

# Building Permit Application

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Permits: 410-313-2455  
[www.howardcountymd.gov](http://www.howardcountymd.gov)

Date Received: 4/20/11

Permit No.: 51400127-2

Building Address: 12517 WESTLAND CT  
City: Fulton State: MD Zip Code: 20754  
Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: 62-14-90 F15  
Census Tract: \_\_\_\_\_ Subdivision: Westland Inn  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 12  
Tax Map: 45 Parcel: 28 Grid: \_\_\_\_\_  
Zoning: R2-860 Map Coordinates: \_\_\_\_\_ Lot Size: 3,040  
134,600  
Existing Use: Vacant Lot  
Proposed Use: Single Family Home  
Estimated Construction Cost: \$ 683,970  
Description of Work: 600 Rtdledge w/ 1st apt  
1st apt 3-1000 sq ft 2nd apt 2-1000  
1st apt 1400 2nd apt 1100 3rd apt 1200 3rd apt 1200  
Occupant/Tenant Name: \_\_\_\_\_  
Was tenant space previously occupied? ☐ Yes ☐ No  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Property Owner's Name: WILLIAMS BURG  
Address: 385 Main Street  
City: Colchester State: VT Zip Code: 05401  
Phone: 417-997-3421 Fax: \_\_\_\_\_  
Email: marc@williamsburg.com

**Applicant's Name & Mailing Address, (If other than stated herein)**  
Applicant's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Contractor Company: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
License No. : 155 \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Engineer/Architect Company: \_\_\_\_\_

Responsible Design Prof.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	<b>Depth</b> <b>Width</b>
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:
	2 <sup>nd</sup> floor:
Area of construction (sq. ft.):	Basement:
	<input type="checkbox"/> Finished Basement
Use group:	<input type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
<b><u>Construction type:</u></b>	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:
<input type="checkbox"/> Structural Steel	<b><u>Multi-family Dwelling</u></b>
<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:
➤ <b>Roadside Tree Project Permit</b>	Footings:
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:
<b>Roadside Tree Project Permit #</b>	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

<u>Utilities</u>		
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<u>Water Supply</u>		
<input type="checkbox"/> Public		
<input checked="" type="checkbox"/> Private		
<u>Sewage Disposal</u>		
<input type="checkbox"/> Public		
<input checked="" type="checkbox"/> Private		
<u>Heating System</u>		
<input type="checkbox"/> Electric <input type="checkbox"/> Oil		
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas		
<input type="checkbox"/> Other:		
<u>Sprinkler System:</u>		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Grading Permit Number:		446-233
Building Shell Permit Number:		YES NOT COVER LOT GRAD

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**

Print Name \_\_\_\_\_

**Email Address**

Date \_\_\_\_\_

**Title/Company**

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	5/30/19	H. Osmond

<b>DPZ SETBACK INFORMATION</b>	
<b>Front:</b>	
<b>Rear:</b>	
<b>Side:</b>	
<b>Side St.:</b>	
<b>All minimum setbacks met?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Is Entrance Permit Required?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Historic District?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Lot Coverage for New Town Zone:</b>	
<b>SDP/Red-line approval date:</b>	

Filing Fee	\$ 100
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# 10317

**Distribution of Copies:**      **White: Building Officials**      **Green: PSZA, Zoning**

Yellow: PSZA, Engineering

### Pink: Health

Gold: SHA