



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: 12275 Woodspurge Ct.
City: Ellicott City State: MD Zip Code: 21042
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Single family Home
Proposed Use: Single family Home
Estimated Construction Cost: \$ 44,000.00
Description of Work: Replace roof trusses and
Drywall, Replace Detached 240 sq ft
3,000 sq ft carport
Occupant or Tenant: Occupant
Was tenant space previously occupied? ☒ Yes ☐ No
Contact Name: Mark Flemister
Address: 12275 Woodspurge Ct.
City: Ellicott City State: MD Zip Code: 21042
Phone: 410-531-5799 Fax: _____
Email: Mark@Fdaexp.com

Property Owner's Name: Mark Flemister
Address: 12275 Woodspurge Ct.
City: Ellicott City State: MD Zip Code: 21042
Phone: 410-531-5799 Fax: _____
Email: Mark@Fdaexp.com

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: Randal Schneider
Address: 16 Stevenson Lane
City: Hunt Valley State: MD Zip Code: 21070
Phone: 410-599-3512 Fax: _____
Email: RSCneider@PBIRestorations.com

Contractor Company: PBI Restorations
Contact Person: Randal Schneider
Address: 16 Stevenson Ln.
City: Hunt Valley State: MD Zip Code: 21070
License No.: 132093
Phone: 410-452-9005 Fax: _____
Email: RSCneider@PBIRestorations.com

Engineer/Architect Company: Freco
Responsible Design Prof.: Frank Lassiter
Address: 818 Soundside Rd.
City: Edenton State: NC Zip Code: 27932
Phone: 252-442-7004 Fax: _____
Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor: <u>13' 7"</u>	<u>23' 10"</u>
Area of construction (sq. ft.):	2 nd floor: _____	
Use group:	Basement:	
	<input type="checkbox"/> Finished Basement	
	<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 checked="" type="checkbox"/> No	Roof: _____	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities
<u>Water Supply</u>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
<u>Sewage Disposal</u>
<input checked="" type="checkbox"/> Public
<input type="checkbox"/> Private
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<u>Heating System</u>
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
<u>Sprinkler System:</u>
<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.

Applicant's Signature: Randal Schneider Print Name: Randal Schneider
Email Address: RSCneider@PBIRestorations.com Date: 9-9-16
Project Manager: PBI Restorations
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		
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	\$ <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

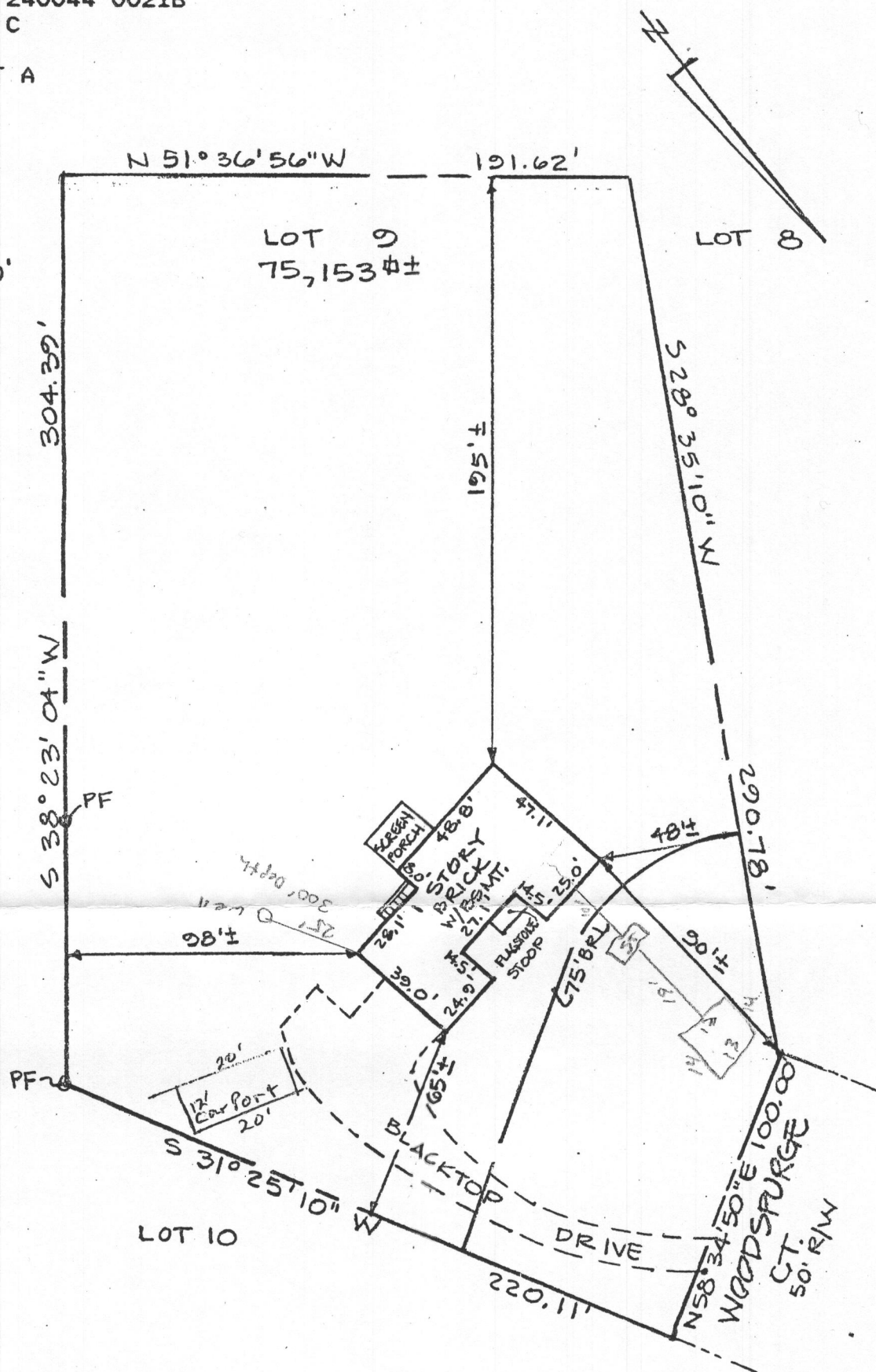
Yellow: PSZA, Engineering

Pink: Health

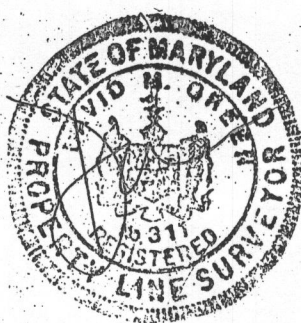
Gold: SHA

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BH9711-1 12275 WOODSPURGE CT ELLICOTT CITY HOW 1/10/97 ALMS Case#96-0167
 Fema Panel: 240044 0021B
 Flood Zone: C
 LOT 9
 BLOCK B PART A
 WOODMARK
 SECTION 2
 Book: 13
 Folio: 64
 Dist: 3
 Co: HOWARD
 MD
 Scale 1"=50'



Accuracy: Approximate average accuracy (SD of sideline distances) for small suburban lots is two feet, and for large lots and metes and bounds parcels varies from two feet to twenty feet. In case of doubt, we recommend a Boundary Survey.



DAVID M. GREEN, Prop LS 311 MD.
 Executive Vice President

LEGEND	
Shed (unsurveyed)	[S]
Blacktop Drive	-----
Gravel Drive	=====
Concrete Drive	=====

This is an Improvements Location Survey only, and must not be used for Boundary purposes. No Title Report furnished. No statement is made as to ownership of property or right or interest therein. Fences are approximate only and may not be shown.

SURVEY ASSOCIATES OF MARYLAND INC

9420 ANNAPOLIS ROAD
 LANHAM MD 20706
 TEL 301 459 2760
 FAX 301 459 4409

108 OLD SOLOMONS ISLAND RD #100
 ANNAPOLIS MD 21401
 TEL 410 266 7211
 FAX 410 266 0918

**LOCATION
 SURVEY**

APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____
 APP SAN u. Oswald DATE: 9/14/16
 DESC. OF WORK: Replace trusses &
drywall. Replace 240 sq ft carport.