DEPT. OF INSPECTIONS, LICENS 3430 COURT HOUSE D	ES AND PERMITS				
ELLICOTT CTTY, MD	ELLICOTT CTTY, MD 21M3		COUNTY	BOB C	01293
INSPECTIONS (410) 313-1819			•		
AUTOMATED INFORMATION	(41A) 111 2000	PERMITAP	PLICATION	PERM	AIT NUMBER
Building Address 4525 Ruth of or of warproperty Owner's Name Nayesh Dash Dayton, and 21036 Address 4525 Ruth of or of Way City Dayton State MOZin Code 2400					
- Dayter)	21071	Address 45	15 Kith	(yourd way
Suite/Apt. #:SDP/WP/Petition #:			City Dayten State MD Zip Code 2/436 Phone 4/453/744 Phone 301347245 Applicant's Name & Mailing Address, (if other than		
Census TractSubdivision			Applicant's Name & Mailing Address, (if other than stated herein):		
Section Area Lot 5			Sam as about		
Tax Map _ 28 _ Parcel _ 15 _ Grid					
Zoning Map Coordinates Lot Size 6 & A			Phone	Fax	
Existing Use SFD			Contractor Company S'c		
Proposed Use Estimated Construction Cost \$ 2000 - 00			Contact Person		
Estimated Construction Cost \$ 2000 - 60			Address		
Description of Work Decu			City State Zip Code License No.		
27x14 Deck			Phone Fax		
Occupant or Tenant Same of above			Engineer or Architect Company		
Contact Name			Contact Person		
Address			Address		
CityStateZip Code			City	State	Zip Code
Phone	Fax		Phone	Fax	}
BUILDING DESCRIPTION - COMMERCIAL			BUILDING DESCRIPTION - RESIDENTIAL		
Building Characteristics Height:	Water Supply:	Utilities .	SF Swelling SF T	acteristics	<u>Utilities</u>
Height.	Public		Depth Widtl	h	Water Supply: Public
No. of stories: 2	Private		1st floor:	_	Private
_	Sewage Dispos	sal:	2 nd floor:		Sewage Disposal:
Gross area, sq. ft. per floor:	Public Private		Basement:		Public Private
Use group:			Finished Basement □ Uni		TY THE
Construction type:		s 🗆 No 🗆 s 🗆 No 🗆	Crawl space Sla No. of Bedrooms		Electric Yesqy No⊡ Gas Yesqy No⊡
Reinforced Concrete Structural Steel	Uastin- C.		Multi-family dwelling	es:	·
Masorry	Heating System Electric □	n: Oil□	No. of efficiency units	s;	Heating System: Electric (M) Oil D
Wood Frame	Natural Gas		No. of I BR units:		Natural Gas
	Propane Gas	1	No. of 2 BR units: No. of 3 BR units:		Propane Gas
State Certified Modular	Sminkles	m: N/A =	No. 01 3 BR units:		1 ' '
	Sprinkler syste	m: N/A D	Other Structure:		Sprinkler system: N/A pr NFPA #13D
	Partial		Dimensions:		NFPA #13R
	Other Su		Footings: Roof Height:		Other:
	# of Hea	ds	Koor Height.		
			State Certified M Manufactured H	ome	
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HEISHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HEISHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HEISHE 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.					
	MADO		NIC	2 Das	
Applicant's Signature			Print Name		
,, ,				1 1 1	
_ OWNER			41	30/08	
Title/Company Date					
Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY **PLEASE WRITE NEATLY AND LEGIBLY.** - FOR OFFICE USE ONLY -					
AGENCY DA	TE SIGNAT	ERF APPROVAL	DPZ SKTBACK EN	FORMATION	PROPERTY HIS
Land Development, DFZ State Higgspares			Front: Read		Felting for \$ Persont fee \$
Building Officials			Side.		Excise tex 5
Dev Engineering DPF			Side St		Add't per fee \$
Henlin 🔄 😁	20-01 U	April 27.	PAI manimum saffack	e auto	TOTAL PEES 1
Fire Protection In Sediment Control approval of	entitized action 4/	жоможе?	YES to NG of is Entrance Permit in	saured)	Sub-total paid 3 Habase due \$
YES O NO D	,		YES G NO G		Clerk / Ball
			Historic District?		Validation #
CONTRACTOR OF THE OWNER, THE OWNE	SOMETHING OF	G CTABY	TES C NO C		
CONTINUENCY C ONE STOP SHOP:		MALARIA G	Lot Germanya for New SEIP/Red-lone approve		Accepted by
Distribution of Copies - Wi	ute. Budding ()	Meials Green: LE	in. npz. – Vellow: I	OKD, DPZ Pu	sk: Health Cotd: SHA

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