

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER

Building Address  
2065 Sykesville Rd Sykesville Md 21784

Property Owner's Name William R Costlow  
Address 2065 Sykesville Rd  
City Sykesville State MD Zip Code 21784  
Home Phone 410 489 4275 Work Phone 703 602-0810  
Applicant's Name & Mailing Address, (if other than stated herein):

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_

Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot Size \_\_\_\_\_

Existing Use GARAGE

Proposed Use GAME ROOM

Estimated Construction Cost \$ \$5000

Description of Work Replace Garage doors  
W/ 2 WINDOWS + DOOR - INSTALL  
LAMINATE Floor

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

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

Address \_\_\_\_\_

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

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

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

Contractor Company \_\_\_\_\_

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

Address \_\_\_\_\_

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

License No. \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

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

BUILDING DESCRIPTION - COMMERCIAL

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

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 <sup>st</sup> floor: <u>28x44</u> 2 <sup>nd</sup> floor: <u>20x40</u> Basement: <u>28x44</u>	Water Supply: _____ Public _____ Private _____
Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u>	Sewage Disposal: _____ Public _____ Private _____
Multi-family dwellings: _____ No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
State Certified Modular _____ Manufactured Home _____	Sprinkler system: N/A <input type="checkbox"/> 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.

William R Costlow  
Applicant's Signature

William R Costlow  
Print Name  
25 MAY 2010  
Date

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

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

\*\*PLEASE WRITE NEATLY AND LEGIBLY.\*\*

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE	APPROVAL
Land Development, DPZ			
State Highways			
Building Officials			
Dev. Engineering, DPZ			
Health	<u>5-25-10</u>	<u>William R Costlow</u>	
Fire Protection			

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

DPZ SETBACK INFORMATION  
Front: \_\_\_\_\_  
Rear: \_\_\_\_\_  
Side: \_\_\_\_\_  
Side St.: \_\_\_\_\_  
All minimum setbacks met? YES ☐ NO ☐  
Is Entrance Permit Required? YES ☐ NO ☐  
Historic District? YES ☐ NO ☐  
Lot Coverage for New Town Zone \_\_\_\_\_  
SDP/Red-line approval date \_\_\_\_\_

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

CONTINGENCY CONSTRUCTION START: ☐  
ONE STOP SHOP: ☐

Accepted by \_\_\_\_\_

# APPROVED

## WALK-THRU BUILDING PERMIT

BP# \_\_\_\_\_ A# 34409

APP. SAN HS DATE: 5-25-0

DESC. OF WORK: game room (currently a garage)  
(no footprint change)

Subject property is shown in Zone C  
on the National Flood Insurance Program  
Flood Insurance Rate Map of Howard  
County, Maryland. Panel # 15 OF 49  
Community Panel # 2400441 015 0  
Effective Date: 7-4-86

This is to certify that I have surveyed the property shown hereon, being the same property described in a deed ~~1841~~ AND KNOWN AS 2065 ROUTE 32 and recorded among the land records of HOWARD COUNTY in Liber 1841 Folio 0175 for the purpose of locating the improvements thereon.

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS NOT TO BE USED TO ESTABLISH PROPERTY LINES.



J. Carl Hudgins PLS#96

LOCATION SURVEY  
2065 ROUTE 32

HOWARD COUNTY, MD.

NTI ASSOCIATES, INC.

16205 Old Frederick Road  
Mt. Airy, Maryland 21771

Phone 442-2031

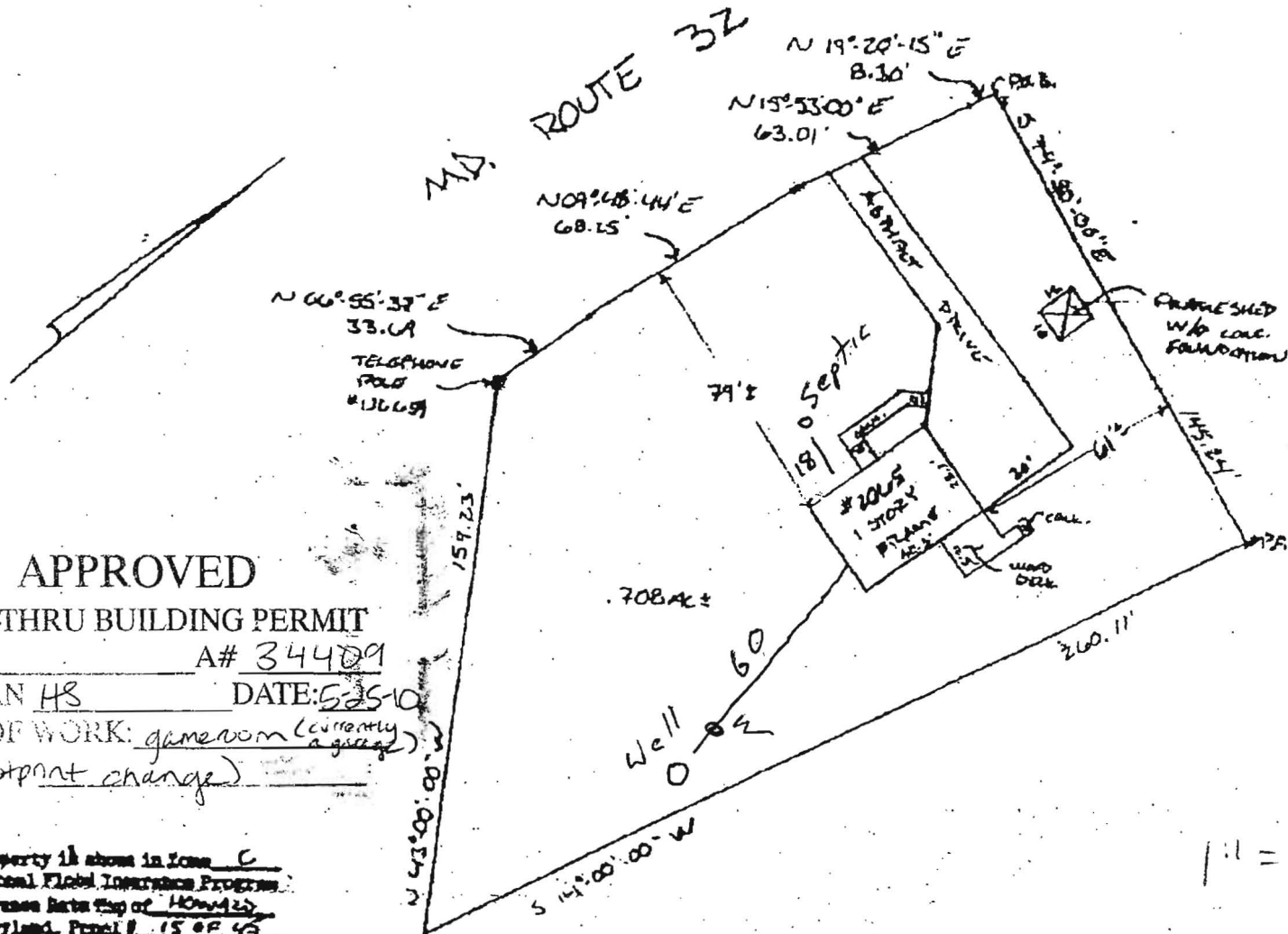
SCALE 1" = 50'

Date 7-31-9

Field By: STA

Drawn By: STA

Drawing # 5



BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
<u>Building Characteristics</u>	<u>Utilities</u>	<u>Building Characteristics</u>	<u>Utilities</u>
Height:	Water Supply:	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply:
No. of stories:	<input type="checkbox"/> Public	<u>Depth</u>	<input type="checkbox"/> Public
Gross area, sq. ft. per floor:	<input type="checkbox"/> Private	1 <sup>st</sup> floor: <u>20 x 44</u>	<input checked="" type="checkbox"/> Private
Use group:	Sewage Disposal:	2 <sup>nd</sup> floor: <u>28 x 40</u>	Sewage Disposal:
Construction type:	<input type="checkbox"/> Public	Basement: <u>28 x 40</u>	<input type="checkbox"/> Public
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Private	Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawl	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Structural Steel	Electric <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Electric <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Masonry	Gas <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	No. of Bedrooms <u>4</u>	Gas <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<input type="checkbox"/> Wood Frame	Heating System:	Multi-family dwellings:	Heating System:
<input type="checkbox"/> State Certified Modular	Electric <input type="checkbox"/> Oil <input type="checkbox"/>	No. of efficiency units: _____	Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/>
	Natural Gas <input type="checkbox"/>	No. of 1 BR units: _____	Natural Gas <input type="checkbox"/>
	Propane Gas <input type="checkbox"/>	No. of 2 BR units: _____	Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/>	No. of 3 BR units: _____	Sprinkler system: N/A <input checked="" type="checkbox"/>
	<input type="checkbox"/> Full	Other Structure: _____	<input type="checkbox"/> NFPA #13D
	<input type="checkbox"/> Partial	Dimensions: _____	<input type="checkbox"/> NFPA #13R
	<input type="checkbox"/> Other Suppression	Footings: _____	<input type="checkbox"/> Other:
	<input type="checkbox"/> # of Heads	Roof: _____	
		<input type="checkbox"/> State Certified Modular	
		<input type="checkbox"/> Manufactured Home	

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Applicant's Signature

Print Name William R Costner

Title/Company

Date \_\_\_\_\_

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

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<u>Land Development, DPZ</u>			
<u>State Highways</u>			
<u>Building Officials</u>			
<u>Dev. Engineering, DPZ</u>			
<u>Health</u>	5-25-10	<i>William Scott</i>	
<u>Fire Protection</u>			
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/> ONE STOP SHOP: <input type="checkbox"/>			

<u>FOR OFFICE USE ONLY</u>	<u>PROPERTY ID #</u>
<u>DPZ SETBACK INFORMATION</u>	
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per fee \$ _____
All minimum setbacks met?	TOTAL FEES \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit Required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
Historic District?	Validation # _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	
Lot Coverage for New Town Zone _____	
SDP/Red-line approval date _____	Accented by _____

**APPROVED**  
**WALK-THRU BUILDING PERMIT**  
 BP# \_\_\_\_\_ A# 34409  
 APP. SAN HS DATE: 5-25-10  
 DESC. OF WORK: add window &  
 doors to ex. porch

Subject property is shown in Zone C  
 on the National Flood Insurance Program  
 Flood Insurance Rate Map of Howard  
 County, Maryland. Panel # 15 of 49  
 Community Panel # 240044 and 0  
 Effective Date: 7-4-86

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**2065 ROUTE 32**

**HOWARD COUNTY, MD.**

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 16205 Old Frederick Road  
 Mt. Airy, Maryland 21771  
 Phone 442-2031

SCALE 1" = 50'  
 Date 7-31-9  
 Field By J. STK  
 Drawn By J. STK  
 Drawing # 6

