



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: 644 Sideling Court
City: Skylesville State: MD Zip Code: 21784
Suite/Apt. #: _____ SDP/WP/BA #: _____
Subdivision: Gaithers Sideling S 4
Lot: 10 Tax Map: 4 Parcel: 110

Existing Use: Existing Single Family Dwelling
Proposed Use: Same
Estimated Construction Cost: \$ 50,000.00

Description of Work: Extend 2nd flr interior balcony 16" new width 4'6"X13'7" 21 sq ft
new front door replace ex curved bay window with box 2'X8' no chg in header size remove
existing front porch replace with new add 2'4"X20' overhang in front of existing garage change
garage door from 2 doors to 1 door 17' width

Occupant/Tenant Name: _____
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: Barbara Schaeffer
Address: 7905 Solley Road
City: Glen Burnie State: MD Zip Code: 21060
Phone: 410-733-0433 Fax: 410-360-9309
Email: allaboutpermits@hotmail.com

Property Owner's Name: Dale E. Walker
Address: 644 Sideling Court
City: Skylesville State: MD Zip Code: 21784
Phone: 443-610-8359 Fax: _____
Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: All About Permits LLC Barbara Schaeffer
Address: 7905 Solley Rd
City: Glen Burnie State: MD Zip Code: 21060
Phone: 410-733-0433 Fax: 410-360-9309
Email: allaboutpermits@hotmail.com

Contractor Company: Owings Homes Services
Contact Person: Ashley Mongenhan
Address: 1912 Liberty Road
City: Eldersburg State: MD Zip Code: 21784
License No.: 19661
Phone: 410-549-3800 Fax: _____
Email: ashley@owingshomeservice.com

Engineer/Architect Company: _____
Responsible Design Prof.: _____
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: | <u>Depth</u> <u>Width</u> |
| Gross area, sq. ft./floor: | 1 st floor: _____ 2 nd floor: _____ |
| Area of construction (sq. ft.): | Basement: _____ <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl Space |
| Use group: | <input type="checkbox"/> Slab on Grade |
| Construction type: | No. of Bedrooms: _____ |
| <input type="checkbox"/> Reinforced Concrete | Multi-family Dwelling |
| <input type="checkbox"/> Structural Steel | No. of efficiency units: _____ |
| <input type="checkbox"/> Masonry | No. of 1 BR units: _____ |
| <input type="checkbox"/> Wood Frame | No. of 2 BR units: _____ |
| <input type="checkbox"/> State Certified Modular | No. of 3 BR units: _____ |
| | Other Structure: _____ |
| | Dimensions: _____ |
| <input checked="" type="checkbox"/> 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 | |
|---|---|
| Electric: | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Gas: | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Water Supply | |
| <input checked="" type="checkbox"/> Public | |
| <input checked="" type="checkbox"/> Private | |
| Sewage Disposal | |
| <input type="checkbox"/> Public | |
| <input checked="" type="checkbox"/> Private | |
| 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 checked="" type="checkbox"/> No | |
| Grading Permit Number: <u>1</u> | |
| 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

allaboutpermits@hotmail.com

Email Address

Owner

Title/Company

Barbara Schaeffer
Print Name

8/22/18

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 | 8/29/2018 | <i>[Signature]</i> |

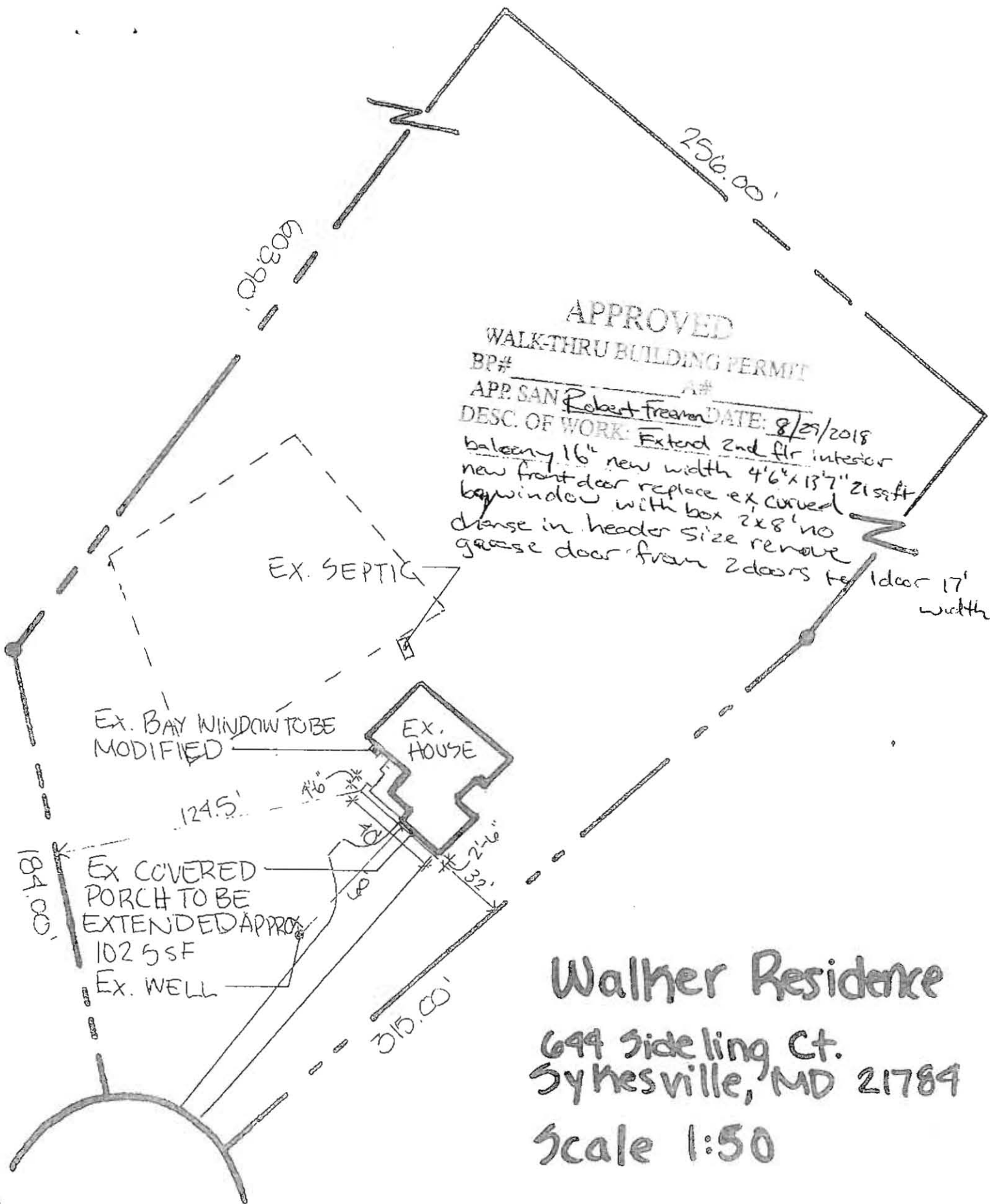
Is Sediment Control approval required for issuance? ☐ Yes ☐ No
☐ CONTINGENCY CONSTRUCTION START

| |
|---|
| 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 | \$ |
| 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

T:\Operations\Updated Forms\BuildingPermitApplication03.29.2018.docx



Walther Residence
699 Sideling Ct.
Sykesville, MD 21784
Scale 1:50

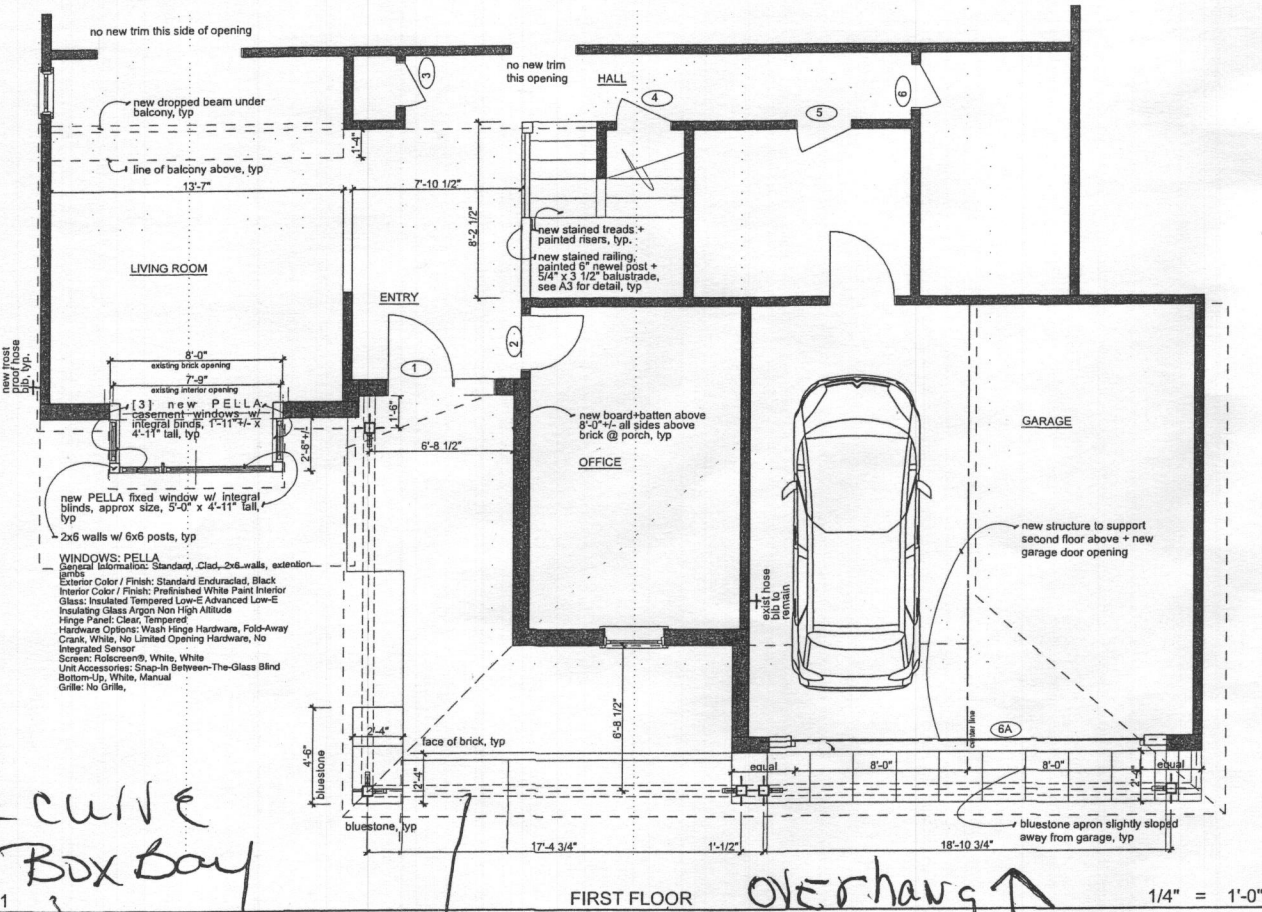
APPROVED
WALK-THRU BUILDING PERMIT
BP#

APP. SAN Robert Freeman DATE: 8/29/2018
DESC OF WORK: Extend 2nd flr interior

balcony 16" new width 4'6" x 13'7" 2' x 8'
new front door replace extend bay window
width box 2' x 8' no change in header
size remove package door from 2 doors
to 1 door 17' length

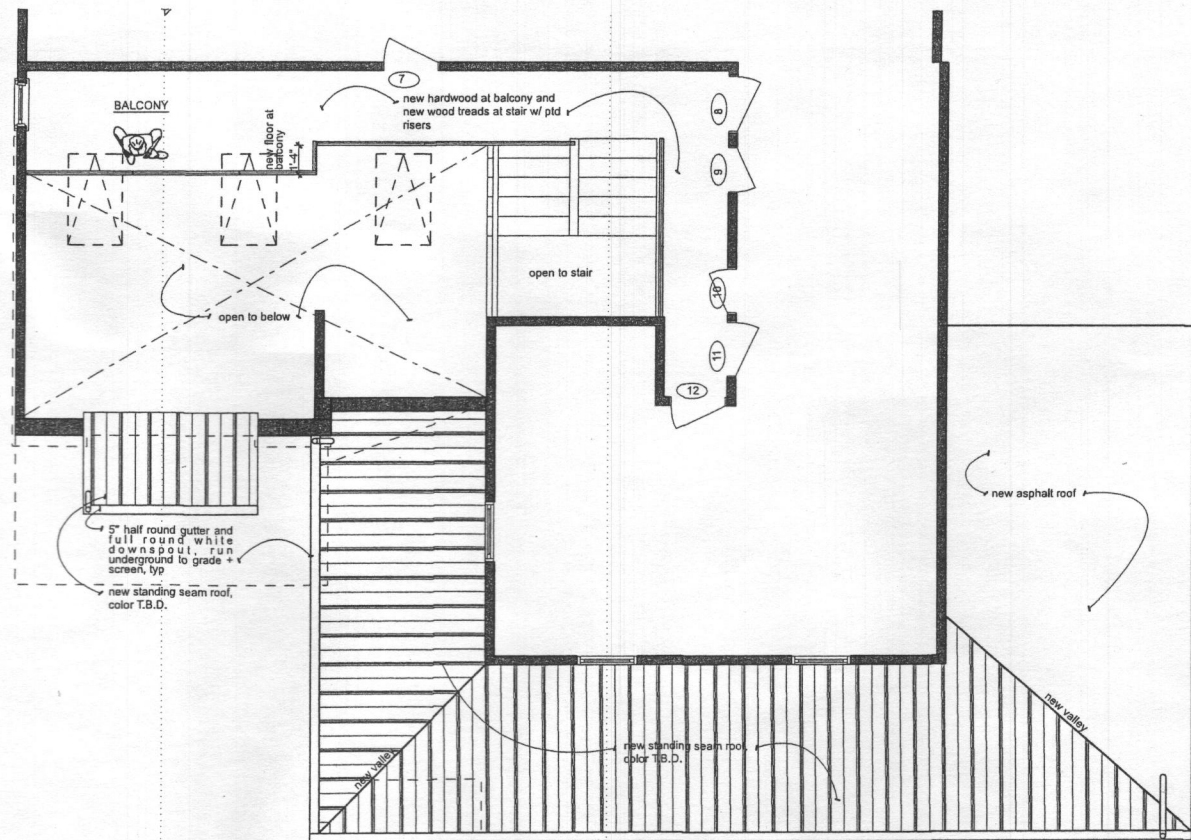
Extend 2' 4' 7'

OVERhang
Extend
Enlarge open
17'



front ELEVATION

1/4" = 1'-0"



SECOND FLOOR

1/4" = 1'-0"



front elev Perspective

1" = 5'

place architecture:design

architect

WALKER-SINGER RESIDENCE

644 Sidelong Court
Sykesville, Maryland 21784

project

| date: | phase: |
|---------|--------------------|
| 4.4.18 | pricing set |
| 6.1.18 | constr set |
| 6.18.18 | constr set-revised |
| 8.21.18 | permit set |

drawing:

floor plans
+ elevation



sheet no:

A2