

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

070001953

Building Address 13318 Royden Ct
ELLSWORTH CITY MD 21042

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot size _____

Existing Use Single Family Dwelling

Proposed Use Deck

Estimated Construction Cost \$ 5,000

Description of Work 16 x 48 ft Deck

with steps

Occupant or Tenant N/A

Contact Name N/A

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Property Owner's Name Abayomi Fakunle

Address 13318 Royden Ct

City ELLSWORTH CITY State MD Zip Code 21042

Home Phone 410 531 2558 Work Phone 410 288 3442

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone _____ Fax _____

Contractor Company OWNER

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. _____ Phone _____ Fax _____

Engineer or Architect Company N/A

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Height: _____

No. of stories: _____

Gross area, sq. ft. per floor: _____

Use group: _____

Construction type:

☐ Reinforced Concrete
☐ Structural Steel
☐ Masonry
☐ Wood Frame

☐ State Certified Modular

Utilities

Water Supply:

☐ Public
☐ Private

Sewage Disposal:

☐ Public
☐ Private

Electric Yes ☐ No ☐

Gas Yes ☐ No ☐

Heating System:

Electric ☐ Oil ☐

Natural Gas ☐

Propane Gas ☐

Sprinkler system: N/A ☐

☐ Full

☐ Partial

☐ Other Suppression

of Heads _____

Building Characteristics

SF Dwelling ☒ SF Townhouse ☐

Depth _____ Width _____

1st floor: _____

2nd floor: _____

Basement:

Finished Basement ☐ Unfinished Basement ☐

Crawl space ☐ Slab on Grade ☐

No. of Bedrooms _____

Height: _____

Multi-family dwellings:

No. of efficiency units: _____

No. of 1 BR units: _____

No. of 2 BR units: _____

No. of 3 BR units: _____

Other Structure: _____

Dimensions: _____

Footings: _____

Roof Height: _____

☐ State Certified Modular

☐ Manufactured Home

Utilities

Water Supply:

☐ Public
☒ Private

Sewage Disposal:

☐ Public
☒ Private

Electric Yes ☐ No ☐

Gas Yes ☐ No ☐

Heating System:

Electric ☐ Oil ☐

Natural Gas ☐

Propane Gas ☐

Sprinkler system: N/A ☐

☐ NFPA #13D

☐ NFPA #13R

☐ Other: _____

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.

OWNER
Applicant's Signature
Title/Company

ABAYOMI FAKUNLE
Print Name
Date 5-17-07

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
** PLEASE WRITE NEATLY AND LEGIBLY **

FOR OFFICE USE ONLY -

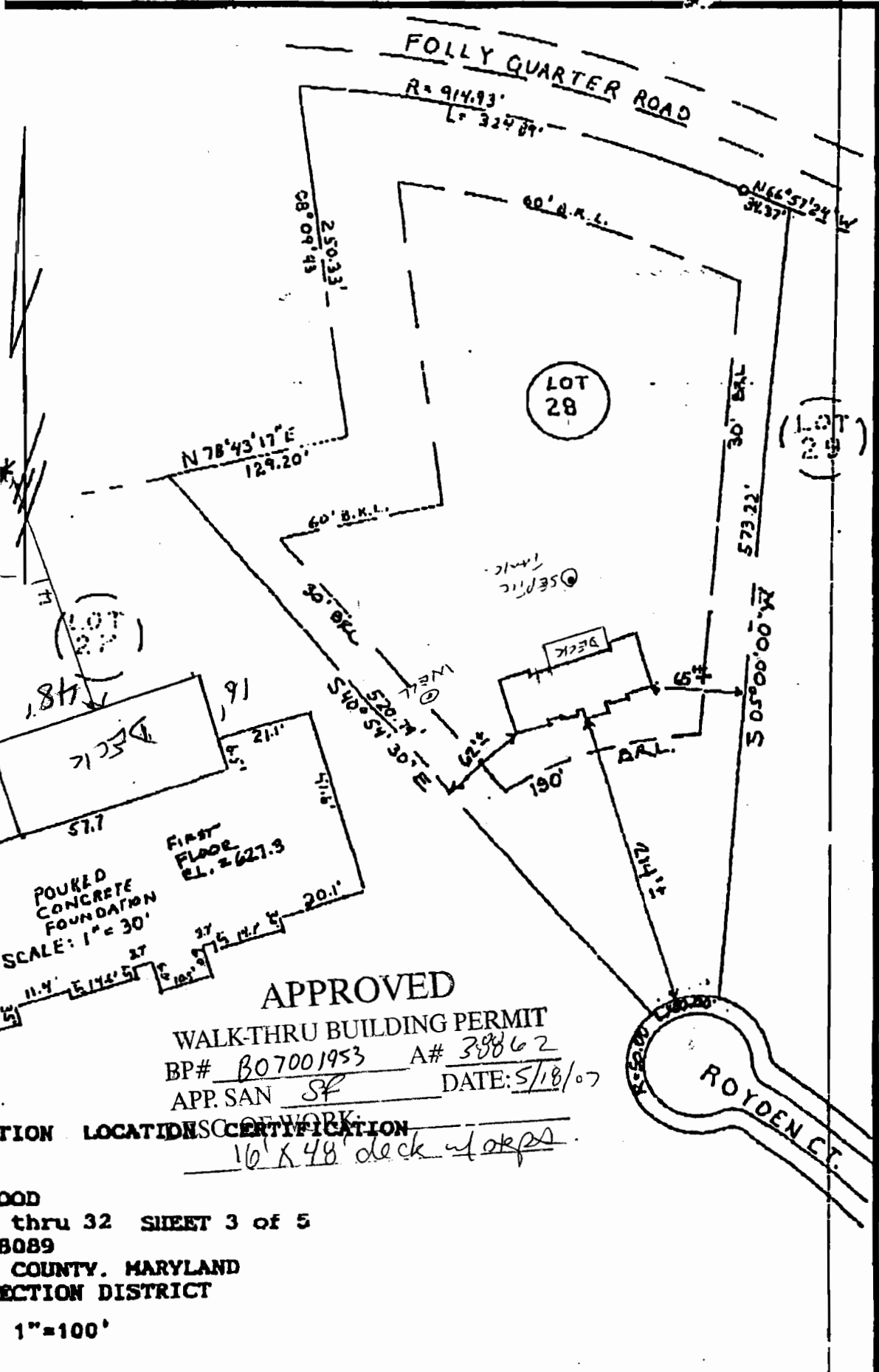
AGENCY DATE SIGNATURE APPROVAL
Land Development DPZ
State Highway
Building Official
Dev. Engineering DPZ
Health 5/18/07
Fire Protection
Is Sediment Control approval required prior to issuance?
YES ☐ NO ☐
CONTINGENCY CONSTRUCTION START: ☐
ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION
Front: _____ Filing fee \$ _____
Rear: _____ Permit fee \$ _____
Side: _____ Excise tax \$ _____
Side St: _____ Add'l per. fee \$ _____
All minimum setbacks met? YES ☐ NO ☐ TOTAL FEES \$ _____
Is Entrance Permit required? YES ☐ NO ☐ Sub-total paid \$ _____
Historic District? YES ☐ NO ☐ Balance due \$ _____
Lot Coverage for New Town Zone Check \$ _____
SDP/Red-line approval date Validation \$ _____
Accepted by _____

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

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Rev. 11/4/04



Supp. c.
56.2'

DOD
thru 32 SHEET 3 of 5
8089
COUNTY. MARYLAND
ECTION DISTRICT
1"=100'