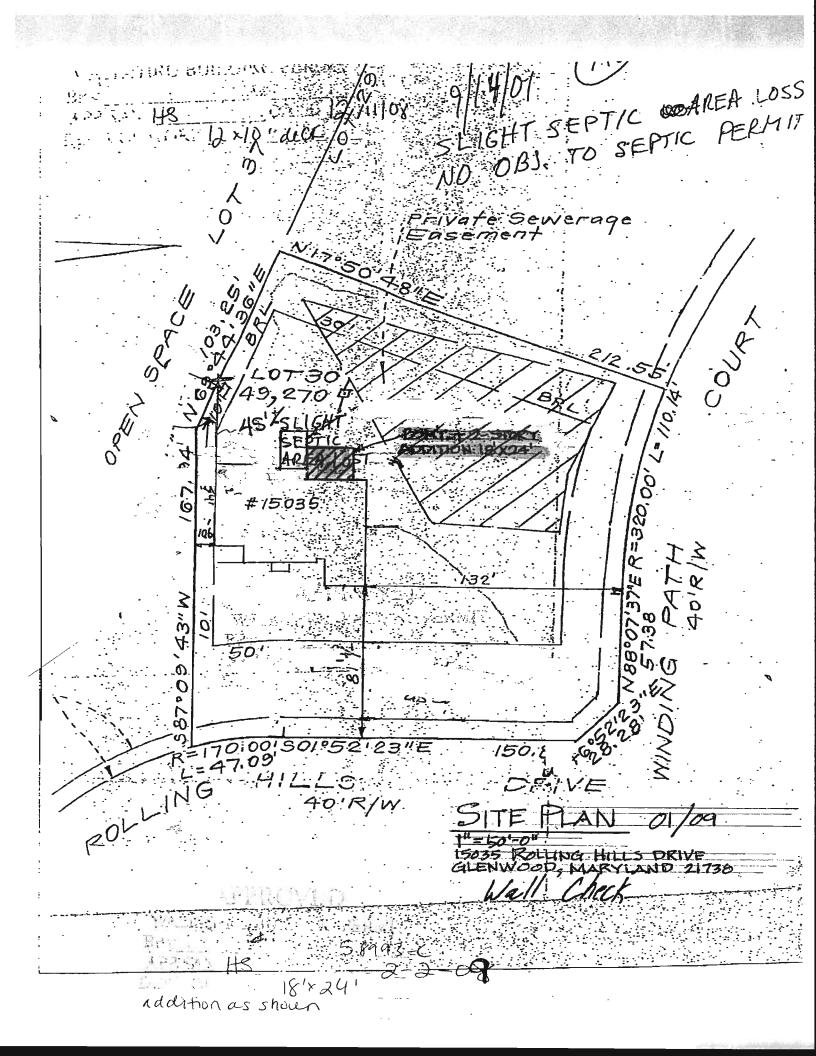
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
MAD COURT HOUSE DRIVE
GLICOTT CITY, AD 21043
PERMITS (410) 313-2453 RESPECTIONS (410) 313-1810
AMICINATED REPORTATION (410) 313-300

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

Building Address 15035 ROLLING HILLS DRIVE		Property Owner's Name DR: SHAHAB A. MALIK	
GLENWOOD MD: 21738		Address	
Suite/Apt. #: SDP/WP/Petition #:		15035 ROLLING HILLS DRIVE	
Census Tract 60560/ Subdivision CATTAIL RIDGE		City GLENWOOD State Ms Zip Code 21738	
Section Area Lot Lot 20 1./31/A		Phone 410-442-5897 Phone 410-582-3960 Applicant's Name & Mailing Address, (if other than stated hereon):	
Tax Map <u>21</u> Parcel Grid <u>21-3</u>		SAME AS ABOVE Phone 410-442-5897 Fax 410-582-9653	
Zoning Map Coordinates Lot size \ / A c R E		From 470-447-5647 100 410-502 7655	
Existing		Contractor Company	
Use <u>RESIDEN TIAL</u> Proposed Use <u>RESIDEN TIAL</u>		Out of Davis	
Estimated Construction Cost \$ 50 000 2 approximally		CONTACT PERSON CR: SHAHAB A. MALIK MOHAMMUD A. MALIK	
Description of Work EXTENTION OF BASEMENT,		Address 15035 ROLLING HILLS DRIVE	
MORNING ROOM AND MASTER BED ROOM		City GLEN 1300 State MD Zip Code 21738	
		License No Fax 410 -582 - 9653	
Occupant or Tenant SELF OCCUPICD		Engineer or Architect Company <u>RESIDEN TIAL ARCHITECH</u> Tu DESCONI	
Name DRI S'HAHAB A.	MALIK	Contact Person HENRY R. WILLARD JR.	
Address 15035 ROLLING H		Address P. O. Box 186 SLENELS	
City GLEN WOOD State _	<u> </u>	City GLENGLG State MO: Zip Code 21738	
Phone 410-442-5897 Fax 416	58 ₃ - 58 ₃ - 665 _{.3}	Phone 4/0 -489 - 4673 Fax	
BUILDING DESCRIPTION	I - <u>COMMERCIAL</u>	BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilitieş	Building Characteristics	Utilities
Height:	Water Supply:	SF Dwelling SF Townhouse	Water Supply:
No. of stories:	Public Private	1st floor: 76' Width 48'	Public Private
	Sewage Disposal: Public	2nd floor: 62 48 Basement: 62 48	Sewage Disposal:Public
Gross area, sq. ft. per floor:	Private	Finished Basement Unfinished Basement	Private
Gross area, sq. ft. per floor: Use group:	Private Electric Yes No Gas Yes No	Finished Basement Unfinished Basement Crawl space Slab on Grade No. of Bedrooms	Electric Yes 🖫 No 🗆 Gas Yes 🖾 No 🗅
Use group:	Electric Yes No Gas Yes No Heating System:	Finished Basement Grawl space Slab on Grade No. of Bedrooms Height: 4' AND 8' Multi-family dwellings:	Electric Yes ☑ No □
Use group: Construction type: Reinforced Concrete	Electric Yes No Heating System: Electric Oil Natural Gas	Finished Basement G' Crawl space Slab on Grade No. of Bedrooms Height: With-family dwellings: No. of efficiently units: No. of 1 BR units: No.	Electric Yes () No Gas Yes () No Heating System: Electric Oil Natural Gas ()
Use group: Construction type: Reinforced Concrete Structural Steel Masonry	Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas Propane Gas	Finished Basement G' Crawl space Slab on Grade No. of Bedrooms Helght: 4' AND 8' Multi-family dwellings: No. of efficiently units:	Electric Yes II No I Gas Yes II No I Heating System: Electric I Oil I Natural Gas II Propane Gas I
Use group: Construction type: Reinforced Concrete Structural Steel	Electric Yes No Heating System: Electric Oil Natural Gas	Finished Basement Crawl space Slab on Grade No. of Bedrooms Height: AND 8' Multi-family dwellings: No. of efficients units: No. of 1 BR units: No. of 3 BR units: Other Structure:	Electric Yes (1) No
Use group: Construction type: Reinforced Concrete Structural Steel Masonry	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ Full □ Partial	Finished Basement Grawl space Slab on Grade No. of Bedrooms SHelght: Yellow No. of Sedrooms SHelght: Yellow No. of efficienty units: No. of 1 BR units: No. of 2 BR units: No. of 3 BR units: No. of 4 BR units: No. of 4 BR units: No. of 4 BR units: No. of 5 BR units: No	Electric Yes (1) No Gas Yes (2) No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ Full	Finished Basement Grawl space Slab on Grade No. of Bedrooms Helght: Yellow Standard Stan	Electric Yes (1) No
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The undersicked hereby certifies and agrees as follow Howard Couptifying here applicable therefor (4) that	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ — Full — Partial — Other Suppression — # of Heads ESSIL THAT HEISHE IS AUTHORIZED TO MAKE THIS. ESSHE WILL PERFORM NO WORK ON THE ABOVE RI	Finished Basement Grawl space Slab on Grade No. of Bedrooms Shelight: Grawl Space Grawl Space Slab on Grade No. of Bedrooms Shelight: Grawl Sramly dyellings: No. of a fficienty units: No. of 2 BR units: No. of 3 BR units: No. of 3 BR units: Cother Structure: Dimensions: Footings: Roof Height: State Certified Modular Manufactured Home	Electric Yes (1) No
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The underskinded hereby Certified and Agrees As Follow	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ — Full — Partial — Other Suppression — # of Heads ESSIL THAT HEISHE IS AUTHORIZED TO MAKE THIS. ESSHE WILL PERFORM NO WORK ON THE ABOVE RI	Finished Basement Grawl space Slab on Grade No. of Bedrooms Height: Y AND X Height: No. of afficienty units: No. of 1 BR units: No. of 2 BR units: No. of 3 BR units: Other Structure: Dimensions: Footings: Roof Height: State Certified Modular Manufactured Home PEPERANCE PROPERTY NOT SPECIFICALLY DESCRIBEO N THIS APP NO POSTNIO NOTICES.	Electric Yes (1) No
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The undersicked hereby certifies and agrees as follow Howard Couptifying here applicable therefor (4) that	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ — Full — Partial — Other Suppression — # of Heads ESSIL THAT HEISHE IS AUTHORIZED TO MAKE THIS. ESSHE WILL PERFORM NO WORK ON THE ABOVE RI	Finished Basement Grawl space Slab on Grade No. of Bedrooms Shelight: Grawl Space Grawl Space Slab on Grade No. of Bedrooms Shelight: Grawl Sramly dyellings: No. of a fficienty units: No. of 2 BR units: No. of 3 BR units: No. of 3 BR units: Cother Structure: Dimensions: Footings: Roof Height: State Certified Modular Manufactured Home	Electric Yes (1) No
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The understand Hereby Certified and Agrees As Follow HOWARD COUNT TYMON ARE APPLICABLE THERETO; (4) THAT OFFICIALS THE RICH TO ENTER ONTO THIS PROPERTY FOR THE I	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ — Full — Partial — Other Suppression — # of Heads ESSIL THAT HEISHE IS AUTHORIZED TO MAKE THIS. ESSHE WILL PERFORM NO WORK ON THE ABOVE RI	Finished Basement Grawl space Slab on Grade No. of Bedrooms S Height: 9' AND 8' Multi-family dwellings: No. of efficiently units: No. of 18R units: No. of 3 BR units: No. of 3 BR units: Other Structure: Dimensions: Footings: Roof Height: State Certified Modular Manufactured Home APPLICATION, (2)THAT THE REFORMATION IS CORRECT; (3) THAT THE EFERENCE PHOPERTY NOT SPECIFICALLY DESCRIBED IN THIS APP NO POSTING NOTICES. SHAHABA MAA. Print Name	Electric Yes (1) No
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The undersioned hereby certifies and agrees as follow howard Country mode have applicable therefor (4) that to officials the Richt of the International This property for the International Country of the International Country of the International Country for the International Country	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ Full □ Partial □ Other Suppression □ # of Heads E/SHE WILL PERFORM NO WORK ON THE ABOVE RIPURPOSE OF INSPECTING THE WORK PERMITTED A	Finished Basement Grawl space Slab on Grade No. of Bedrooms SHAID	Electric Yes (1) No
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The underscaled Hereay certified and Agrees As follow Howard Country which are Applicable Therefor, (4) That if officials the Ricky to Enter onto this property for the officials the Ricky to Enter onto this property for the officials to the Ricky to Enter onto this property for the official state of the Company Applicant's Signature OWNER Title/Company	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ Full □ Partial □ Other Suppression □ # of Heads ESHE WILL PERFORM NO WORK ON THE ABOVE RIPURPOSE OF INSPECTING THE WORK PERMITTED A	Finished Basement Grawl space Slab on Grade No. of Bedrooms SHeight: 9' AND 8' Multi-family dwellings: No. of efficienty units: No. of 18R units: No. of 18R units: No. of 3 BR units: Other Structure: Dimensions: Footings: Roof Height: State Certified Modular Manufactured Home APPLICATION, (2)THAT THE MFORMATION IS CORRECT; (3) THAT THE EFFERENCE PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APP NO POSTINIO NOTICES. SHAHAIS AMA. Print Name 2-2-2009 Date FFINANCE OF HOWARD COUNTY ATLY AND LEGIBLY. ** EUSLFONLY	Electric Yes (1) No
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The undersioned hereby certifies and agrees as follow howard Country mode have applicable therefor (4) that to officials the Richt of the International This property for the International Country of the International Country of the International Country for the International Country	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ Full □ Partial □ Other Suppression □ # of Heads S:(1) That he/she is authorized to make this. Esthe will perprom No Work on the above repurpose of inspecting the work permitted a	Finished Basement Grawl space Slab on Grade No. of Bedrooms S. Height: 9' AND 8' Multi-family dwellings: No. of efficiently units: No. of 18R units: No. of 2 BR units: No. of 3 BR un	Electric Yes (1) No Gas Yes (2) No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A NFPA #13D NFPA #13D NFPA #13R Other:
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The underscence hereby certifies and agrees as follow howard Couptry pyton are applicable therefor (4) that officials the rich to enter onto this property for the table of the couptry of the co	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ Full □ Partial □ Other Suppression □ # of Heads E/SHE WILL PERFORM NO WORK ON THE ABOVE RIPURPOSE OF INSPECTING THE WORK PERMITTED A Checks payable to: DIRECTOR OF "PLEASE WRITE NEIFERD OF STEASE WRITE N	Finished Basement Grawl space Slab on Grade No. of Bedrooms SHelight: 9' AND 8' Multi-family dyvellings: No. of 1 BR units: No. of 1 BR units: No. of 2 BR units: No. of 3 BR units: No. of 3 BR units: State Certified Modular Manufactured Home APPLICATION, (2)THAT THE BY OF MATION IS CORRECT; (3) THAT HE EFFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION (2)THAT THE BY OF MATION ON TICES. SHA HAIS A MA. Print Name 2-2-2009 Date FENANCE OF HOWARD COUNTY ATELY AND LEGIBLY. DPZ SETBACK INFORMATION FICUAL: FILING PETTINE PETTI	Electric Yes (1) No Gas Yes (2) No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A NFPA #13D NFPA #13D NFPA #13R Other:
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The underskned hereby certifes and agrees as follow howard County mynch are applicable therefor (4) that to	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ Full □ Partial □ Other Suppression □ # of Heads ESHE WILL PERFORM NO WORK ON THE ABOVE REPURPOSE OF INSPECTING THE WORK PERMITTED A Checks payable to: DIRECTOR OF "PLEASE WRITE NE. FOR OFFICE SIGNATURE APPROVAL	Finished Basement Grawl space Slab on Grade No. of Bedrooms SHelight: 9' AND 8' Multi-family dwellings: No. of efficiently units: No. of 12 BR units: No. of 2 BR units: No. of 3 BR units: Other Structure: Dimensions: Footings: Roof Height: State Certified Modular Manufactured Home MAPPLICATION, (2)THAT THE MORATION IS CORRECT; (3) THAT HE EFFIRMED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPRIOR NOTICES. SHAHAIS AMA Print Name 2-2-2009 Date FINANCE OF HOWARD COUNTY ATELY AND LEGIBLY. " EUSLEDNLY- DPZ SETBACK INFORMATION FICURT. Reac. Perm	Electric Yes (1) No Gas Yes (2) No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A NFPA #13D NFPA #13B Other:
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The underskined hereby certifies and agrees as follow howard Court myser are applicable thereby (4) that to	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ Full □ Partial □ Other Suppression □ # of Heads ESHE WILL PERFORM NO WORK ON THE ABOVE REPURPOSE OF INSPECTING THE WORK PERMITTED A Checks payable to: DIRECTOR OF "PLEASE WRITE NE- FOR OFFICE SIGNATURE APPROVAL	Finished Basement Grawl space Slab on Grade No. of Bedrooms SHelight: 9' AND 8' Multi-family dwellings: No. of efficiently units: No. of 1 BR units: No. of 1 BR units: No. of 3 BR units: No. of 3 BR units: Other Structure: Dimensions: Footings: Roof Height: State Certified Modular Manufactured Home APPLICATION, (2) ITHAT THE NFORMATION IS CORRECT: (3) THAT HE EFFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APP NO POSTINIO NOTICES. SHAHABA MA MA Print Name 2 - 2 - 2009 Date FINANCE OF HOWARD COUNTY ATELY AND LEGIBLY. DPZ SETBACK INFORMATION FICUAL SIde:	Electric Yes (1) No Gas Yes (2) No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A NFPA #13D NFPA #13D NFPA #13R Other:
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The understand Hereay Certified and Agrees As Follow HOWARD COUNT TYMON ARE APPLICABLE THERETO; (4) THAT OFFICIALS THE RICH TO ENTER ONTO THIS PROPERTY FOR THE I Applicant's Signature OWNER TItle/Company AGENCY Land Development, DPZ State Highways Building Official Dev. Egogineering, ()PZ Health Fire Protection	Private	Finished Basement Grawl space Slab on Grade No. of Bedrooms S. Height: 9' AND 8' Multi-family dyvellings: No. of efficienty units: No. of 2 BR units: No. of 3 BR units: No. of 4 BR units: No. of 4 BR units: No. of 5 BR units: No. of 6 BR u	Electric Yes (1) No Gas Yes (2) No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A NFPA #13D NFPA #13B Other:
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The underskined hereby certifies and agrees as follow howard Court myser are applicable thereby (4) that to	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ Full □ Partial □ Other Suppression □ # of Heads ESHE WILL PERFORM NO WORK ON THE ABOVE RIPURPOSE OF INSPECTING THE WORK PERMITTED A Checks payable to: DIRECTOR OF □ PLEASE WRITE NED □ FOR OITHIC SIGNATURE APPROVAL	Finished Basement Grawl space Slab on Grade No. of Bedrooms SHelight: 9' AND 8' Multi-family dwellings: No. of efficiently units: No. of 2 BR units: No. of 3 BR units: No. of 3 BR units: Other Structure: Dimensions: Footings: Roof Height: State Certified Modular Manufactured Home MAPPLICATION, (2)THAT THE MORATION IS CORRECT; (3) THAT HE EFFERNCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPROPOSTIVIO NOTICES. SHAHAIS A MAPPINI NAME 2-2-2009 Date FINANCE OF HOWARD COUNTY ATELY AND LEGIBLY. DPZ SETBACK INFORMATION FICURT: Reac: Perm Side: Side St.: Add' All minimum setbacks met? TOT.	Electric Yes (1) No Gas Yes (2) No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A NFPA #13D NFPA #13B Other:
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The underskined hereay certifies and agrees as follow howard Country injuries are applicable therefor, (4) that is officially to state the kind of our tensor of this property for the tensor of the country of the conference of the country of the conference of the country of the count	Private Electric Yes □ No □ Gas Yes □ No □ Heating System: Electric □ Oil □ Natural Gas □ Propane Gas □ Sprinkler system: N/A □ Full □ Partial □ Other Suppression □ # of Heads ESINATURE APPROVAL ISSUANCE?	Finished Basement Finished Basement Grawl space Slab on Grade No. of Bedrooms Height: G'AND &' Multi-family diveilings: No. of efficienty units: No. of 1 BR units: No. of 2 BR units: No. of 3 BR units: Other Structure: Dimensions: Footings: Roof Height: State Certified Modular Manufactured Home APPLICATION, (2)THAT THE WFORMATION IS CORRECT: (3) THAT THE EFFERENCE PROPERTY NOT SPECIFICALLY DESCRIBEO IN THIS APP NO POSTINIO NOTICES. SHAHAIS A. MA. Print Name 2 - 2 - 2009 Date FFINANCE OF HOWARD COUNTY ATT. Y AND LEGIBLY. DPZ SETBACK INFORMATION FICULT: BIGG. FINANCE FINANCE FINANCE FINANCE FINANCE	Electric Yes (1) No Gas Yes (2) No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A NFPA #13D NFPA #13B Other:
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular The underscaled Hereau Certified and Adrees As Follow HOWARD COUNTY MICH ARE APPLICABLE THEREFO. (4) THAT HOWARD COUNTY MICH AND THE REPORT OF THE COUNTY MICH AND THE REPORT OF THE PROPERTY FOR THE COUNTY MICH AND THE PROPERTY FOR THE COUNTY MICH AND THE PROPERTY FOR THE COUNTY MICH AND THE PROPERTY OF THE PROPERTY OF THE COUNTY MICH AND THE PROPERTY OF THE PROPERTY	Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A Full Partial Other Suppression # of Heads Full Partial Other Suppression # of Heads Struppose of Name Thes. Efshe Will Perform No Work on the Above Right Perform The Work Permitted A PLEASE WRITE NEW FOR OFFICE SIGNATURE APPROVAL	Finished Basement Grawl space Slab on Grade No. of Bedrooms SHeight: 9' AND 8' Multi-family dyvellings: No. of a fficienty units: No. of 2 BR units: No. of 3 BR units: No. of 4 BR units: No. of 5 BR units: No. of 6 BR units: No. of	Electric Yes (1) No Gas Yes (2) No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A NFPA #13D NFPA #13D NFPA #13R Other:



DEPT. OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455
INSPECTIONS (410) 313-1810 B6800 3591 PERMIT NUMBER HOWARD COUNTY PERMIT APPLICATION AUTOMATED INFORMATION (410) 313-3800 Building Address 15035 ROLLING HILL DE Property Owner's Name DR: SHAHAB A. MAUK Address 15035 ROLLING HILLS DRIV.
City GLEN WOODS State MDZip Code 21738
Phone 410-442-589 Phone 443-370-5330 GLENWOODS MD21738 DRIVE SDP/WP/Petition #: Suite/Apt. #: Applicant's Name & Mailing Address, (if other than Subdivision Cattai (Kidae stated herein): Census Tract 15035RILLING HILLS DR; 40 GLENHOWD, MO2175 Parcel 228 Grid Tax Map_ Phone 442-589 Fax Zoning Map Coordinates Lot Size SFP Existing Use_ Contractor Company_ SELF SFD & Deck Proposed Use Contact Person Estimated Construction Cost \$ 4500/- approx Address City State Zip Code Description of Work COVER DECK WITH A License No. 12-6×16 ROOW. Phone Fax Occupant or Famet SELF Engineer or Architect Company Contact Name DR. SHAHAIS A. MALIK Contact Person Address 15035 ROCKING HILLS DR. Address Zip Code State City GLENWERD State MUZip Code 21738 City Phone 443-475- Fax Phone Fax 410-919-3833 BUILDING DESCRIPTION - RESIDENTIAL BUILDING DESCRIPTION - COMMERCIAL Building Characteristics
SF Dwelling

SF Townhouse **Utilities** Utilities **Building Characteristics** Water Supply: Water Supply: Public Private Width Depth 1st floor Public Private No. of stories: 2nd floor: Sewage Disposal: Sewage Disposal: Public Public Private Gross area, sq. ft. per floor: Private Finished Basement
Unfinished Basement
Crawl space
Slab on Grade
No. of Bedrooms Use group: Yes D No D Electric Yes □ No □ Electric Yes □ No □ Gas Construction type: Gas Yes D No D Reinforced Concrete Multi-family dwellings: Heating System: Electric □ Heating System: Structural Steel No. of efficiency units: Electric 🗆 Oil 🗆 Oil 🗆 Masonry No. of 1 BR units: _ Wood Frame Natural Gas Natural Gas No of 2 BR units: Propane Gas Propane Gas No. of 3 BR units: State Certified Modular Sprinkler system: N/A □ Sprinkler system: N/A □ Other Structure: NFPA #13D Full Dimensions: Partial NFPA #13R Footings: ____ Roof Height: Other Suppression Other: # of Heads THE UNDERSIGNED HERBY 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. State Certified Modular o Hall MOHAMMAD A. MAUL

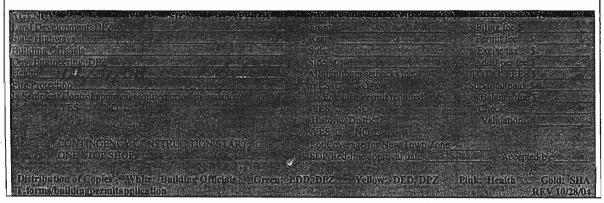
Applicant's Signature

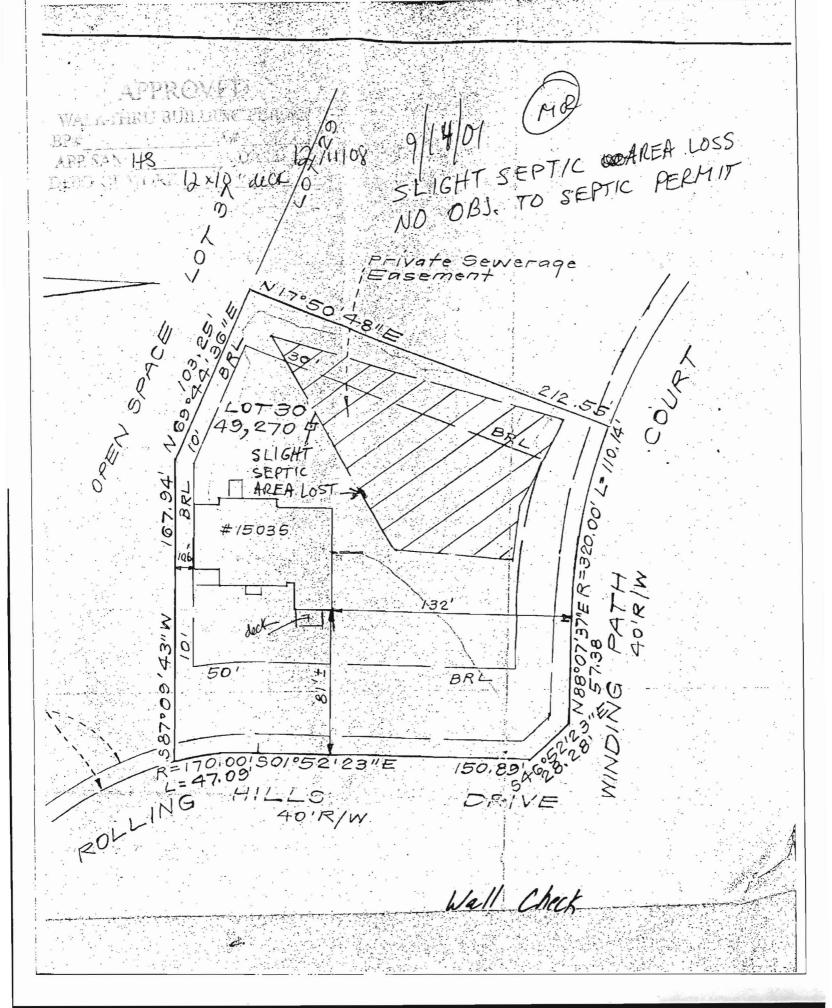
Print Name

Title/Company

12/31/08. Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY **PLEASE WRITE NEATLY AND LEGIBLY.**
- FOR OFFICE USE ONLY -





DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 1430 COURT HOUSE DRIVE ELLICOTT CITY, MO 21043 PERMITS (410) 13:3-3495 INSPECTIONS (410) 13:3-1810 AUTOMATED INFORMATION (410) 13:3-3690

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

Building Address 15035 Ro	LING HILLS DR:	Property Owner's Name SHAHA	B A. MALIK.
GLENWOOD, MD, 21738		Address October 1997	
Suite/Apt. #: SDP/WP/Petition #:		15035 ROLLINGHILLS DRIVE	
Census TractSubdivision		City GLENWOOT) State MIXip Code 21733	
SectionLot		Phone 410 - 442 - 5797 Phone Applicant's Name & Mailing Address, (if other than stated hereon):	
Tax Map Parcel Grid		SAME AS ABOVE	
Zoning Map Coordinates Lot size *		Phone 410 - 919 - 3833 Fax 410 - 582 - 9653	
Existing Use RESIDENTIAL.		Contractor Company SELF	
Proposed Use RESIDENT	SIDENTIAL.	Contact Person	
Proposed Use RESIDENTIAL Estimated Construction Cost \$ 5000 / April 2000		DR. SHAHAB A. MACK	
Description of Work Building of a Conord		Address 15035 ROLLING, HILLS DR.	
DEK		City GLENNOON State MOZip Code 2/758	
		License No	
Occupant or Tenant SELF CCCuPIGN		Engineer or Architect Company	
Contact 2 2 Straited A MALIE		Contact Person	
Name DRI SHAHABA MACIK Address 15035 RELLING HILLS DRIVE		Address	
City GLENWAD State		Address	
**		CityStateZip Code	
Phone 416 - 442 -5897 Fax 410 - 582 - 9653		Phone Fax	
BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	<u>Utilitieş</u>	Building Characteristics	<u>Utilities</u>
Height:	Water Supply: Public	SF Dwelling SF Townhouse Depth Width	Water Supply:Public
No. of stories:	Private	1st floor:	Private
	Sewage Disposal:	2nd floor:	Sewage Disposal:
Gross area, sq. ft. per floor:	Sewage Disposal: Public Private	2nd floor: Basement:	Public Private
Gross area, sq. ft. per floor:	Sewage Disposal: —— Public —— Private Electric Yes □ No □	Basement: Finished Basement Unfinished Basement	Public Private Electric Yes No D
Gross area, sq. ft. per floor: Use group:	Public Private Electric Yes No Gas Yes No	Basement: Finished Basement Unfinished Basement Crawl space Slab on Grade No. of Bedrooms Height:	Public Private Electric Yes D No D Gas Yes Q No D
Use group: Construction type:	Public Private Electric Yes No Gas Yes No Heating System:	Basement: Finished Basement Crawl space Slab on Grade No. of Bedrooms Height: Multi-family dwellings: No. of efficiency units:	Public Private Electric Yes D No D Gas Yes D No D Heating System: Electric D Oil
Use group:	Public Private Electric Yes □ No □ Gas Yes □ No □ Heating System:	Basement: Finished Basement Crawl space Slab on Grade No. of Bedrooms Height: Multi-family dwellings: No. of efficiency units: No. of 1 BR units: No. of 2 BR units:	Public Private Electric Yes D No D Gas Yes G No D Heating System:
Use group: Construction type: Reinforced Concrete Structural Steel Masonry	Public Private Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas	Basement: Finished Basement Unfinished Basement Crawl space Slab on Grade No. of Bedrooms Height: Multi-family dwellings: No. of efficiency units: No. of 1 BR units: No. of 2 BR units: No. of 3 BR units:	Public Private Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A
Use group: Construction type: Reinforced Concrete Structural Steel	Public Private Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A Gas Full	Basement: Finished Basement Crawl space Slab on Grade No. of Bedrooms Height: Multi-family dwellings: No. of efficiency units: No. of 1 BR units: No. of 2 BR units:	Public Private Electric Yes O No O Heating System: Electric O Oil O Natural Gas D Propane Gas O Sprinkler system: N/A O NFPA #13D NFPA #13R
Use group: Construction type: Reinforced Concrete Structural Steel Masonry	Public Private Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A	Basement: Finished Basement Unfinished Basement Crawl space Slab on Grade No. of Bedrooms Height: Multi-family dwellings: No. of BR Units: No. of 1 BR Units: No. of 3 BR units: No. of 3 BR units: Cother Structure: Dimensions: Foolings: Rcof Height:	Public Private Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas EPropane Gas Sprinkler system: N/A NFPA #13D
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame	Public Private Electric Yes No Gas Yes No Gas Yes No Selectric Oil Natural Gas Propane Gas Sprinkler system: N/A Full Partial Other Suppression	Basement: Finished Basement Unfinished Basement Crawl space Slab on Grade No. of Bedrooms Height: Multi-family dwellings: No. of efficiency units: No. of 2 BR units: No. of 3 BR units: Other Structure: Dimensions: Footings:	Public Private Electric Yes O No O Heating System: Electric O Oil O Natural Gas D Propane Gas O Sprinkler system: N/A O NFPA #13D NFPA #13R
Use group: Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame State Certified Modular THE UNDERSKONED HEREBY CERTIFIES AND AGREES AS FOLLOW HOWARD COUNTY WHIGH APE APPLICABLE THERETO; (4) THAT	Public Private Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A Full Partial Other Suppression of Heads	Basement: Finished Basement	Public Private Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A NFPA #13D NFPA #13D Other:
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SLIGHT SEPTIC COAREA LOSS NO OBJ. TO SEPTIC PERMIT Private Sewerage Easement SLIGHT PROPOSED ADDITION SEPTIC ER=320,00' #15035 10. × 1254 =170.00 Wall Check