



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.: B18004044

Building Address: 12229 Mayland Farm Way
City: Ellicott City State: MD Zip Code: 21042
Suite/Apt. # _____ SDP/WP/BA #: GP-15-68A
Census Tract: _____ Subdivision: Walnut Creek
Section: _____ Area: _____ Lot: 160
Tax Map: 28 Parcel: 49 Grid: 17 + 18
Zoning: PR-DEO Map Coordinates: _____ Lot Size: 45,729 sq ft

Existing Use: Vacant lot
Proposed Use: S.F.D.
Estimated Construction Cost: \$ 398,400
Description of Work: 2 story, unfinished basement, 3 car garage, 1 FP, 9 rooms, 4BR, 4 1/2 BA, approx. 39 x 12' rear covered porch.
Occupant or Tenant: _____
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 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 checked="" 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: <u>4</u>
<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:
<input checked="" type="checkbox"/> 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: Mohammad + Ayesha Naseem
Address: 10548 German Rd.
City: Laurel State: MD Zip Code: 20723
Phone: 301-490-5317 Fax: _____
Email: Sarah@cairncustomhomes.com

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Sarah Jahug
Address: 10548 German Rd.
City: Laurel State: MD Zip Code: 20723
Phone: 301-490-5317 Fax: _____
Email: Sarah@cairncustomhomes.com

Contractor Company: Cairn Custom Homes
Contact Person: Sarah Jahug
Address: 10548 German Rd.
City: Laurel State: MD Zip Code: 20723
License No.: 7518
Phone: 301-490-5317 Fax: _____
Email: Sarah@cairncustomhomes.com

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

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>618000299</u>	
Building Shell Permit Number:	

RECEIVED
DEC 03 2018
LICENSES & PERMITS DIVISION

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.

Sarah Jahug
Applicant's Signature
Sarah@cairncustomhomes.com
Email Address
Project Coordinator
Title/Company

Sarah Jahug
Print Name
12/3/18
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	2/7/20	[Signature]

Is Sediment Control approval required for issuance? ☐ Yes ☐ No
☐ 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	\$ 100.50
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	#

1/7/2014
4 Finished Bedrooms

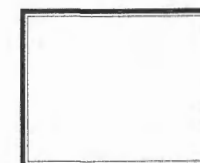
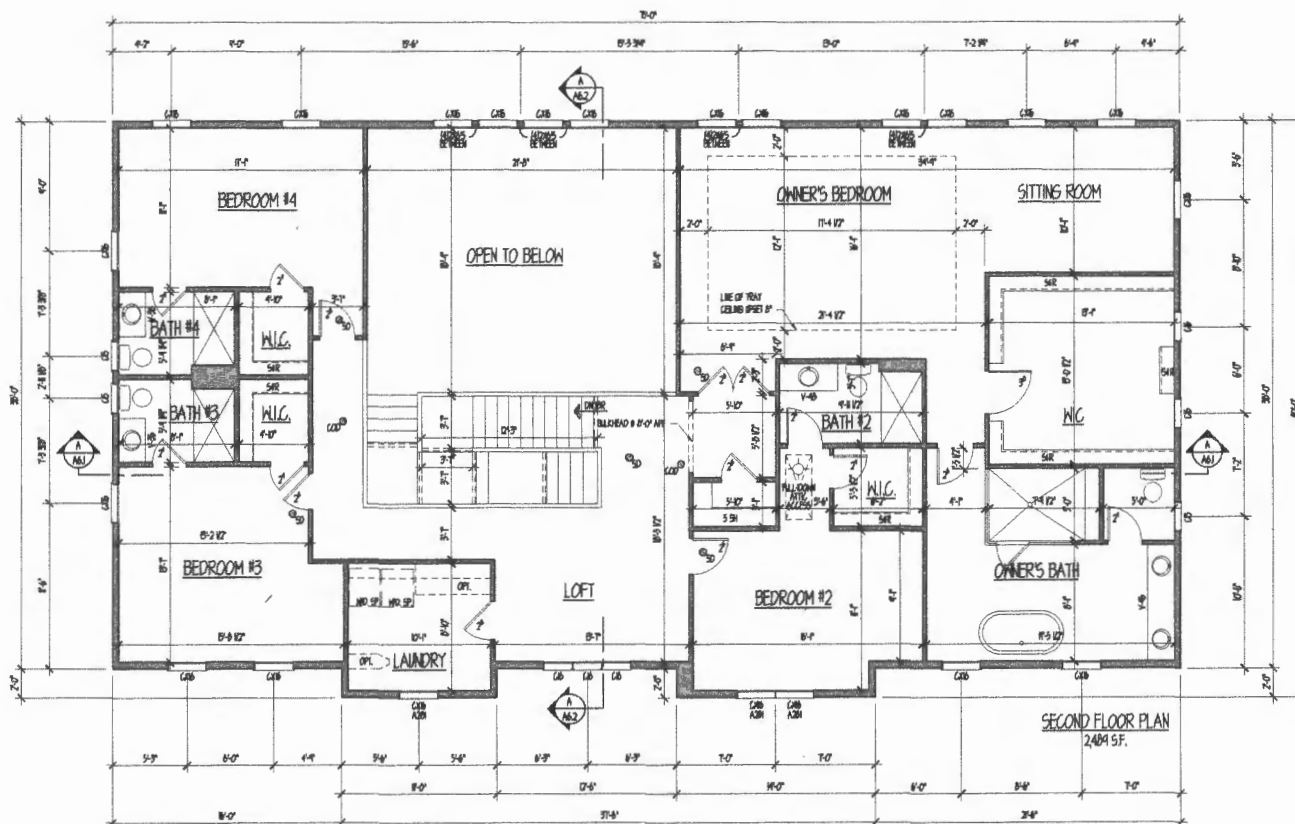


HEALTH

[illegible]



<p>PROFESSIONAL CERTIFICATION: I CERTIFY THAT THESE DRAWINGS HAVE BEEN PREPARED BY OR UNDER THE CLOSE PERSONAL SUPERVISION AND IN WHOLE OR IN PART BY ME, AND THAT I AM A QUALIFIED ARCHITECT OR ENGINEER OR IN THE STATE OF ILLINOIS, LICENSED AS SUCH ON FEBRUARY 28, 2008. I FURTHER CERTIFY THAT I AM NOT PROVIDING ARCHITECTURAL SERVICES TO ANY OTHER CLIENTS FOR THIS PROJECT.</p>							
<h2 style="margin: 0;">dw taylor</h2> <p style="margin: 0;">ASSOCIATES, INC.</p> <p style="margin: 0;">ARCHITECT</p> <p style="margin: 0; font-size: small;">3031 LEXINGTON AVE. SUITE 200 ELLICOTT CITY, MD 21117 410.584.1234 FAX 410.584.1235 www.dwtaylor.com</p>							
<h1 style="margin: 0;">BID & PERMIT ONLY</h1>							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left; padding: 2px;">REVISIONS</th> </tr> <tr> <th style="width: 60%; padding: 2px;">DATE</th> <th style="width: 40%; padding: 2px;">REVISION</th> </tr> <tr> <td style="height: 40px;"></td> <td></td> </tr> </table>		REVISIONS		DATE	REVISION		
REVISIONS							
DATE	REVISION						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> DRAWN BY: ATB </td> <td style="width: 50%; padding: 2px;"> CHECKED BY: </td> </tr> <tr> <td style="padding: 2px;"> SCALE: 1/4" = 1'-0" </td> <td style="padding: 2px;"> DATE: 1/28/10 </td> </tr> </table>		DRAWN BY: ATB	CHECKED BY:	SCALE: 1/4" = 1'-0"	DATE: 1/28/10		
DRAWN BY: ATB	CHECKED BY:						
SCALE: 1/4" = 1'-0"	DATE: 1/28/10						
<p style="margin: 0; font-weight: bold; font-size: 1.2em;">PROJECT TITLE</p> <p style="margin: 10px 0 0 40px; font-size: 1.5em; text-align: center;">CAIRN CUSTOM HOMES NASEEM RESIDENCE</p>							
<p style="margin: 0; font-weight: bold; font-size: 1.2em;">CONTENT</p> <p style="margin: 10px 0 0 40px; font-size: 1.5em; text-align: center;">FIRST FLOOR PLAN</p>							
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">PROJECT NUMBER</td> <td style="padding: 2px;">DRAWING NUMBER</td> </tr> <tr> <td style="height: 40px; text-align: center; vertical-align: bottom; font-size: 1.5em;">2625</td> <td style="height: 40px; text-align: center; vertical-align: bottom; font-size: 1.5em;">A3.1</td> </tr> </table>	PROJECT NUMBER	DRAWING NUMBER	2625	A3.1			
PROJECT NUMBER	DRAWING NUMBER						
2625	A3.1						



dw taylor
associates inc
ARCHITECT

BID & PERMIT ONLY

REVISIONS	
REV.	DESCRIPTION
Drawn by AHJ	
Checked by 	
Date 06-1-10	Date 06-01-10
PROJECT TITLE	
CARIN CUSTOM HOMES NASEEM RESIDENCE	
CONTENT	
SECOND FLOOR PLAN	
PROJECT NUMBER	DRAWING NUMBER
2625	A4.I

Approved B18004044
R1F 2/7/2019

