

DEPT. OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1819 AUTOMATED INFORMATION (410) 313-3888		<b>HOWARD COUNTY</b> <b>PERMIT APPLICATION</b>		<b>PERMIT NUMBER</b> B08001175-31																																																																															
Building Address <u>3185 River Valley Church</u> <u>West Friendship, MD 21784</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision _____ Section _____ Area _____ Lot _____ Tax Map _____ Parcel _____ Grid _____ Zoning _____ Map Coordinates _____ Lot Size _____ Existing Use <u>SPD</u> Proposed Use <u>Sw Deck</u> Estimated Construction Cost \$ <u>3500.00</u> Description of Work <u>12 x 12 Deck</u> <u>w/ steps @ Hot Tub</u> Occupant or Tenant <u>Tub</u> Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____		Property Owner's Name <u>John S. Searcy</u> Address <u>5185 River Valley Church</u> City <u>West Friendship, MD</u> Zip Code <u>21794</u> Phone <u>410 442 1100</u> Phone _____ Applicant's Name & Mailing Address, (if other than stated herein): _____ Phone _____ Fax _____ Contractor Company <u>Mark's Decks &amp; Home Improvements</u> Contact Person <u>Mark Bonhag</u> Address <u>7021 Mink Hollow Rd</u> City <u>Highland</u> State <u>MD</u> Zip Code <u>20777</u> License No. <u>34999</u> Phone <u>301 854 0281</u> Fax _____ Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____																																																																																	
<b>BUILDING DESCRIPTION - COMMERCIAL</b>			<b>BUILDING DESCRIPTION - RESIDENTIAL</b>																																																																																
<b>Building Characteristics</b> Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular		<b>Utilities</b> Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads																																																																																	
<b>Building Characteristics</b> SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 <sup>st</sup> floor: _____ 2 <sup>nd</sup> floor: _____ Basement: _____ Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawlspace <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home		<b>Utilities</b> Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:																																																																																	
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.																																																																																			
<u>Mark Bonhag</u> Applicant's Signature		<u>Mark Bonhag</u> Print Name <u>4-17-08</u> Date																																																																																	
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Distribution of Copies - White: Building Officials - Green: LDD, DPZ - Yellow: DED, DPZ - Pink: Health - Gold: SHA T:forms/buildingpermitapplication																																																																																			

