

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

Date Received:	
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Building Address: 13262	STYER COURT	Property Owner's Name: Tosh + Reka	Moutfort
City: Hickland State:	MD Zip Code: 20777	Address: 13262 Styer C1.	
		City: Hughlind State: Ma Phone: Fax:	Zip Code: Z U /) /
Suite/Apt. #SDF		Email:	-
Subdivision:			
Lot: Tax Map: Parcel:		Applicant's Name & Mailing Address, (If other	er than stated herein)
7 -1 -1		Applicant's Name:	
Existing Use: Reside-fiel		Address:State:	Zin Code:
Proposed Use: Knowledential		Phone: Fax:	
Estimated Construction Cost: \$ 65,000		Email:	
		Contractor Company: Berarduce;	Contracting
Description of Work:	1: (01)	Contact Person: Chris Berand	Juli 1
	tion (8' x 25')	Address: 1508 April Or.	
onto vear of how		City: he turnstor State: M.D.	Zip Code: 21157
500 sq. ft. dec	k unto rear	License No.: Mric 995	
of home		Phone: 443-79/-4404 Fax:	
		Email: CFULUA & HUTMAIL.	Lein
Occupant/Tenant Name:		10:6	Ave Here Deci
Was tenant space previously occupied?	Yes □No	Engineer/Architect Company: GBL CV	
Contact Name:		Responsible Design Prof.: Greg Litt	10
Address:		Address: P.O. Box 237	
City:		City: Finksbig State: Me. Zi	Code: 7/048
		Phone: 40 - 833 - 8 320 Fax:	
Phone:	Fax:	Phone: 100 077 0 200 Fax:	
Email:		Email:	
Commercial Building Characteristics	Residential Building Characteristics	Utilities	
Height:	SS SF Dwelling SF Townhouse	Electric: Yes No	
No. of stories:	Depth Width	Gas: Yes No	
Gross area, sq. ft./floor:	1st floor:	Water Supply	
A	2 nd floor:	☐ Public	
Area of construction (sq. ft.):	Basement:	☑ Private	
Use group:	☐ Unfinished Basement	Sewage Disposal	
	☐ Crawl Space	☐ Public	
Construction type:	☐ Slab on Grade	⋈ Private	^
☐ Reinforced Concrete	No. of Bedrooms:	Heoting System	
☐ Structural Steel	Multi-family Dwelling	☐ Electric ☐ Oil	
☐ Masonry ☐ Wood Frame	No. of efficiency units: No. of 1 BR units:	☐ Natural Gas ☐ Propane Gas	
State Certified Modular	No. of 2 BR units:	Other:	
E state certifies (Mosaid)	No. of 3 BR units:	Sprinkler System:	
	Other Structure:	☐ Yes ☐ No	
	Dimensions:	1163	
> Roadside Tree Project Permit	Footings:	Grading Permit Number:	
Pondaido Tros Project Pormit #	Roof:	Transfer and the second	
Roadside Tree Project Permit #	☐ State Certified Modular	Building Shell Permit Number:	
		Building Shell Perfilit Wolfinger.	
		Building Shell Permit Number: MAKE THIS APPUCATION; (2) THAT THE INFORMATION IS CORRE PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NO	
APPLICATION; (5) THAT HE/SHE GRANTS COUNTY O	FFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY	FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND	
Applicant's Signature		int Name	· · · · · · · · · · · · · · · · · · ·
Email Address President Berardic	Da Da	\$\(\(\s\\/\)\(\)\(\)	
President Berardic	i Contracting		
Title/Company			
	Checks Payable to: DIRECTOR OF FI		
PLEASE WRITE NEATLY & LEGIBLY -FOR OFFICE USE ONLY-			
	-FOR OFFICE	USE UNLY-	
ACENCY DATE S	IGNATURE OF APPROVAL DPZ SETBAC	K INFORMATION Filing Fee	\$

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)	<u> </u>	40
Health	X.15-1X	Dewald

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	#

