

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.:	

122/2/	. // 2/	-4 0/ :	
Building Address: 12863 Lime		Property Owner's Name: Ethny 05a5 Address: /2163 Lime Kuln Rd	
City: High and State:	MD Zip Code: 20777	City Harland State: MD 7in Code: 21	5777
Suite/Apt. #SDP/	/WP/RA #·	City: Highland State: MD Zip Code: 28  Phone: 240 481 5799 Fax: Email: Ethy Obas @ Yahbo.Com	
Subdivision: Lime Kiln Val		Email: Ethny - Obas @ yahoo. Com	
Lot: / 4 Tax Map: 90	Parcel:	Applicant's Name & Mailing Address, (If other than stated her Applicant's Name: Home Owner	
Existing Use: SFD		Address: State: Zip Code: Phone: Fax:	
Proposed Use: SFD		City: State: Zip Code: _	
		Phone: Fax:	
Estimated Construction Cost: \$\$ 46 0			
Description of Work: Building	a deck	Contractor Company:	
17'x 80"	with stains	Contact Person:	
81		Address:State:Zip Code:	
		City: State: Zip Code:	
		License No. :	
		Phone:Fax:	
Occupant/Tenant Name:		Email:	
		Engineer/Architect Company	
Was tenant space previously occupied?		Engineer/Architect Company:	
Contact Name:		Responsible Design Prof.:	
Address:		Address:	
City:S		City: State: Zip Code:	
Phone:	Fax:	Phone:Fax:	
Email:		Email:	
Commercial Building Characteristics	Residential Building Characteristics	Utilities	
Height:	SF Dwelling  SF Townhouse	Electric: Yes No	
No. of stories:	Depth Width	Gas: Yes No	
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:	Water Supply	
	2 <sup>nd</sup> floor:	□ Public	
Area of construction (sq. ft.):	Basement:	□ Private	
	Finished Basement	Sewage Disposal	
Use group:	☐ Unfinished Basement ☐ Crawl Space	□ Public	
Construction type:	☐ Slab on Grade	□ Public □ Private	
☐ Reinforced Concrete	No. of Bedrooms:		
☐ Structural Steel	Multi-family Dwelling	Heating System	
☐ Masonry	No. of efficiency units:	□ Electric □ Oil	
☐ Wood Frame	No. of 1 BR units:	☐ Natural Gas ☑ Propane Gas	
State Certified Modular	No. of 2 BR units:	☐ Other:	
	No. of 3 BR units:  Other Structure:	Sprinkler System:	
	Dimensions:	√Yes □ No	Control (In and
> Roadside Tree Project Permit	Footings:		
□Yes ☑No	Roof:	Grading Permit Number:	
Roadside Tree Project Permit #	☐ State Certified Modular		
	☐ Manufactured Home	Building Shell Permit Number:	
WITH ALL REGULATIONS OF HOWARD COUNTY WH	HICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WII DEFICIALS THE RIGHT TO ENTER ONTO THIS PROPERT	MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE LI PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.  E	WILL COMPLY CRIBED IN THIS
Title/Company			
	Checks Payable to: DIRECTOR OF		
	**PLEASE WRITE NE	ATLY & LEGIBLY**  E USE ONLY-	
	-FOR OFFIC	L OOL ONLIT	

AGENCY	DATE	SIGN	IATURE	OF APPROVAL
State Highways				
<b>Building Officials</b>				
PSZA (Zoning)				
PSZA ( Engineering )				
Health	5/2	19	14.	Oswal

☐ CONTINGENCY CONSTRUCTION START

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	\$
<b>Guaranty Fund</b>	\$
Add'I 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

