



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: 2720 Hobbs RD
 City: Glenwood State: MD Zip Code: 21738
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Subdivision: Glenwood Springs
 Lot: 46 Tax Map: 14 Parcel: _____

Existing Use: Single Family
 Proposed Use: SAME
 Estimated Construction Cost: \$ 12,000.00
 Description of Work: Construct 18'x24' Pavillion

Occupant/Tenant Name: OWNER
 Was tenant space previously occupied? ☐ Yes ☐ No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Mark & Sherri Ashby
 Address: 2720 Hobbs RD
 City: Glenwood State: MD Zip Code: 21738
 Phone: 301 674 7009 Fax: _____
 Email: _____

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: MorningStar Arch Design
 Responsible Design Prof.: Jon Seils
 Address: 4991 Morningstar Dr.
 City: Dayton State: MD Zip Code: 21036
 Phone: _____ Fax: _____
 Email: _____

| Commercial Building Characteristics | Residential Building Characteristics | |
|--|--|-------|
| Height: | <input 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 type="checkbox"/> No | Roof: | |
| Roadside Tree Project Permit # | <input type="checkbox"/> State Certified Modular | |
| | <input type="checkbox"/> Manufactured Home | |

| Utilities | |
|---|---|
| Electric: | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Gas: | <input type="checkbox"/> Yes <input checked="" 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 checked="" 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 checked="" 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.

Sherri L. Ashby
Applicant's Signature

Sherri L. ASHBY
Print Name

Email Address

7-17-19
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 | <u>7/18/2019</u> | <u>[Signature]</u> |

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 | \$ |
| Sub-Total Paid | \$ |
| Balance Due | \$ |
| Check | # |

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

Yellow: PSZA,Engineering

Pink: Health

Gold: SHA



Pavilion
2720 Hobbs Road
Glenwood, MD 21738
Howard County
Site Plan

Professional Certification, I
hereby certify that these
documents were prepared or
approved by me, and that I am
a duly Licensed Professional
Architect under the Laws of the
State of Maryland, License No.
#1665R, Expiration Date:
June 9, 2020



stare

revisions:

| date: | no. | description: |
|-------|-----|--------------|
|-------|-----|--------------|

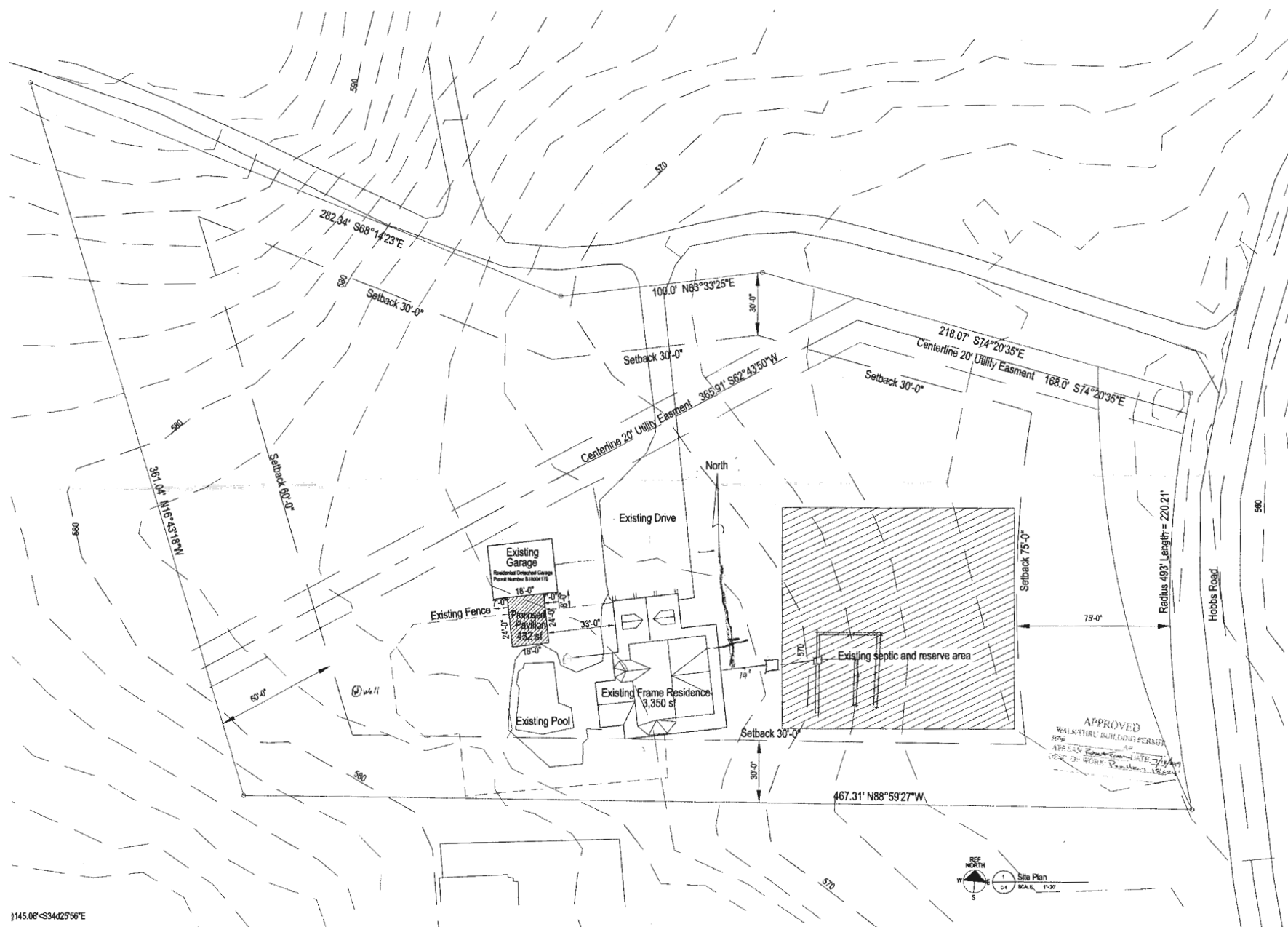
date: 7/17/19

06-09

project no. HC-2019_25.1

drawing no.

C-1



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City: GLENWOOD State: MD Zip Code: 21738
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: 1 Area: 2 Lot: 46
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: 3 ACRES

Existing Use: _____
Proposed Use: Garage
Estimated Construction Cost: \$ 65,000
Description of Work: 26x32 ON SLAB

Occupant/Tenant Name: OWNER
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

| Commercial Building Characteristics | Residential Building Characteristics |
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Property Owner's Name: MARK ASHBY
Address: 2720 HOBBS RD
City: GLENWOOD State: MD Zip Code: 21738
Phone: 301-674-7009 Fax: _____
Email: MARK9274@GMAIL.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.: _____
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: | |
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|----------------------|----------|-----------------------|
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| Building Officials | | |
| PSZA (Zoning) | | |
| PSZA (Engineering) | | |
| Health | 11/15/18 | [Signature] |

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☐ CONTINGENCY CONSTRUCTION START

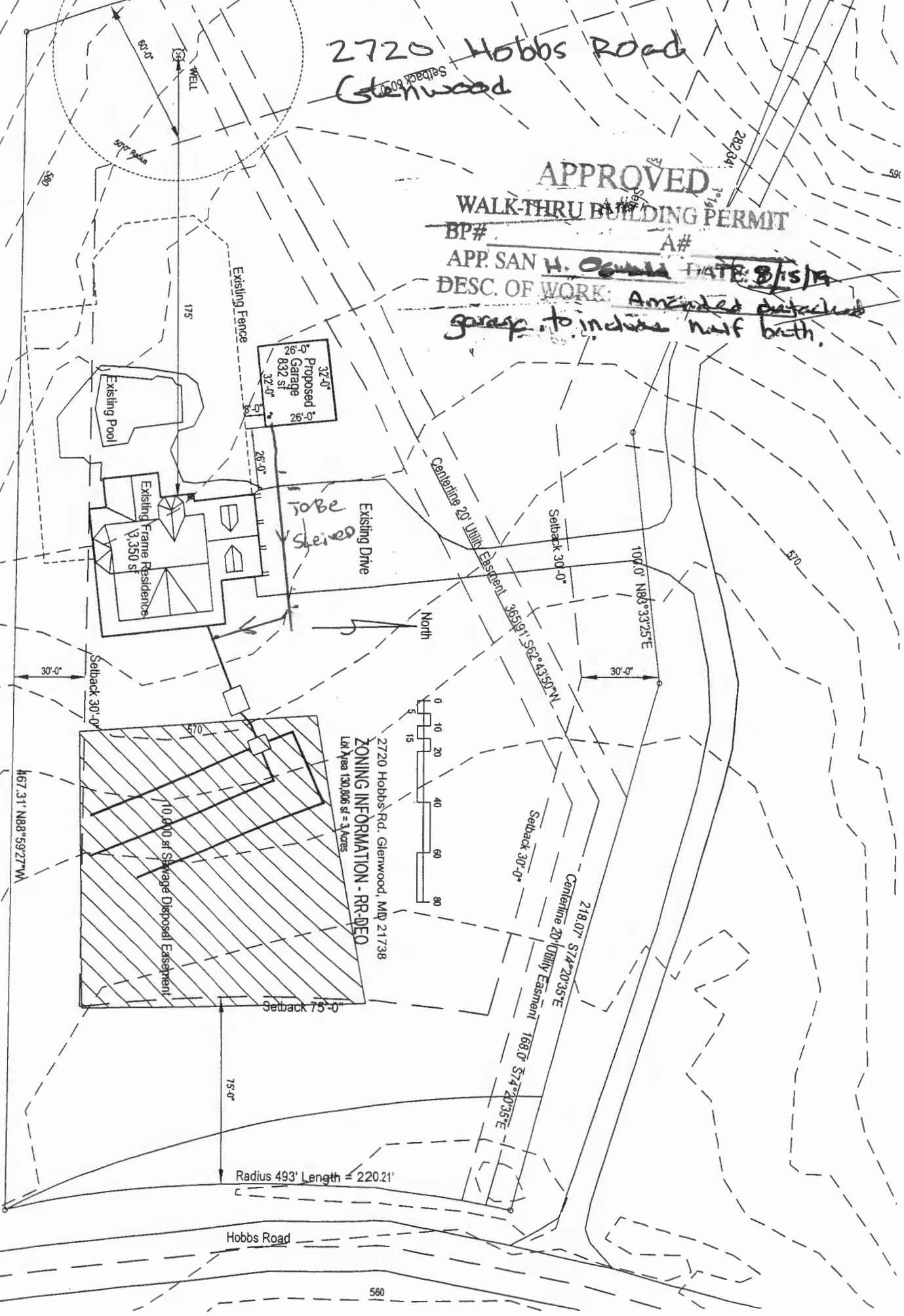
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| Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Lot Coverage for New Town Zone: |
| SDP/Red-line approval date: |

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

2720 Hobbs Road
Glenwood

APPROVED
WALK-THRU BUILDING PERMIT

BP# _____ A# _____
APP. SAN H. ~~Oswald~~ DATE 8/15/19
DESC. OF WORK: Amended detached
garage to include half bath.



2720 Hobbs Road
Glenwood

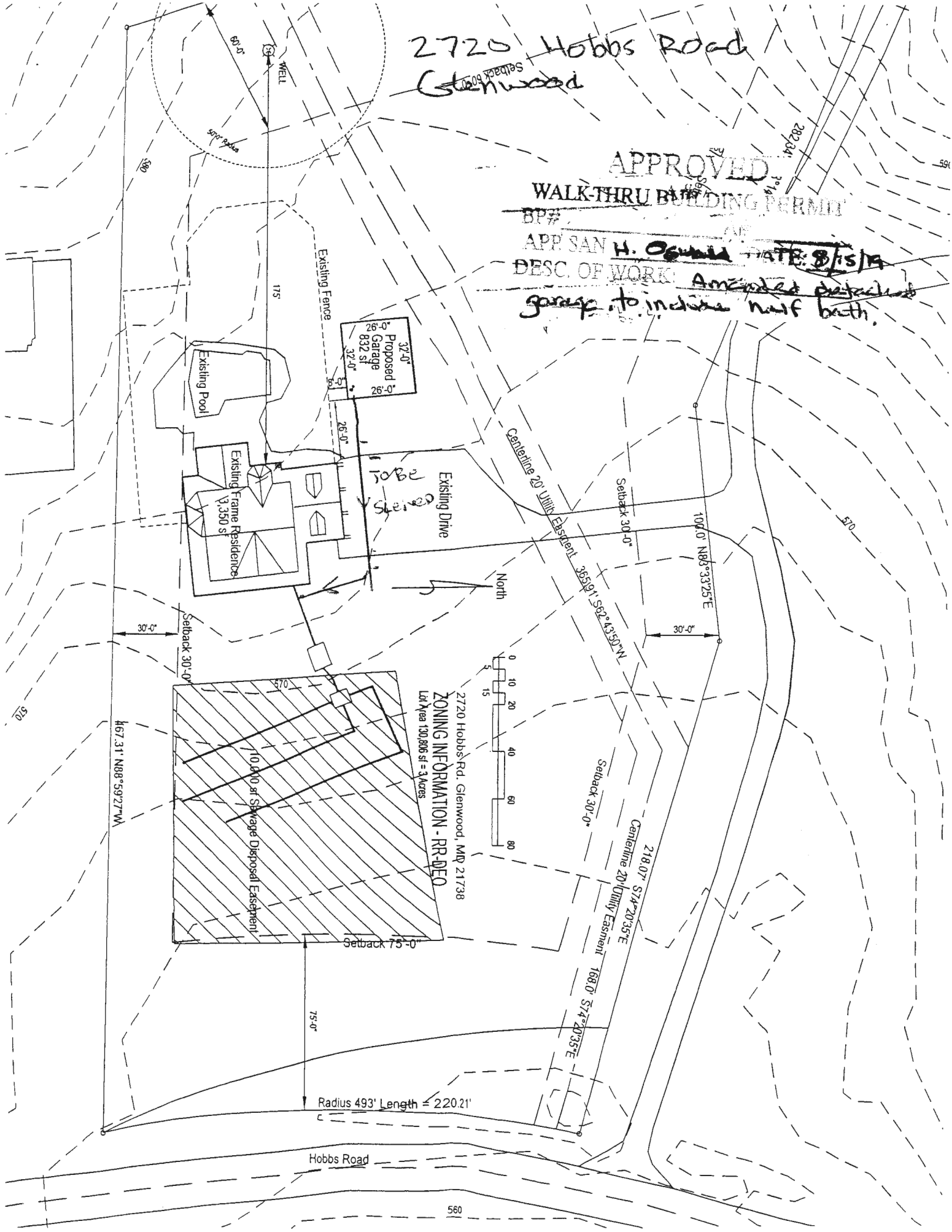
APPROVED

WALK-THRU BUILDING PERMIT

BP#

APP SAN H. Ogunla DATE: 8/15/19

DESC. OF WORK: Amended detached garage to include half bath.



2720 Hobbs Rd. Glenwood, MD 21738
ZONING INFORMATION - RR-DEO
Lot Area 130,806 sq ft = 3.4 Acres

Hobbs Road

DESC. OF WORK:

no planting



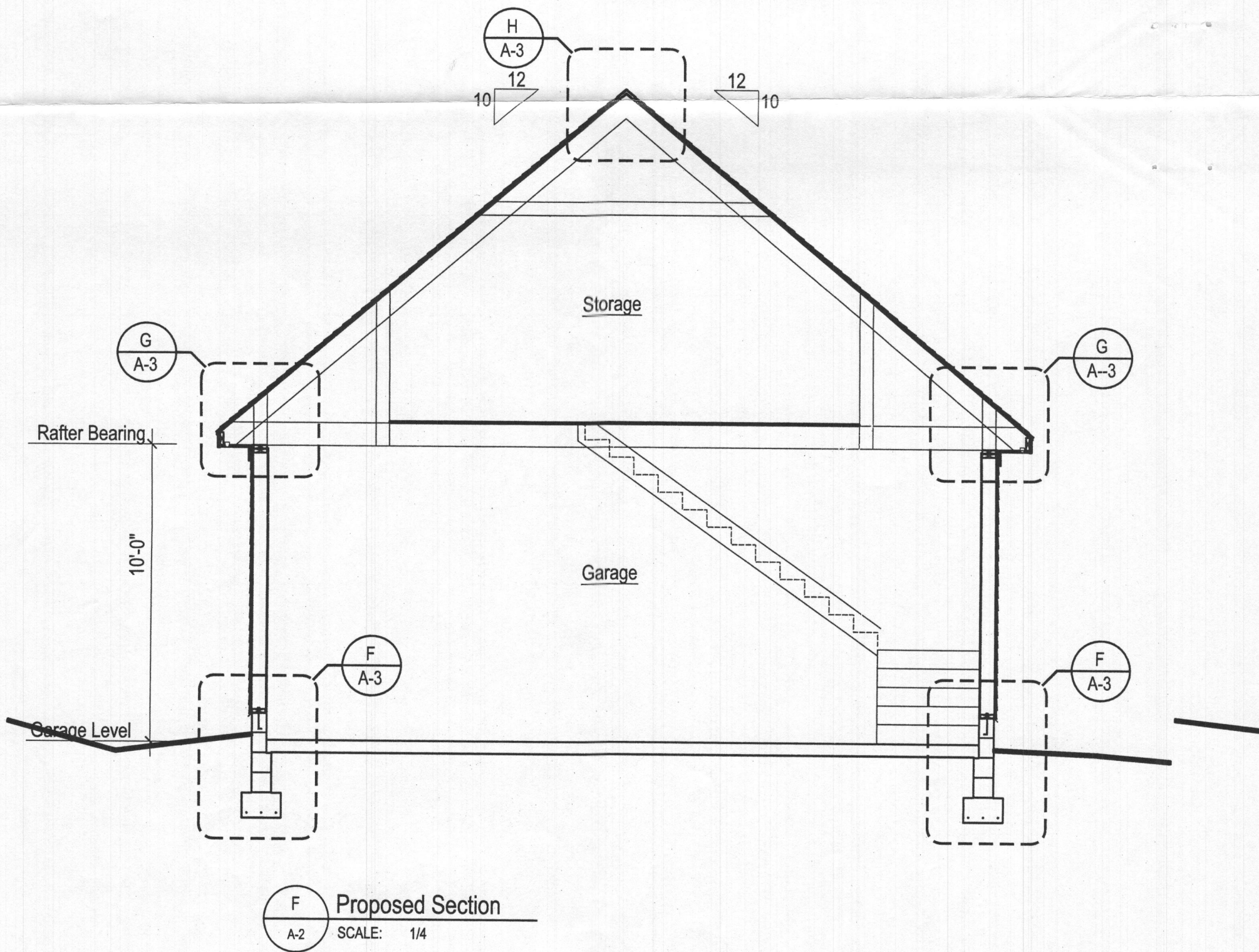
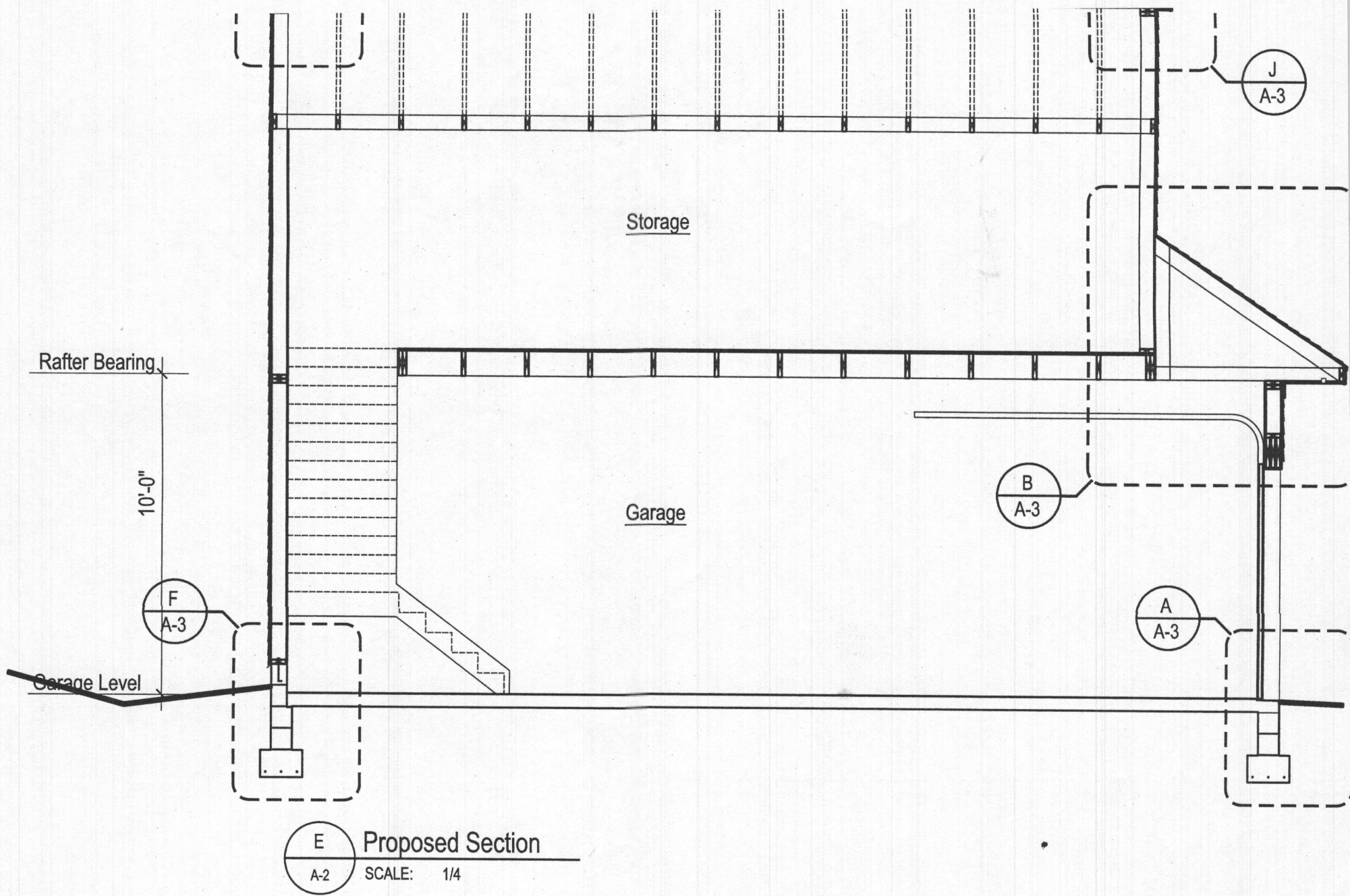


TABLE R802.11
Required strength of truss or rafter

shall be minimum
n grade shall be
ic one full mesh at ends
ts at column centerlines
r round shape isolation
ade is poured.
p mesh 6" in each
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