



# 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: 9 FEB 20

Permit No.: B2000040

Building Address: 14853 Merivether Dr  
 City: GLENELG State: MD Zip Code: 21737  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Subdivision: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_

Existing Use: SF11  
 Proposed Use: FINISHED BASEMENT  
 Estimated Construction Cost: \$ 3000

Description of Work:  
FINISH BASEMENT WITH  
MEDIA ROOM OPEN BATH WET PAK  
GREEN ROOM 1623

Occupant/Tenant Name: ANIL REEDY  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: ANIL REEDY  
 Address: 14853 MERIVETHER DR  
 City: GLENELG State: MD Zip Code: 21737  
 Phone: 860 858 6228 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:	1st floor:
	2nd 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:
<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: ANIL REEDY  
 Address: 14853 MERIVETHER DR  
 City: GLENELG State: MD Zip Code: 21737  
 Phone: 860 858 6228 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: STUBBS CONTRACTORS  
 Contact Person: GARY SWEETEN  
 Address: 2845 KENT STATION RD  
 City: TOWSON State: MD Zip Code: 21797  
 License No.: 43726  
 Phone: 410 741 5111 Fax: \_\_\_\_\_  
 Email: msg@stubs.com

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 type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input 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: <u>00</u>	
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: [Signature] Print Name: GARY N. TUCKER  
 Email Address: msg@stubs.com Date: 9 FEB 20  
 Title/Company: President \* Mail \*

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

\*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
 -FOR OFFICE USE ONLY-

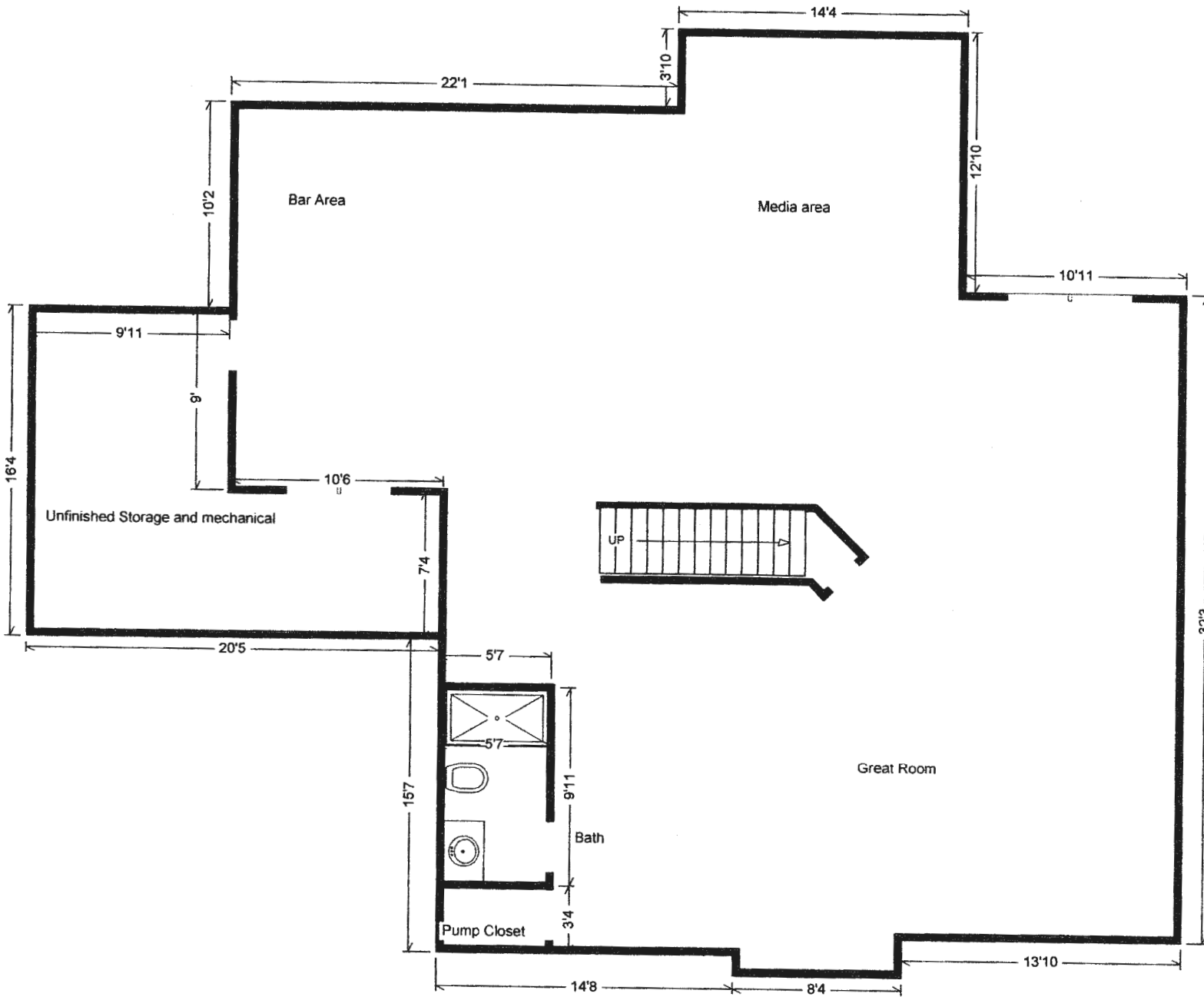
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>2/27/2020</u>	<u>[Signature]</u>

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	\$	<u>135</u>
Permit Fee	\$	
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	
Guaranty Fund	\$	
Add'l per Fee	\$	
Total Fees	\$	
Sub- Total Paid	\$	
Balance Due	\$	
Check	#	<u>1262</u>

Approved B2000404  
2/27/2020 RAE



LIVING AREA  
1943 sq ft

Menu Save Reset Cancel Help

Approved R/E  
2/27/2020

Record Detail \* (This section is required.)

<b>Permit Type</b> Building/Residential/Alteration/SFD	<b>Permit Number</b> B20000404	<b>Opened Date</b> 02/04/2020
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**Description of Work**

SFD/FINISH BASEMENT FOR MEDIA ROOM, GREAT ROOM, 1FB, WET BAR - 1623 SQ. FT.

[check spelling](#)

Address \* (This section is required.)

Search Reset Clear Get Parcel & Owner

<b>Street #</b> 14853	<b>Street Name</b> MERIWETHER	<b>Street Type</b> DR
<b>Unit Type</b> --Select--	<b>Unit #</b>	<b>X Coordinate</b> -77.02881
		<b>Y Coordinate</b> 39.25912
<b>City</b> GLENELG	<b>State</b> MD	<b>Zip Code</b> 21737
		<b>Primary</b> Yes

Parcel \* (This section is required.)

Search Reset Clear Get Address & Owner

<b>GIS ID *</b> 1056885	<b>Parcel</b> 28	<b>Parcel Area</b> 41022	<b>Land Value</b> 216500	<b>Improved Value</b> 772800	<b>Exemption Value</b> 556300	<b>Plan Area</b> RURAL
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**Legal Description**

IMPSLOT 16, .941 A.[ ]14853 MERIWETHER DR[ ]MERIWETHER FARM, SEC 2,

[check spelling](#)

<b>Block</b>	<b>Lot</b> 16	<b>Census Tract</b> 605601	<b>Council Dist</b> 5	<b>Inspection Dist</b>	<b>Supervisor Dist</b>	<b>Map #</b>	<b>DAP Zone</b>
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<b>Plan Area</b>	<b>State Tax Id</b> 1404593657	<b>Subdivision Name</b> Meriwether Farm
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<b>Section</b>	<b>Area</b>	<b>Tax Map</b> 21
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<b>Grid</b> 21-16	<b>Zoning District</b> RC-DEO	<b>ADC Map</b> 4812-F9
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<b>SDP No.</b>	<b>Final Plan No.</b> F-08-198	<b>WP File No.</b>	<b>Primary</b> Yes
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<b>Record Plat No.</b> 21762-2177	<b>WS Contract No.</b>	<b>FDP No.</b>
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<b>Owner Occupied</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Year Built</b> 2013	<b>Historic District</b> <input checked="" type="radio"/> Yes <input type="radio"/> No
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<b>Historic District Registry No.</b>	<b>Stat Area</b> 4-09	<b>Flood Plain</b> <input type="radio"/> Yes <input checked="" type="radio"/> No
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<b>City</b>	<b>State</b>	<b>Zip Code</b>
TANEYTOWN	MD	21787-0000
<b>Phone</b>	<b>Cell</b>	<b>Fax</b>
4107463710		0000000000
<b>E-mail *</b>		
MEGACON1@HOTMAIL.COM		

Contact (This section is not required.)

Search As Owner As Lic. Prof As Contact

<b>Type</b>	<b>First Name</b>	<b>MI</b>	<b>Last Name</b>
Contact	GARY		SWEITZER
<b>Relationship</b>	<b>Full Name</b>		
Licensed Professiona	GARY SWEITZER		
<b>Primary</b>	<b>Organization Name</b>		
Yes	GARY SWEITZER INC		
<b>Street Address</b>			
2845 KUMP STATION ROAD			
<b>Address Line 2</b>			
<b>City</b>	<b>State</b>	<b>Zip Code</b>	
TANEYTOWN	MD	21787-0000	
<b>Phone</b>	<b>Cell</b>	<b>Fax</b>	
4107463710		0000000000	
<b>E-mail</b>			
MEGACON1@HOTMAIL.COM			

Addtl Info

<b>Est Construction Cost *</b>	<b>Housing Units *</b>	<b>Number of Buildings *</b>	<b>Public Owned</b>
3500	0	0	No
<b>Construction Type</b>			
434 - Additions, Alterations and Conversions - Residential			

RESIDENTIAL ALTERATION INFO

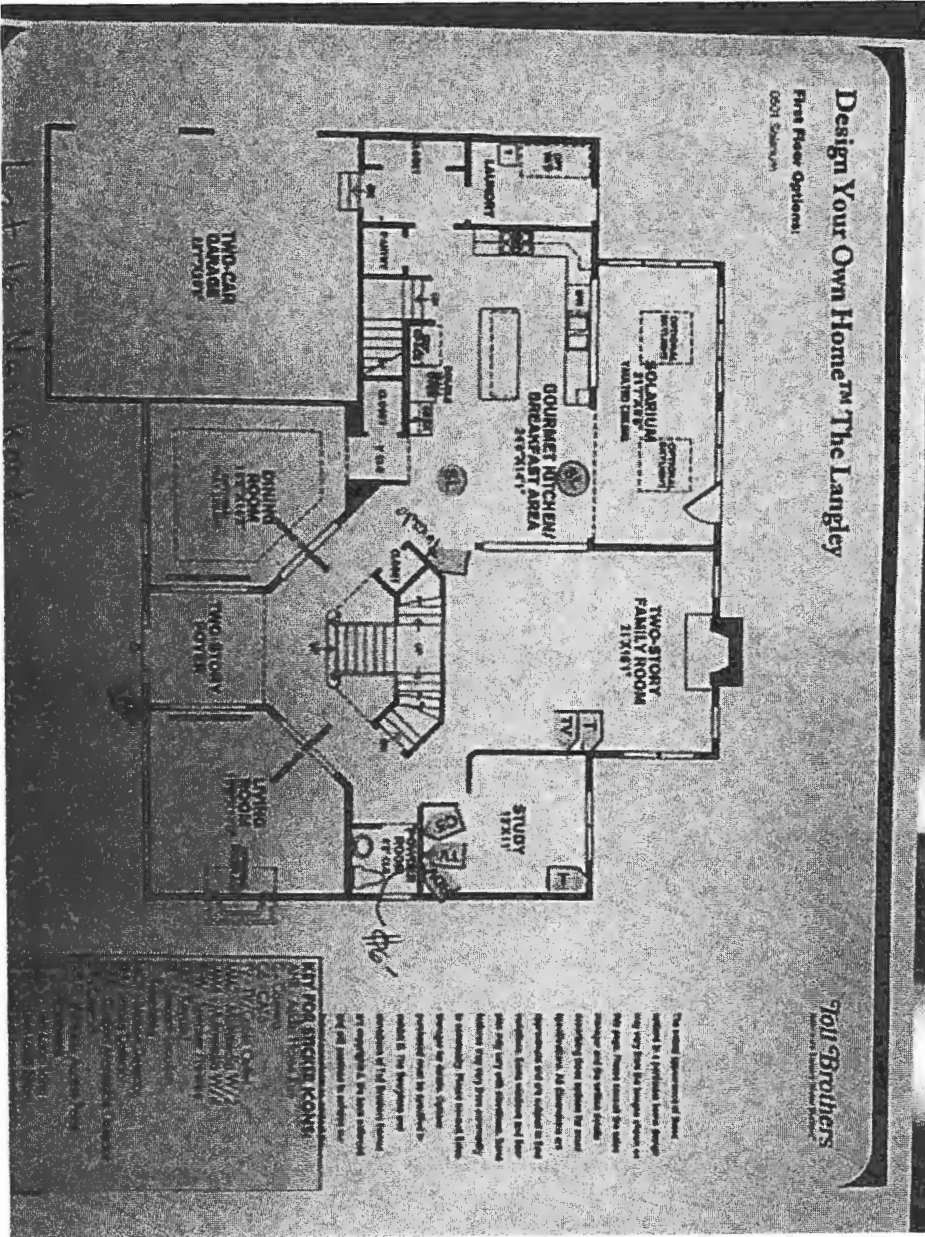
RESIDENTIAL ALTERATION INFORMATION

<b>Total Square Footage *</b>	<b>Bedrooms</b>	<b>Full Baths</b>	<b>Half Baths</b>	<b>Water *</b>	<b>Sewage *</b>	<b>Existing Utilities *</b>
1623 SQFT	0	1	0	Private	Private	Gas & Electric
<b>Existing Heating System *</b>	<b>Existing Sprinkler System *</b>	<b>Type of New Fireplace</b>	<b>Expiration Date</b>	<b>Fee Exempt *</b>		
Natural Gas	NFPA #13D	--Select--	8/3/2020	<input type="radio"/> Yes <input checked="" type="radio"/> No		

PAYMENT INFORMATION

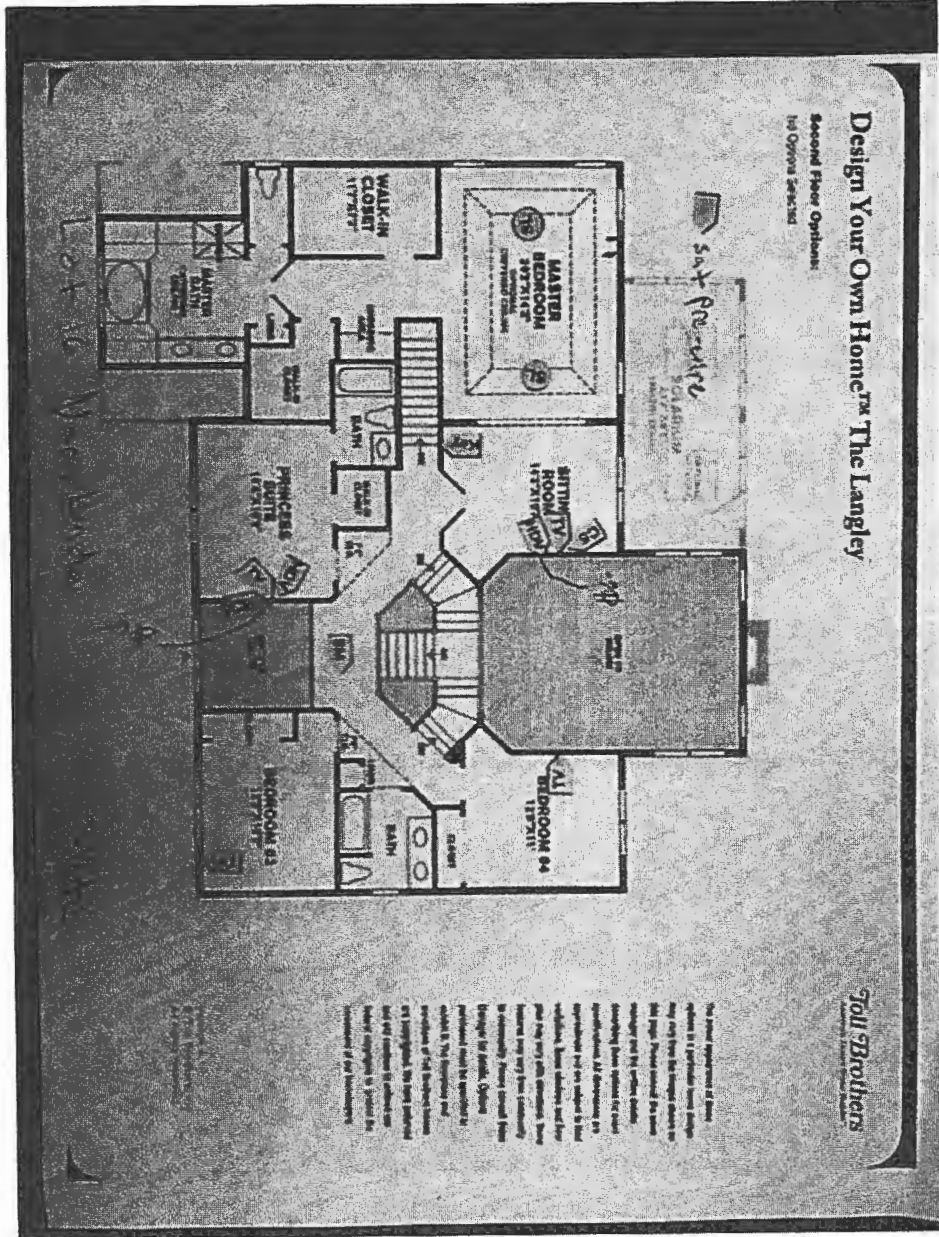
<b>Check 1</b>	<b>Payee 1</b>	<b>Check 2</b>	<b>Payee 2</b>	<b>SAP Doc No</b>	<b>SAP Entered</b>

Submit Cancel



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 2/27/2020 R/W

Existing



Approved B200000404  
 R/R 2/27/2020

Existing