



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: 3013 Sobus Dr
City: West Friendship State: MD Zip Code: 21794
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: 2 Subdivision: N/A
Section: _____ Area: _____ Lot: 8
Tax Map: 15 Parcel: 26 Grid: 24
Zoning: RRDEO Map Coordinates: _____ Lot Size: 3.0052ac

Existing Use: Residential Dwelling
Proposed Use: Residential Dwelling
Estimated Construction Cost: \$ 25,000
Description of Work: Demo of existing Deck, Replace Build new Decking & Screen in Decking
Occupant or Tenant: Client
Was tenant space previously occupied? ☒ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ 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: _____	
	2 nd floor: _____	
Area of construction (sq. ft.): _____	Basement: _____	
	<input type="checkbox"/> Finished Basement	
Use group: _____	<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 type="checkbox"/> No	Roof: _____	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Property Owner's Name: Cindy J DAW Woodbury
Address: 3013 Sobus Dr
City: West Friendship State: MD Zip Code: 21794
Phone: 443-812-9306 Fax: _____
Email: Cindyjwoodbury@gmail.com

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: 2 Griffiths
Contact Person: BRAD Woodcock
Address: 27421 Clarksburg RD
City: Dummers State: MD Zip Code: 20802
License No.: 101176
Phone: 240-674-9033 Fax: 301-253-5976
Email: BRAD@2Griffiths.com

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Utilities
Water Supply
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Sewage Disposal
<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
Heating System
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
Sprinkler System:
<input type="checkbox"/> Yes <input 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: BRAD Woodcock
Email Address: BRAD@2Griffiths.com
Project Manager/Title/Company: 2 Griffiths

Print Name: BRAD Woodcock
Date: 8-19-16

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? ☐ Yes ☐ No
☐ CONTINGENCY CONSTRUCTION START

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: _____

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

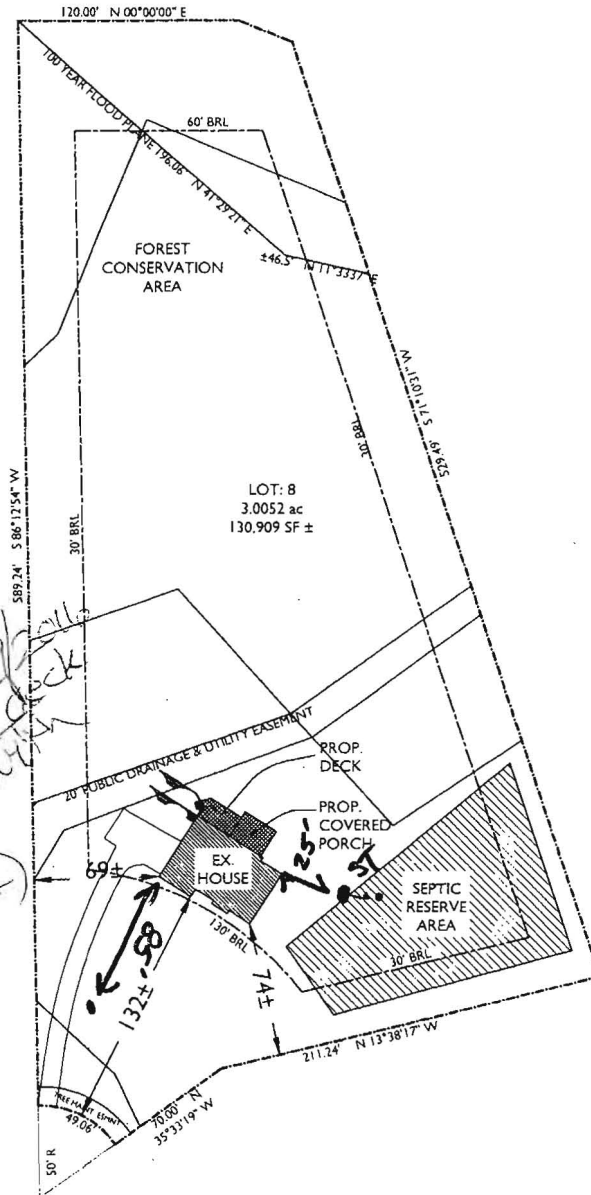
Yellow: PSZA,Engineering

Pink: Health

Gold: SHA



APPROVED
WALK-THRU BUILDING PERMIT
BP# _____ A# _____ DATE: 8/19/2016
APP. SANIT. _____
DESC. OF WORK: EX. HOUSE
and partially enclose with
screen & roof
(240 & 2 new deck)



7612 Browns Bridge Rd
Highland, MD 20777
301-776-2666
301-776-2886 fax
1-877-828-7267
info@TransformingArchitecture.com
www.TransformingArchitecture.com

The Woodbury Residence

3013 Sobus Drive, West Friendship, MD 21794

Site Plan

SCALE: 1" = 100'

DATE: 08-17-2016

PROJECT No: 16-274