Sprinkler system: N/A ☐  
☐ Full  
☐ Partial  
☐ Other Suppression  
☐ # of Heads

**Building Characteristics**  
SF Dwelling ☐ SF Townhouse ☐  
Depth \_\_\_\_\_ Width \_\_\_\_\_  
1<sup>st</sup> floor: \_\_\_\_\_  
2<sup>nd</sup> floor: \_\_\_\_\_  
Basement: \_\_\_\_\_  
Finished Basement ☐ Unfinished Basement ☐ Crawl space ☐ Slab on Grade ☐  
No. of Bedrooms \_\_\_\_\_  
Multi-family dwellings:  
No. of efficiency units: \_\_\_\_\_  
No. of 1 BR units: \_\_\_\_\_  
No. of 2 BR units: \_\_\_\_\_  
No. of 3 BR units: \_\_\_\_\_  
Other Structure: \_\_\_\_\_  
Dimensions: \_\_\_\_\_  
Footings: \_\_\_\_\_  
Roof: \_\_\_\_\_  
☐ State Certified Modular  
☐ Manufactured Home  
**Utilities**  
Water Supply:  
☒ Public  
☐ Private  
Sewage Disposal:  
☐ Public  
☒ Private  
Electric Yes ☒ No ☐  
Gas Yes ☐ No ☐  
Heating System:  
Electric ☐ Oil ☒  
Natural Gas ☐  
Propane Gas ☐  
Sprinkler system: N/A ☒  
☐ NFPA #13D  
☐ NFPA #13R  
☐ Other:

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 OSVALDINA L. GROSS

Print Name OSVALDINA L. GROSS

Title/Company \_\_\_\_\_

Date 7/23/09

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
\*\*PLEASE WRITE NEATLY AND LEGIBLY.\*\*

AGENCY DATE SIGNATURE APPROVAL  
Land Development, DPZ  
State Highways  
Building Officials  
Dev. Engineering, DPZ  
Health 7-23-09 Heidi Scott  
Fire Protection

DPZ SETBACK INFORMATION

Front: \_\_\_\_\_  
Rear: \_\_\_\_\_  
Side: \_\_\_\_\_  
Side St.: \_\_\_\_\_  
All minimum setbacks met?  
YES ☐ NO ☐

PROPERTY ID #  
Filing fee \$  
Permit fee \$  
Excise tax \$  
Add'l per fee \$  
TOTAL FEES \$  
Sub-total paid \$

Is Sediment Control approval required prior to issuance?  
YES ☐ NO ☐

Is Entrance Permit Required?  
YES ☐ NO ☐  
Historic District?  
YES ☐ NO ☐  
Lot Coverage for New Town Zone  
SDP/Red-line approval date \_\_\_\_\_

Balance due \$  
Check #  
Validation #  
Accepted by \_\_\_\_\_

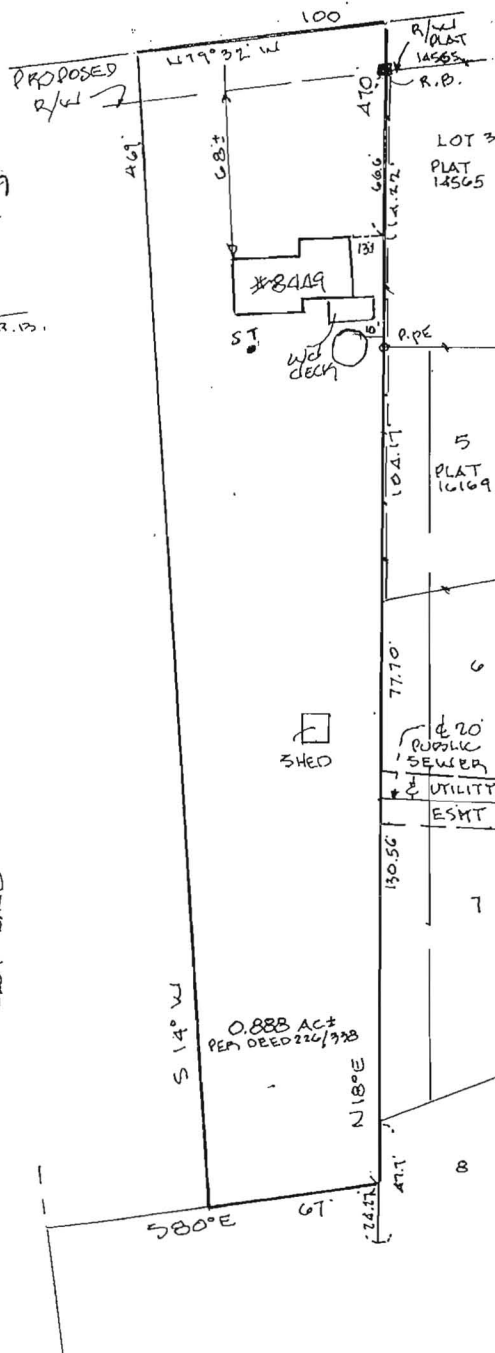
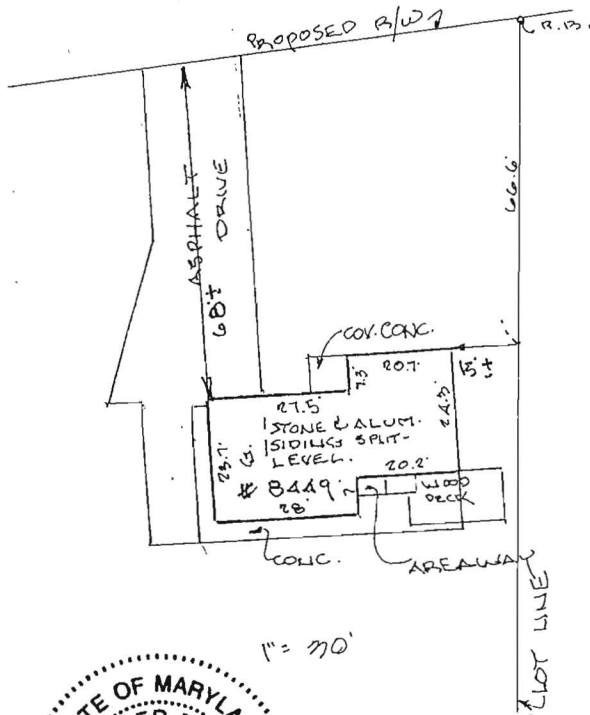
CONTINGENCY CONSTRUCTION START: ☐  
ONE STOP SHOP: ☐

Distribution of Copies - White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA  
T:\Operations\Updated forms

HOWARD COUNTY, MO

CHURCH LANE

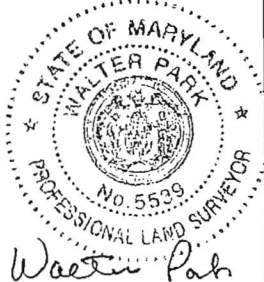
APPROVED  
WALK-THRU BUILDING PERMIT  
BP# \_\_\_\_\_ A# P50262-C  
APP. SAN HS DATE: 7-23-09  
DESC. OF WORK: above ground pool  
public H2O



## LOCATION DRAWING

**DATE** 11-10-08

The information shown has been established by current acceptable survey procedures and from available record information. This drawing is to be used for Title Transfer Financing, or Refinancing Only and IS NOT to be used for the Establishment of Property Lines, Location for Fences, Garages, Buildings, or other Existing or Future Improvements.



(410) 715-1070 (Balt.)  
(301) 596-3424 (Wash)  
(410) 715-9540 (Fax)