



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: 15208 Torino Way
City: Woodbine State: MD Zip Code: 21797
Suite/Apt. # _____ SDP/WP/BA #: _____
Subdivision: _____
Lot: 29 Tax Map: _____ Parcel: _____
Existing Use: Single family dwelling
Proposed Use: Deck
Estimated Construction Cost: \$ 10,000
Description of Work: Building a deck attached to back of house
36 feet by 13 feet w/ steps
Occupant/Tenant Name: Melissa Hersh
Was tenant space previously occupied? ☐ Yes ☒ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: Melissa Hersh
Address: 15208 Torino Way
City: Woodbine State: MD Zip Code: 21797
Phone: 410-302-4048 Fax: _____
Email: sharklady18@gmail.com
Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: Melissa Hersh
Address: 5934 Cogswell Way
City: Ellicott City State: MD Zip Code: 21043
Phone: 410-302-4048 Fax: _____
Email: _____
Contractor Company: owner/parent or contractor
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:	<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

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 <u>well</u>	
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.

Applicant's Signature

Email Address

Print Name

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>4/18/19</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? <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	\$ <u>50</u>
Tech Fee	\$ <u>3</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ <u>53.00</u>
Sub- Total Paid	\$
Balance Due	\$
Check	#

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

N89°20'37"W 176.59'

61.81'

123.12'
503°59'12"E 104.64'

10' B.R.L.

10' B.R.L.

10' B.R.L.

10' B.R.L.

10' B.R.L.

10' B.R.L.

REPLACEMENT SYSTEM
2ND REPLACEMENT SYSTEM
1ST REPLACEMENT SYSTEM

INITIAL SYSTEM
SEPTIC SYSTEM

Lot 29
51,500 Sq. Ft.±

SEPTIC B.R.L.

DRYWELL #1
(M-5)
11.6'x6'x5'

DRYWELL #2
(M-5)
11.2'x6'x5'

SEPTIC B.R.L.

216

DECK
4" R.L.

MARYMOUNT
ELEV. K (REV)
HOUSE FACES SOUTH
FF=608.52
B=598.50

605.1

605.7

606.31

606.31

606.2x

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