



# 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: 13724 Springdale Drive  
City: CLARKSVILLE State: MD Zip Code: 21029  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: Porch  
Proposed Use: Addition to Kitchen  
Estimated Construction Cost: \$ 109,000  
Description of Work: Building an addition  
for an add on for the kitchen  
& Dining Area

Occupant or Tenant: PAT & SHARON HENNESSEY  
Was tenant space previously occupied? ☒ Yes Porch ☐ No  
Contact Name: Jim Sanders / DARTREE HOMES INC.  
Address: 1302 BROCKTON DR.  
City: Eldersburg State: MD Zip Code: 21784  
Phone: 410.984.5440 Fax: \_\_\_\_\_  
Email: JIM@DARTREEONLINE.NET

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	<b>Depth</b> <b>Width</b>
Gross area, sq. ft./floor:	1 <sup>st</sup> floor: <u>12'</u> <u>23'</u>
	2 <sup>nd</sup> floor: _____
Area of construction (sq. ft.):	Basement:
	<input type="checkbox"/> Finished Basement
Use group:	<input type="checkbox"/> Unfinished Basement
	<input checked="" type="checkbox"/> Crawl Space
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:
<input type="checkbox"/> Structural Steel	<b>Multi-family Dwelling</b>
<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 checked="" type="checkbox"/> No	Roof:
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: PAT & SHARON HENNESSEY  
Address: 13724 Springdale Dr.  
City: CLARKSVILLE State: MD Zip Code: 21029  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

**Applicant's Name & Mailing Address, (If other than stated herein)**  
Applicant's Name: JIM SANDERS  
Address: 1302 BROCKTON DR.  
City: Eldersburg State: MD Zip Code: 21784  
Phone: 410.984.5440 Fax: \_\_\_\_\_  
Email: JIM@DARTREEONLINE.NET

Contractor Company: DARTREE HOMES INC.  
Contact Person: JIM SANDERS  
Address: 1302 BROCKTON DR.  
City: Eldersburg State: MD Zip Code: 21784  
License No.: \_\_\_\_\_  
Phone: 410.984.5440 Fax: \_\_\_\_\_  
Email: JIM@DARTREEONLINE.NET

Engineer/Architect Company: STAN RYDER, JR.  
Responsible Design Prof.: Architect/PA  
Address: 1593 Homeland Dr. SE  
City: Eldersburg State: MD Zip Code: 21784  
Phone: 443.631.2161 Fax: \_\_\_\_\_  
Email: JIM@DARTREEONLINE.NET

Utilities
<b>Water Supply</b>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
<b>Sewage Disposal</b>
<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
<b>Heating System</b>
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:
<b>Sprinkler System:</b>
<input type="checkbox"/> Yes <input checked="" 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.

James M. Sanders  
Applicant's Signature

James M. Sanders  
Print Name

JIM@DARTREEONLINE.NET  
Email Address

7/7/16  
Date

PRESIDENT / DARTREE HOMES INC.  
Title/Company

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	<u>7-7-16</u>	<u>DBurnand</u>

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	\$ <u>25.00</u>
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

I hereby certify that the property delineated hereon is in accordance with the plat of subdivision and/or deed of record, that the improvements were located by accepted field practices and include permanent visible structures and apparent encroachments, if any. This plat is NOT FOR DETERMINING PROPERTY LINES OR FOR CONSTRUCTION