



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: 08/28/17

Permit No.: B17003215

Building Address: 15439 RIVERCRAFT CT
City: Annapolis State: MD Zip Code: 20683
Suite/Apt. #: N/A SDP/WP/BA #: 6P-12-04
Census Tract: 60-1002 Subdivision: Riverfront
Section: - Area: - Lot: 5
Tax Map: - Parcel: 891 Grid: 20
Zoning: LC-100 Map Coordinates: 79.11 100 Lot Size: 49,000 sq ft

Existing Use: Vacant Lot
Proposed Use: Commercial office building
Estimated Construction Cost: \$ 1,000,000
Description of Work: Commercial office building
Occupant or Tenant: N/A
Is as tenant space previously occupied? ☐ Yes ☒ No
Contact Name: N/A
Address: -
City: - State: - Zip Code: -
Phone: - Fax: -
Email: -

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	Depth Width
Gross area, sq. ft./floor:	1 st floor: 77 x 74
Area of construction (sq. ft.):	2 nd floor: 77 x 74
Use group:	Basement: 77 x 74
Construction type:	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input checked="" type="checkbox"/> Wood Frame	No. of Bedrooms: 5
<input type="checkbox"/> State Certified Modular	Multi-family Dwelling
	No. of efficiency units:
	No. of 1 BR units:
	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

Property Owner's Name: COLUMBIA BUILDERS
Address: 1100 11th St
City: Annapolis State: MD Zip Code: 20683
Phone: 410-770-7777 Fax: 410-770-7777
Email: info@columbiabuilders.com

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: K. T. Smith
Address: 1100 11th St
City: Annapolis State: MD Zip Code: 20683
Phone: 410-770-7777 Fax: 410-770-7777
Email: info@columbiabuilders.com

Contractor Company: K. T. Smith
Contact Person: K. T. Smith
Address: 1100 11th St
City: Annapolis State: MD Zip Code: 20683
License No.: 12345
Phone: 410-770-7777 Fax: 410-770-7777
Email: info@columbiabuilders.com

Engineer/Architect Company: K. T. Smith
Responsible Design Prof.: K. T. Smith
Address: 1100 11th St
City: Annapolis State: MD Zip Code: 20683
Phone: 410-770-7777 Fax: 410-770-7777
Email: info@columbiabuilders.com

Utilities
Water Supply
<input type="checkbox"/> Public
<input type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
Heating System
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:
Sprinkler System:
<input type="checkbox"/> Yes <input type="checkbox"/> No
Grading Permit Number: 17-000257
Building Shell Permit Number: N/A

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: [Signature]
Email Address: [Email]
Title/Company: [Title]

Print Name: [Name]
Date: [Date]

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		

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	\$ 0
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
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