



E19004146

Elect. Permit

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: 3584 School Dr.
City: Ellicott City State: MD Zip Code: 21042
Sulte/Apt. #: _____ SDP/WP/BA #: _____
Subdivision: _____
Lot: _____ Tax Map: _____ Parcel: _____

Existing Use: S.F.D.
Proposed Use: S.F.D. w/ Hot Tub
Estimated Construction Cost: \$
Description of Work: 12' x 12' concrete pad
to insulate for Hot tub installation

Occupant/Tenant Name: _____
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
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: _____	1 st floor: _____
	2 nd floor: _____
Area of construction (sq. ft.): _____	Basement: _____
	<input type="checkbox"/> Finished Basement
Use group: _____	<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

Property Owner's Name: William G. Berg
Address: 3584 School Dr.
City: Ellicott City State: MD Zip Code: 21042
Phone: 410-531-0269 Fax: _____
Email: berg.ridge@verizon.net

Applicant's Name & Mailing Address, (if other than stated herein)

Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: Home owner
Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: _____
License No.: _____
Phone: _____ Fax: _____
Email: _____

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Utilities
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply
<input 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 type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
Sprinkler System:
<input type="checkbox"/> Yes <input 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.

William G. Berg
Applicant's Signature

berg.ridge@verizon.net
Email Address

Title/Company

William G. Berg
Print Name

9-3-19
Date

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	9/3/19	<u>[Signature]</u>
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<input type="checkbox"/> 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	#

Distribution of Copies: White: Building Officials

Green: PSZA, Zoning

Yellow: PSZA, Engineering

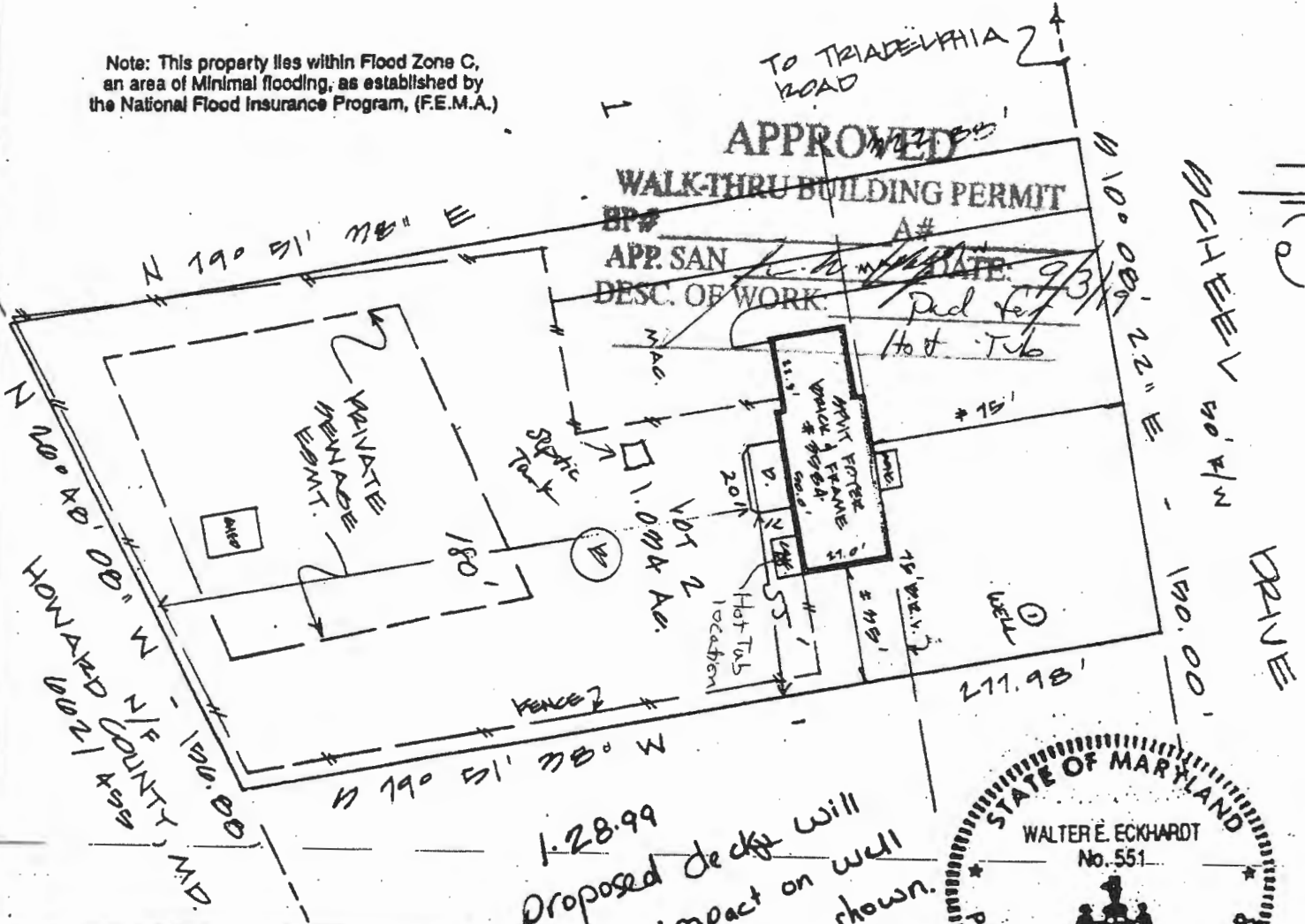
Pink: Health

Gold: SHA

NOTES:

1. This plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing.
2. This plat is not to be relied upon for the established or location of fences, garages, buildings, or other existing or future improvements.
3. This plat does not provide for accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing.
4. This plat was prepared in accordance with the plat of subdivision and/or deed as recorded in the Land Records of the county in which the property is located.
5. The title report was not furnished; The property shown hereon is subject to easements and right-of-way(s) of record.
6. The location and size of improvements shown hereon are approximate and are for informational purposes only and details of the site not shown hereon are not considered significant by this office and thus are not shown.
7. Legend: OH.- building overhang; D.- deck; S.- stoop; W.- walkway; P.- patio; AW.- aerial wire(s); P.L.- property line; BW.- bay window; CHM.- chimney; WW.- window well; SW.- stairwell; G.- gas meter; OR.- oriel.
8. Accuracy of apparent setback distance = $\pm 1'$

Note: This property lies within Flood Zone C, an area of Minimal flooding, as established by the National Flood Insurance Program, (F.E.M.A.)



HOUSE LOCATION

#0004 SCHEEL DRIVE
LOT 2, BLOCK "B"

"WAYSIDE ESTATES"

SECTION 1, AREA 1

WAT CMP No. 0040

MD District
Howard County, Maryland

1-28-99
Proposed deck will
have no impact on well
and septic as shown.
KM

C.P. No. 240044 0021 B
MAP REV.: DEC 4, 1980

CERTIFICATION:

I certify, to the best of my knowledge and belief, that the existing visible improvements shown hereon have been established by accepted land surveying practices and that unless otherwise shown there are no visible encroachments.

Walter E. Eckhardt

Walter E. Eckhardt
Property Line Surveyor, Md. Reg. No. 551



MSI METROPOLITAN SURVEYS, INC.

11262 Georgia Ave. • Suite 10:
Wheaton, MD 20902
(301) 929-8195
FAX: (301) 929-8197

Case: H96-04-025 File: 4-100-90 CK: 115 Dm: 12 Scale: 1" = 50' Date: 5.2.90