

Building Permit Application
Howard County Maryland
Department of Inspections, Licenses and Permits

Date Received: _

Permit No.:	
	Permit No.:

		MBERWOODS WA		Property Owner's Name:	JOHN 1	TEWETT CHAPBOLL	
City: SYKESYILLE	Sta	ate: MD Zip Code:	21784	Address: 12837 Am	State: MA	7 Lufy	
Suite/Apt. #SDP/WP/BA #:				City: 57 Kesylue State: 110 Zip Code: 21794 Phone: 410 - 215 - 6288 Fax:			
Census Tract:	-		100 17 10001	Email: JENMCAM	PAEUJQ	EMAIL. COM	
Section:				Applicant's Name & Mailing	Address (If a	ther than stated herein)	
Tax Map:				Applicant's Name:	, , , , , , , , , , , , , , , , , , , ,		
				Address:		7. 0.1	
Zoning: Ma	p Coord	inates:1ot S	oize:	City: Phone:			
Existing Use: SINGL	C R	am ILY		Email:			
Proposed Use: 51~66				Contractor Company: C.	M. PAN	LKOR CONSTRUCTION	
Estimated Construction Cost		_		Contact Person: CHAI	5 PANU	EN	
Description of Work:			20	Address: 662 Loc	H HILL	RD	
				City: BALTIMONE St	ate: <u>MO</u>	_ Zip Code: 212 39	
		w Portsco a	N.C.	License No.: 10000 Phone: 410 - 296 - 3	541 cam		
EXISTING	100	TPRINT		Fmail: CHAIS Q	CMPCO	INSTRUCT. LOM	
Occupant or Tenant:				Little Control			
Was tenant space previously	y occupi	ed? □Yes	□No	Engineer/Architect Company	/:		
Contact Name:		<u> </u>		Responsible Design Prof.:			
Address:				Address:			
City:		State: 7in Cod	e:			Zip Code:	
Phone:				Phone:			
		rax			rax:		
Email:				Email:			
Commercial Building Chara	cteristic			Utilities			
Height:		SF Dwelling SF T		Water Supply			
No. of stories:		Depth 1 st floor:	Width	☐ Public			
Gross area, sq. ft./floor:		2 nd floor:		☐ Private			
Area of construction (sq. ft.)):	Basement:		Sewage Dispos	<u>al</u>		
		☐ Finished Basement		☐ Public			
Use group:		☐ Unfinished Baseme	nt	☐ Private			
		☐ Crawl Space		Electric:	□No		
Construction type:	<u>:</u>	☐ Slab on Grade		Gas: ☐ Yes ☐ No			
☐ Reinforced Concrete ☐ Structural Steel		No. of Bedrooms: Multi-family D	welling	Heating System			
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			
		Dimensions:					
➤ Roadside Tree Project I		Footings:		Gradie - Po-	mit Number:		
Yes□N		Roof:	d	Grading Per	mit Number:		
Roadside Tree Project Pe	rmit #	☐ State Certified Mod ☐ Manufactured Hom		Building Shell Per	mit Number		
		U Manufactured Home	E	Building Shell Fer	mit Number.		
THE UNDERSIGNED WESEN CERTIFIE WITH ALL RESUMPTIONS OF HOWARD THIS APPLICANT'S SIgnature CHUS CHUS CM Email Address DUEST PORT Title/Company	to JoyArt	NY WHICH ARE APPLICABLE THERETY OUNTY OFFICIALS THE RIGHT TO EI WSTAU CT. Co M MANNEY CON	O; (4) THAT HE/SHE WINTER ONTO THIS PROF		REFERENCED PRO	PERTY NOT SPECIFICALLY DESCRIBED IN FED AND POSTING NOTICES.	
			to: DIRECTOR OF F *PLEASE WRITE NE	INANCE OF HOWARD COUNTY ATLY & LEGIBLY**			
			-FOR OFFICE				
AGENCY	DATE	SIGNATURE OF APPROVAL	DPZ SETBACK	Z SETBACK INFORMATION		\$	
Scate Highways			Front:		Permit Fee	\$	
Bailding Officials			Rear: Side:		Tech Fee Excise Tax	\$.	
paliaing Ornelais	-		Side St.:		PSFS	\$ - '	

ZA (Zoning) Realth

Is Sediment Control approval frequired for Issuance? Yes No
CONTINGENCY CONSTRUCTION START

Guaranty Fund Add'l per Fee Total Fees Sub- Total Paid Balance Due

Distribution of Copies: White: Building Officials

Green: PSZA,Zoning

Yellow: PSZA, Engineering

Pink: Health

Gold: SHA

