



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: 11/17/19

Permit No.: B19003902

Building Address: 3255 ACCORDIAN DR
City: ELLENHURST State: MD Zip Code: 21733
Suite/Apt. #: SDP/WP/PA #:
Subdivision:
Lot: Tax Map: Parcel:

Existing Use: SINGLE FAMILY DWELLING
Proposed Use: ADULTED LIVING
Estimated Construction Cost: \$ 200,000
Description of Work: CHANGE OF USE TO AN 8
BED ADULTED LIVING, HANDING UP TO
8 APARTMENTS

Occupant/Tenant Name: SECOND FAMILI HOME LLC
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name:
Address:
City: State: Zip Code:
Phone: Fax:
Email:

Property Owner's Name: ELLENHURST DR - MINOVICH
Address: 3255 ACCORDIAN DR
City: ELLENHURST State: MD Zip Code: 21733
Phone: 410-313-2455 Fax:
Email: ELLENHURST DR - MINOVICH

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

Contractor Company: 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:

Commercial Building Characteristics	Residential Building Characteristics
Height:	☐ SF Dwelling ☐ SF Townhouse
No. of stories:	Depth Width
Gross area, sq. ft./floor:	1 st floor:
	2 nd floor:
Area of construction (sq. ft.):	Basement:
	☐ Finished Basement
Use group:	☐ Unfinished Basement
	☐ Crawl Space
Construction type:	☐ Slab on Grade
☐ Reinforced Concrete	No. of Bedrooms:
☐ Structural Steel	Multi-family Dwelling
☐ Masonry	No. of efficiency units:
☐ Wood Frame	No. of 1 BR units:
☐ State Certified Modular	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
➤ Roadside Tree Project Permit	Footings:
☐ Yes ☒ No	Roof:
Roadside Tree Project Permit #	☐ State Certified Modular
	☐ Manufactured Home

Utilities	
Electric: ☒ Yes ☐ No	
Gas: ☒ Yes ☐ No	
Water Supply	
☐ Public	
☒ Private	
Sewage Disposal	
☐ Public	
☒ Private	
Heating System	
☒ Electric ☐ Oil	
☒ Natural Gas ☐ Propane Gas	
☐ Other:	
Sprinkler System:	
☒ Yes ☐ No	
Grading Permit Number:	
Building Shell Permit Number:	B180000699

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: ELLENHURST DR - MINOVICH

Print Name: ELLENHURST DR - MINOVICH

Email Address: ELLENHURST DR - MINOVICH

Date: 11/17/19

Title/Company

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY

-FOR OFFICE USE ONLY-

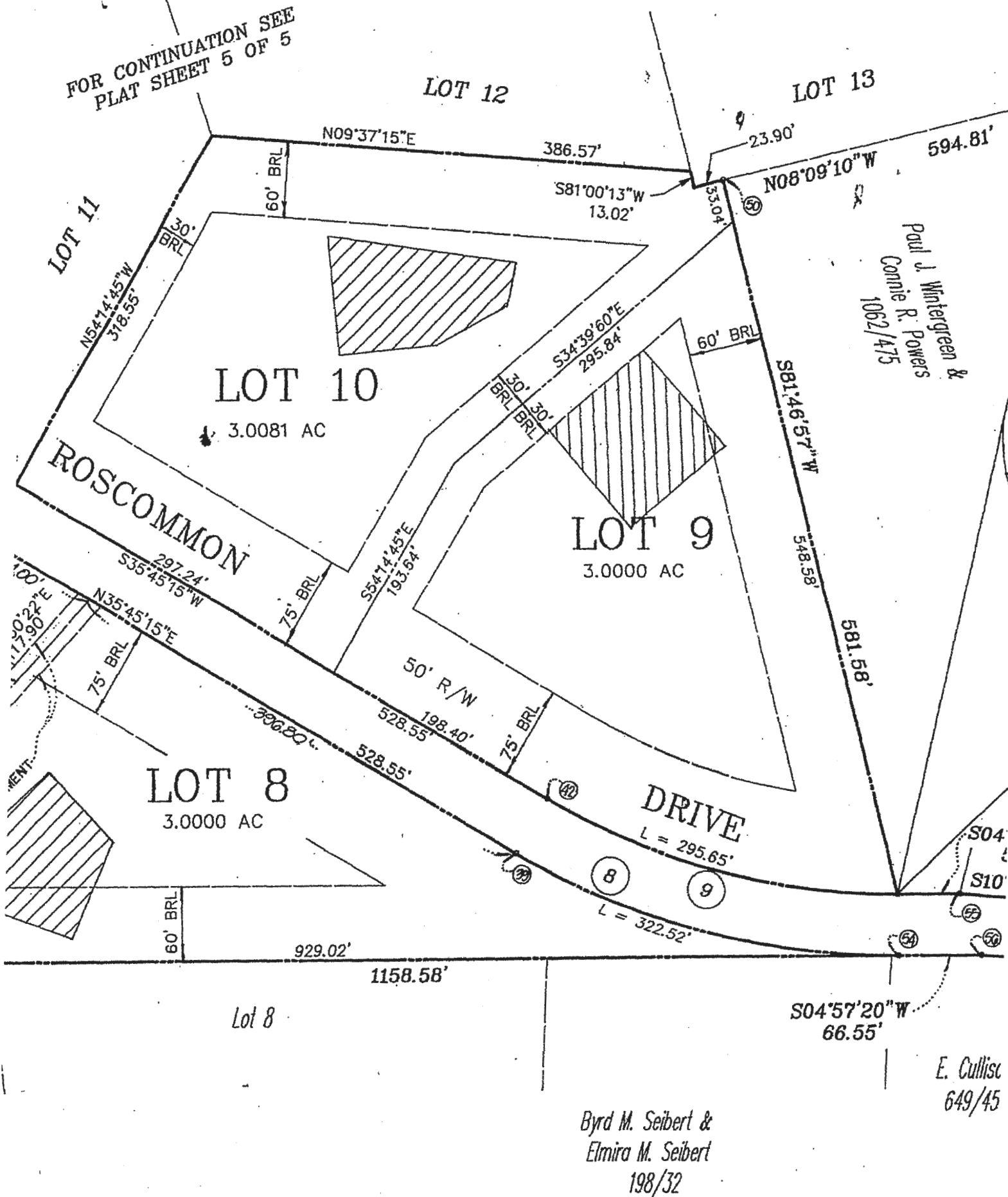
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)	11/17/19	
PSZA (Engineering)	11/17/19	
Health	11/17/19	H. Oswald
Is Sediment Control approval required for issuance? ☐ Yes ☐ No		
☐ CONTINGENCY CONSTRUCTION START		

DPZ SETBACK INFORMATION
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 Zone:
SDP/Red-line approval date:

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ 55.00
Sub- Total Paid	\$
Balance Due	\$
Check	#

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

FOR CONTINUATION SEE
PLAT SHEET 5 OF 5



Revised per comments received from Howard County 6/20/88 - 6/28/88

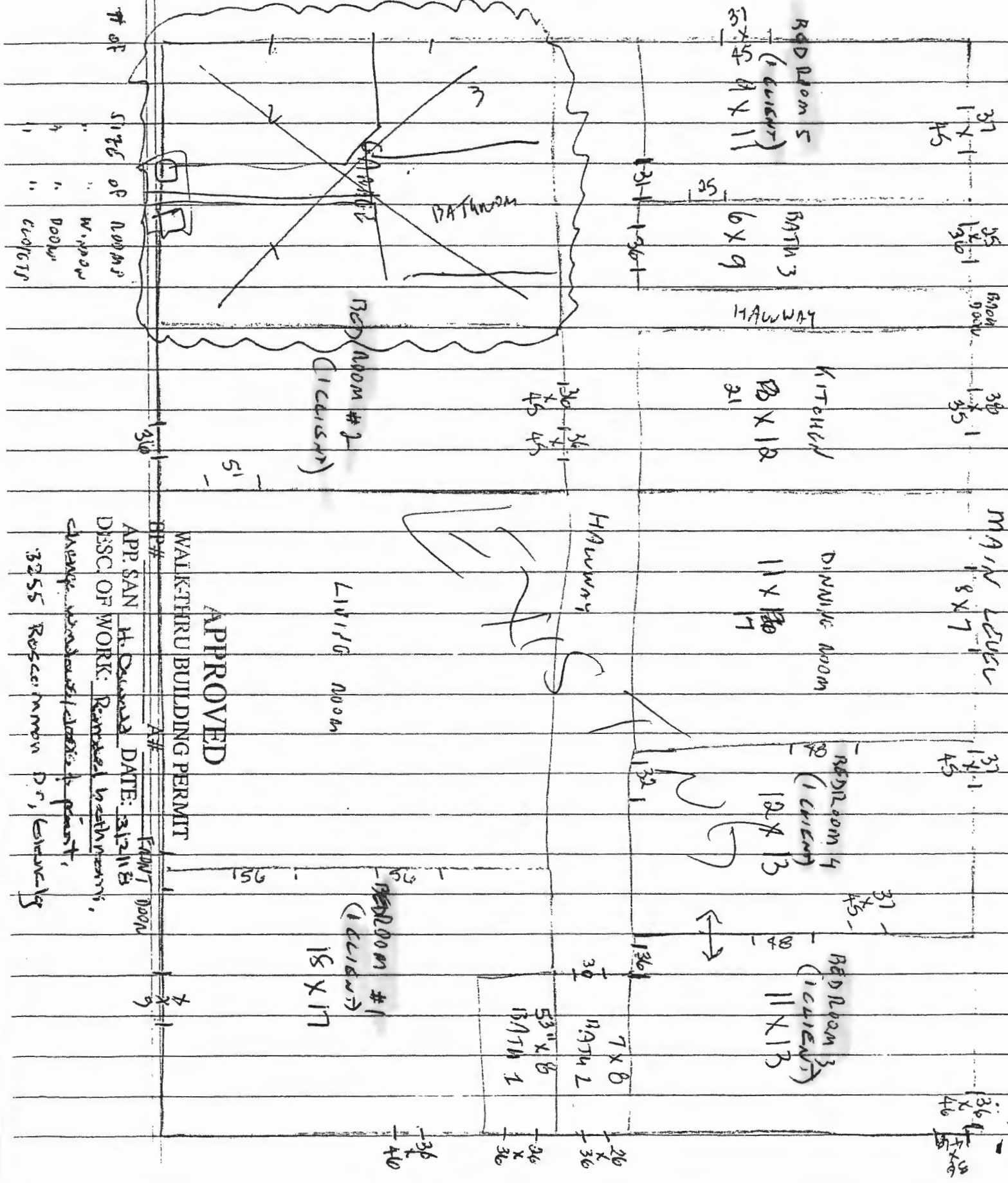
OWNER'S D

SURVEYOR'S CERTIFICATE

hereby certify that the Final Plat shown hereon is
ct; that it is a subdivision of all of the lands conveyed
R F Property Partnership to S.F. Contractors, Inc. by

We, S.F. Contractors, Inc., owners
property shown and described hereon, hereby add
consideration of the approval of this Final Plat to
establish the minimum building restriction lines of
Maryland, its successors and assigns, (1) the right
sewers, drains, water pipes and other municipal
all roads and street right-of-ways and the spec

NOT PART OF CURRENT REMODELING



APPROVED

WALK-THRU BUILDING PERMIT

AP# _____

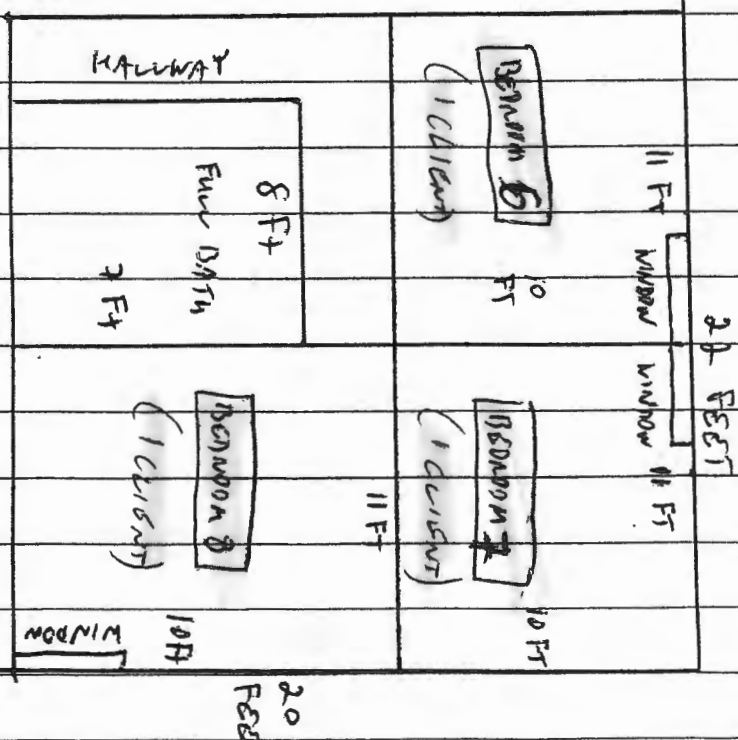
APP. SAN. H. O. DATE: 3/2/13

DESC. OF WORK: Remodel kitchen, change windows/doors to front,

3255 Rescanned by, (signature)

GLN EUC $N(1)$ 21787 $\Rightarrow$

CURRENT
DEMIT
000649



W

STAIRS AREA

BASEMENT

WASH
OUT

APPROVED

WALKTHRU BUILDING PERMIT

BP#

A#

APP. SAN M. OSWALD DATE: 3/2/83

DESC OF WORK: Remodel bath room's,

change windows, doors & paint

3235 Rosemead Dr, Glendale

HVAC

|||||

10' x
x
11' x

BEDROOM

31' x 19'

STORAGE
AREA

WATER
TANK

SEWER
PUMP