



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: 3016 CLEAR DRIVE CT.
City: GLANWOOD State: MD Zip Code: 21738
Suite/Apt. #: _____ SDP/WP/BA #: _____
Subdivision: _____
Lot: _____ Tax Map: _____ Parcel: _____

Existing Use: SFD
Proposed Use: SFD w/ Deck
Estimated Construction Cost: \$ 12,000.00
Description of Work: Construct 20' x 10' Deck
WITH NO STEPS. EXTENSION OFF
EXISTING ROSE SARGENT PORCH

Occupant/Tenant Name: _____
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: George & Holly Hooker
Address: 3016 CLEAR DRIVE CT.
City: GLANWOOD State: MD Zip Code: 21738
Phone: 443 405-3429 Fax: _____
Email: HOLLY.HOOKER@VERIZON.NET

Applicant's Name & Mailing Address (if other than stated herein)
Applicant's Name: JAMES E. EADS
Address: 4521 RED LANE CT
City: BELCOTT CITY State: MD Zip Code: 21043
Phone: 240 876-6479 Fax: _____
Email: JCEADS@HOTMAIL.COM

Contractor Company: JCEADS GEN. CONTRACTING
Contact Person: CHAD EADS
Address: 4521 RED LANE CT
City: BELCOTT CITY State: MD Zip Code: 21043
License No.: 75933
Phone: 240 876-6479 Fax: _____
Email: JCEADS@HOTMAIL.COM

Engineer/Architect Company: AMY TAYLOR
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:	Depth Width
Gross area, sq. ft./floor:	1st floor:
Area of construction (sq. ft.):	2nd floor:
Use group:	Basement:
	<input type="checkbox"/> Finished Basement
	<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 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 checked="" 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:
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: JCEADS@HOTMAIL.COM
Email Address: JCEADS@HOTMAIL.COM
Title/Company: OWNER

Print Name: JAMES E. EADS
Date: 5/9/19

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	<u>5-14-19</u>	<u>Dane Burd</u>

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	#

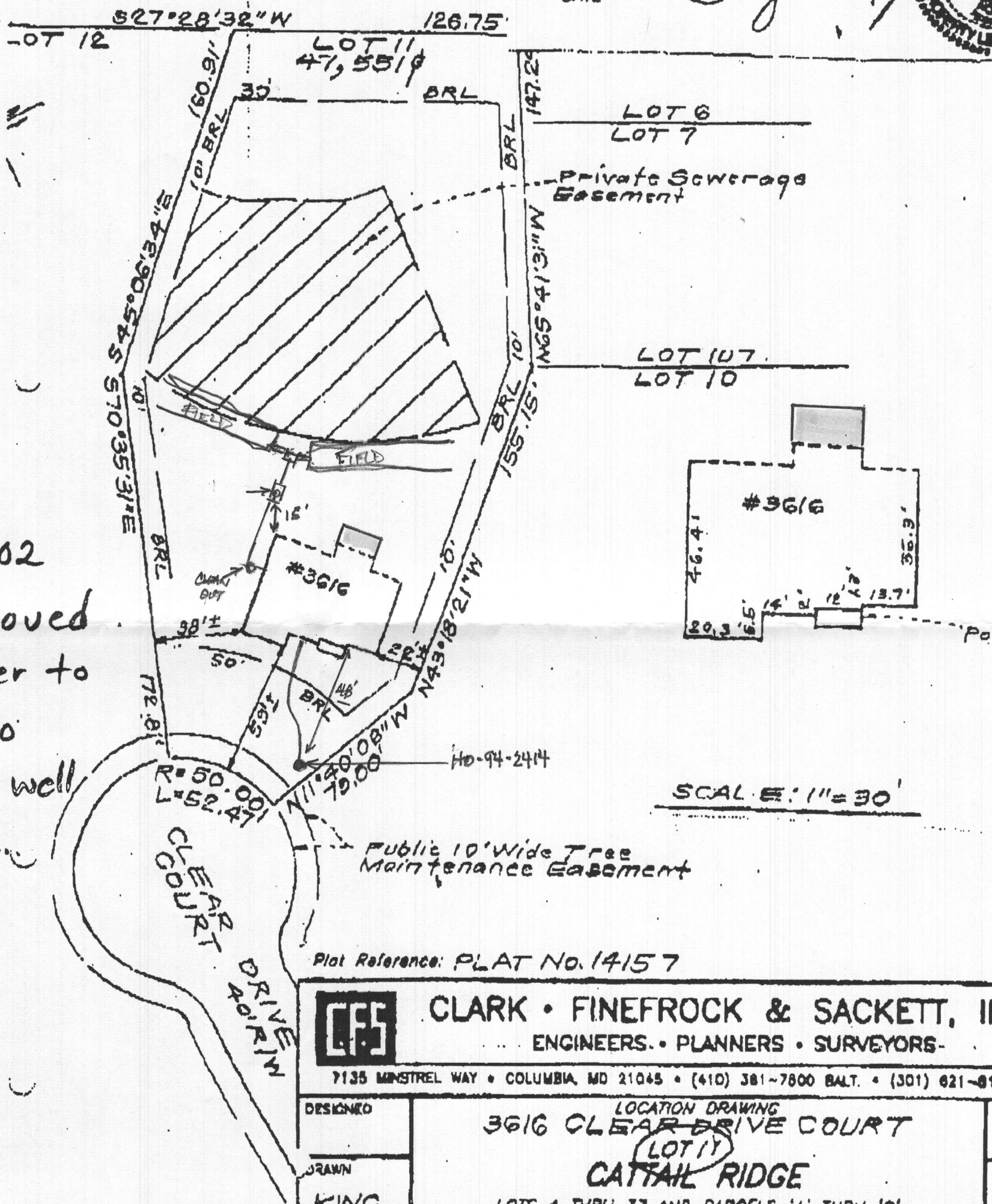
SURVEYOR'S CERTIFICATE

I hereby certify that a field survey of this property has been made under my supervision for the purpose of locating the improvements shown hereon, and that they are located as shown.

10-15-01
DATE

[Signature]
MICHAEL T ROSE
SURVEYOR

ON-BUILDABLE
RESERVATION
PARCEL 'O'



1/17/02
House moved
5' closer to
road - no
impact on well
or septic.

BB

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APPROVED

WALK-THRU BUILDING PERMIT

BP#

A#

APP. SAN D. Bernard DATE: 5-14-19

DESC. OF WORK: 20' X 10' Deck

Plot Reference: PLAT No. 14157



CLARK • FINEFROCK & SACKETT, II
ENGINEERS • PLANNERS • SURVEYORS

7135 MINSTREL WAY • COLUMBIA, MD 21045 • (410) 381-7800 BALT. • (301) 621-01

DESIGNED

DRAWN

KWC

CHECKED

FAS

DATE

LOCATION DRAWING

3616 CLEAR DRIVE COURT

LOT 11
CATTAIL RIDGE

LOTS 4 THRU 37 AND PARCELS 'A' THRU 'C'
(A RESUBDIVISION OF "CATTAIL RIDGE", LOTS 1 THRU 3, PLAT NO. 13080 AND
THE RESIDUE OF SYNDACON PROPERTY, INC., LIBER NO. 4226 AT FOLIO 484)

FOURTH ELECTION DISTRICT HOWARD COUNTY, MARYLAND