

Building Permit Application
Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455 www.howardcountymd.gov

Date R	leceived:	.4

Permit No.:	
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CRY. M Airy State: MN Top Code: 21771 Solte/Apt. # SOP/NVP/AA #: Carest Tract: Subdivision: Adv accessed Tract: Advance: Advanc	Building Address: 17312 W	hile Plains aunt	Property Owner's Name: Poul Tem	0500
Sulte/Apt. 3 SDP/WP/BA 8: SDP/WP/BA 8: Subdivision: Subdi	The state of the s		Address: 17312 White Plane	Curet
Cerous Tract: Subdivision: Subd			City: MT Aley State: MS	Zip Code: _2177/
Applicant's Name & Mailing Address, (if other than stated herein) Applicant's Name & Mailing Address, (if other than stated herein) Applicant's Name & Mailing Address, (if other than stated herein) Applicant's Name & Mailing Address, (if other than stated herein) Applicant's Name & Mailing Address, (if other than stated herein) Applicant's Name & Mailing Address, (if other than stated herein) Applicant's Name & Mailing Address, (if other than stated herein) Applicant's Name & Mailing Address, (if other than stated herein) Applicant's Name & Mailing Address. City State: Zip Code: City Zi				X:
Tax Map:		- 100000 1000000 1000000000000000000000		
Zoring: Map Coordinates: Lot Size: Betting Use: SED Will Dock + Open Pacel Estimated Construction Cost: By 570 Description of Work: Dock + Open Pacel Estimated Construction Cost: By 570 Description of Work: Dock + Open Pacel Occupant/Tenant Name: Was tenant space previously occupied? Wes INO Contact Name: Fax: Email: Lenes to Proper Pacel City: State: Zip Code: City: State: Dock Spall Company Description of Work Fax: Email: Lenes to No. 9 State: Mark Language Contact Name: Pace Proper Pacel City: State: Zip Code: C				her than stated herein)
Contraction	Tax Map: Parcel:_	Grid:		
Esting Use: SED WILL Dack + Open Read. Estimated Construction Cost: \$ /B.507 Description of Work: Dack + Open Read. on back. Of Harne 2000 Open Read of back. Of Harne 2000 Open Read of back. Occupant/Tenant Name: Was tenant space previously occupied? City: State: Zip Code: Contact Name: Address: City: State: Zip Code: City: State: Zip	Zoning: Map Coordinate	tes: Lot Size:	City: State:	Zip Code:
Proposed Use: SED WILL Dark + Open Read. Estimated Construction Cost: S. 18, SED Description of Work: Dark + Open Roach on back. Of Marka 2000 Open Roach - Back. Occupant/Fenant Name: Was tenant space previously occupied? City: State: Zip Code: Chiza - Contact Parson: Responsible Design Prof.: Address: City: State: Zip Code: Chiza -			Phone:Fax:	
Estimated Construction Cost: \$ B, 507 Description of Work: Des	Existing Use:SFO			
Description of Work: Desk + Open Roach on back of Marso 2053D Open Rock 2051D Desk Of Marso 2053D Open Rock 2051D Desk Occupant/Tenant Name: Was tenant space previously occupied? Contact Name: Address: City: State: Zip Code: Phone: Fax: Email: Mark Company: Responsible Design Prof: Address: City: State: Zip Code: Phone: Fax: Email:	Proposed Use: SFD WHL D	ack + open frech	Contractor Company: Vevins Cor	Structua
Description of Work: Desk + Open Boack on back of House Boack on back of House Boack on Boa	Estimated Construction Cost: \$ //	3,500		
Ccupant/Tenant Name: Was tenant space previously occupied? Yes No	the community of the control of the			
Occupant/Tenant Name: Was tenant space previously occupied? Tyes		A CONTRACTOR OF THE PROPERTY O		Zip Code: a la 25
Occupant/Tenant Name: Was tenant space previously occupied? Yes No Contact Name: Address: Zip Code: Zip Code: City: State: Zip Code: Phone: Fax: Email: Commercial Building Characteristics Residential Building Characteristics Height: Sprownhouse Height: Sprownhouse Height: Sprownhouse Height: Sprownhouse Height: Sprownhouse Gross area, sq. ft./floor: 1" floor: Area of construction (sq. ft.): Basement: Samement: Implicate Supply Sprownhouse Grawl Space Implicate Supply Sprownhouse Gonstruction (sq. ft.): Basement Indicate Supply Sprownhouse Water Supply Sprownhouse Femall: Landing System: Indicate Supply Sprownhouse Femall: Structural Steel Multi-family Dwelling Structural Steel Multi-family Dwelling Masonry No. of efficiency units: Structural Steel Multi-family Dwelling Masonry No. of efficiency units: Other Structure:	Of Mouse JUNDO Ope	afores doxie peck		
Was tenant space previously occupied? Tyes No			Phone: 4/0-746-7665 Fax:	
Contact Name: Address: City: State: Zip Code: Phone: Fax: Commercial Building Characteristics Fax: Fax: Phone: Fax: Fax: Phone: Fax: Fax: Phone: Fax: Fax: Phone: Fax: Fax: Fax: Phone: Fax: Fax:	Occupant/Tenant Name:		Email: Nevi-s consite SM	41,00
Contact Name: Address: City: State: Zip Code: Phone: Fax: Commercial Building Characteristics Fax: Fax: Phone: Fax: Fax: Phone: Fax: Fax: Phone: Fax: Fax: Phone: Fax: Fax: Fax: Phone: Fax: Fax:	Was tenant space previously occupied?	P DYes DNo	Engineer/Architect Company	
Address: City: State: Zip Code: City: State:		CSTORES (STORES)		
City: State: Zip Code: City: State: Zip Code: Phone: Fax: Email: City: State: Zip Code: Phone: Fax: Email:			Responsible Design Prof.:	
Phone:Fax:	Address:		Address:	
Email: Commercial Building Characteristics Residential Building Characteristics Height: S\$F Dwelling SF Townhouse Depth Width SF Dwelling SF Townhouse SF Dwelling SF Dwe	City:	State: Zip Code:	City:State:	Zip Code:
Email: Commercial Building Characteristics Residential Building Characteristics Height: SF Dwelling SF Townhouse Depth Width	Phone:	Fax:	Phone: Fax:	
Commercial Building Characteristics	203/403232	Name of the last o		
Height: SF Dwelling SF Townhouse No. of stories: Depth Width Gross area, sq. ft./floor: 1" floor: 2" floor: Area of construction (sq. ft.): Basement: Finished Basement Use group: Unfinished Basement Sewage Disposal Water Supply Public Private Sewage Disposal Public Private Sewage Disposal Private Disposal Private Sewage Disposal Public Private Disposal Private Sewage Disposal Private Disposal Private No. of 3 BR units: Other: Other: Sprinkler System:	Linds.		Email;	
No. of stories: Depth Width	Commercial Building Characteristics	Residential Building Characteristics	Utilities	
Gross area, sq. ft./floor: 2 st floor: 2 st floor: 2 st floor: 2 st floor: 3 Basement:	Height:	SF Dwelling SF Townhouse	Electric: ☐ Yes ☐ No	
Area of construction (sq. ft.): Basement: Finished Basement Infinished Basement Crawl Space Crawl Space Structural Steel Masonry No. of Bedrooms: Structural Steel Multi-family Dwelling Masonry No. of 1 BR units: State Certified Modular No. of 2 BR units: State Certified Modular No. of 3 BR units: Other Structure: Yes No Footings: Grading Permit Number: He underside Tree Project Permit # State Certified Modular Manufactured Home He underside Shell Permit Number: Yes No He underside Shell Permit Number: Print Number:			Gas: ☐ Yes ☐ No	
Area of construction (sq. ft.): Basement:	Gross area, sq. ft./floor:	1 T. S. P. N. P. S.	Water Supply	
Use group:	Area of construction (so. ft.):			
Crawl Space Slab on Grade Slab on Grade Structural Steel No. of Bedrooms: Multi-family Dwelling Masonry No. of efficiency units: Structural Steel Multi-family Dwelling State Certified Modular No. of 1 BR units: No. of 3 BR units: No. of 3 BR units: Other Structure: Other Structure: Other Structure: Dimensions: Yes No No. of 3 BR units: Other Structure: Other Structure: Dimensions: Other Structure: Dimensions: Other Structure: Other: Oth	The state of the s		Private	
Construction type: Slab on Grade Private	Use group:	☐ Unfinished Basement	Sewage Disposal	·高兴
Reinforced Concrete No. of Bedrooms: Structural Steel			Public	1.36 经产品的第三人称
Structural Steel Masonry No. of efficiency units; Wood Frame No. of 1 BR units: State Certified Modular No. of 2 BR units: Other Structure: Dimensions: Proadside Tree Project Permit Roadside Tree Project Permit Manufactured Home 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 perform no work on the above referenced property not specifically describe the specifically describe the specifically described the specifical that he/she will perform no work on the above referenced property not specifically described the specifical that he/she will perform no work on the above referenced property not specifically described that specifically described the specifical that he/she will perform no work on the above referenced property not specifically described that specifically described the specifical that he/she will perform no work on the above referenced property not specifically described that the specifical that he/she will perform no work on the above referenced property not specifically described that the specifical that he/she will perform no work on the above referenced property not specifically described that the specifical that the specifical that he/she will perform no work on the above referenced property not specifically described that the specifical that he/she will perform not work permitted and positing notices. Applicant's Signature Print Name Print Name	The state of the s		Private	·····································
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Wood Frame		A CONTRACTOR OF THE PARTY OF TH	☐ Electric ☐ Oil	War age of the
No. of 3 BR units: Other Structure: Dimensions: PRoadside Tree Project Permit Footings: Grading Permit Number: Grading Permit Number: Grading Permit Number: Building Shell Permit Number: THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBE THESE APPLICATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBE THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES. Applicant's Signature Print Name Date Date	The second secon	The state of the s	☐ Natural Gas ☐ Propane Gas	18 18 TO 18 18 18 18 18 18 18 18 18 18 18 18 18
Other Structure: Dimensions:	☐ State Certified Modular	No. of 2 BR units:	☐ Other:	
Dimensions: Yes Mo Roof: Roadside Tree Project Permit State Certified Modular Manufactured Home 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 come 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 describe this applicant's Signature Applicant's Signature Print Name			Sprinkler System:	St. St. Commonter
Roadside Tree Project Permit Footings: Tyes Sub Roof: Grading Permit Number:			☐ Yes ☐ No	
State Certified Modular State Certified Modular Manufactured Home 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 perform no work on the above referenced property not specifically describe the applications; (3) that he/she will perform no work on the above referenced property not specifically describe the applicant's Signature Print Name Out S Court © GMAN Con	> Roadside Tree Project Parmit			THE RESERVE THE
Roadside Tree Project Permit # State Certified Modular Manufactured Home 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 COMWITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBE THE APPLICATION STORY OF THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES. Applicant's Signature Print Name			Grading 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 COMWITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBE THIS APPLICATION, (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMWITH ALL REGULATIONS OF HOWARD COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES. Applicant'S Signature Print Name Date Date	the same of the sa			
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 DESCRIBE THIS APPLICATION (5) THE FLESHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES. Applicant's Signature Print Name Date Date		☐ Manufactured Home	Building Shell Permit Number:	
owner	WITH ALL REGULATIONS OF HOWARD COUNTY IN THIS APPUCATION (S) THAT HE/SHE GRANTS CO.	WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE W	VILL PERFORM NO WORK ON THE ABOVE REFERENCED PRO	PERTY NOT SPECIFICALLY DESCRIBE
owner	Applicant's Signature	Pr	int Name	
owner	Louis Count Q SMA	1.com	c/21/19	
Title/Company				
	Title/Company			

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	4/21/18	Kmi m V

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 Z	one:	
SDP/Red-line approval date:		

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	#

5661 NON .001 1/19775 HOWARD COUNTY, HENEVANIED BLECTION DISTRICT Nº 4 17312 WHITE PULIUS COURT MHITE WOOD ESTATES \$1.107 HOUSE GOCATION (m/2,00) COURT SUMA STILL APPROVED WALK-THRU BUILDING PERMIT BP# APP. SAN and puel Dark opposed zu =, 54 250.E SI 107 DI 100. 22770 ביספברטא SCALE: 1", 50" HOUSE DETAIL Cavisa HOUSE W/ BENCT. TENVOYED S STORY FRAME שמש שנים מסטי