DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVIE
LILLCOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810

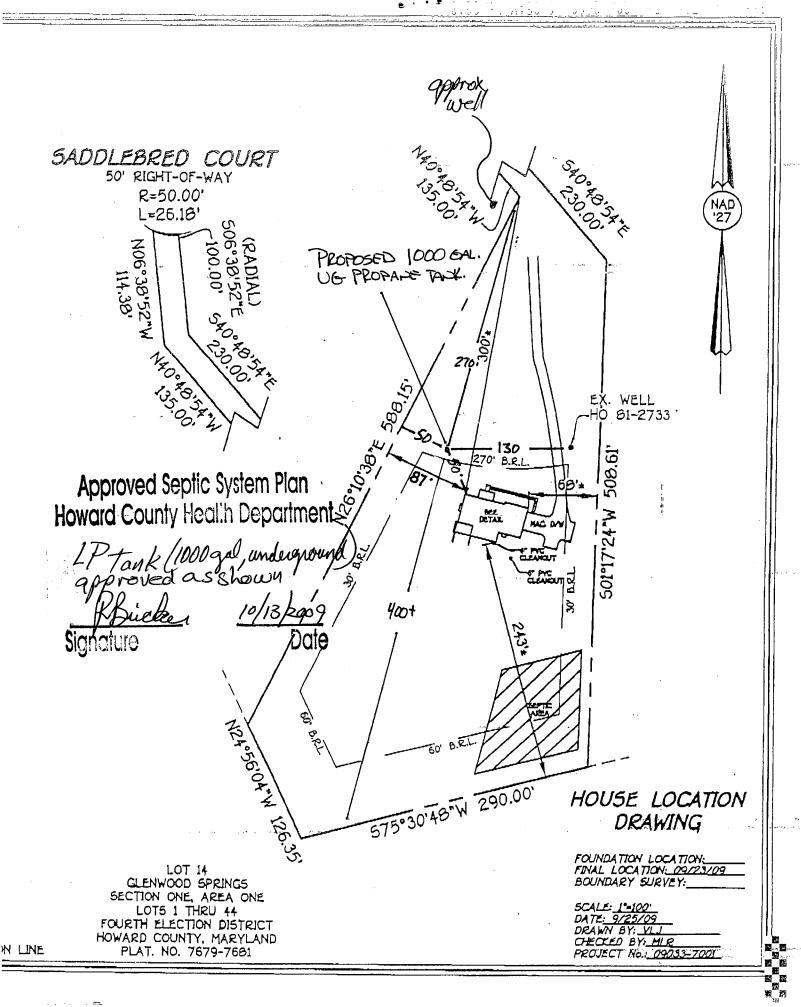
HOWARD COUNTY

PERMIT NUMBER

Boloo 2602

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Building Address 2822	BRE ict	Property Owner's Name	5444	a to a fillipoid .
The same of the sa	Address			
Suite/Apt. #: SDP/WP/Pe	etition #:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Census Tract Subdivision		City / City State State Zip Code		
Section Area LotL		Home Phone & Mailing Address, (if other than stated hereon):		
Tax Map Parcel	Grid **/	Applicant's Name & Mailin	ng Address, (If oth	ner than stated hereon):
Zoning Map Coordinates Lot size		Phone Fax		
Existing Use		Contractor Company		
Proposed Use		Contact Person		
	Description of Work			
There is an a Think The		Address		
	·	City License-No.	State /	Zip Code
		Phone	Fax	
Occupant or Tenant		Engineer or Architect Company		
Contact Name		Contact Person		
Address	Address			
City State Zip Code		Address		
Phone Fax		City State Zip Code		
Phone Fax		Phone Fax		
BUILDING DESCRIPTION	N - <u>COMMERCIAL</u>	BUILD	ING DESCRIPT	ION - <u>RESIDENTIAL</u>
Building Characteristics	<u>Utilities</u>	Building Charact	eristics	<u>Utilities</u>
Height:	Water Supply: Public	SF Dwelling SF Tow		Water Supply:Public
No. of stories:	Private	1st floor:	TTIGUT	Private
	Sewage Disposal: Public	2nd floor:		Sewage Disposal:Public
Gross area, sq. ft. per floor:	Private	Basement:		Private
	Electric Yes □ No □	Finished Basement Unfini Crawl space Slab on G	shed Basement□ Frade □	Electric Yes 🗆 No 🗅
Use group:	Gas Yes No	No. of Bedrooms		Gas Yes I No I
	Hantima Stateman	Multi-family dwellings:		Heating System:
Construction type:	Heating System: Electric □ Oil □	No. of efficiency units: No. of 1 BR units:		Electric Oil
Reinforced Concrete	Natural Gas □	No. of 2 BR units: No. of 3 BR units:		Natural Gas Data and Gas
Structural Steel Masonry	Propane Gas			Propane Gas □
Wood Frame	Sprinkler system: N/A	Other Structure: Dimensions:	· · · · · · · · · · · · · · · · · · ·	Sprinkler system: N/A
	Full	Footings:		NFPA #13D NFPA #13R
State Certified Modular	Partial	Roof Height:	_	Other:
	Other Suppression # of Heads	State Certified Modu Manufactured Home		
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: HOWARD COUNTY WHICH, ARE APPLICABLE THERETO; (4) THAT HE/	(1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPL	ICATION; (2)THAT THE INFORMATION IS COR		L WILL COMPLY WITH ALL REGULATIONS OF
HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/ THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF	INSPECTING THE WORK PERMITTED AND POSTING N	OTICES.	CRIBED IN THIS APPLICATI	ON; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS
Applicant's Signature		Sar Aluix	SUNAK	
Toyot Track Free	The second secon	Print Name		
Title/Company (Checks payable to: DIRECTOR OF ** PLEASE WRITE NE	ATLY AND LEGIBLY, **	UNTY	
	FOR OFFIC SIGNATURE APPROVAL	EUSE ONLY: Deziseneackin	FORMATION	PROPERTY IDE
Part Developmen appra		703)(ee)
Building (Fineign)	Control of the Contro	Side:	errors and the second of the second	ik fee §
Day: Engineering DPZ		Skie St. 12 mag 1994 (1994)	The second secon	per fee & \$
Health 16/13/2009	III Dates and the contract of	All minimum setbecks met?	The Appeared	ALFEES \$ - ALFE
Fire Protection Sectionaris Control approvel required prior, to le	to the same of the			
IN CHARGE CORNEL EDDING/AL PROLETER OFFICE IN IN	, the state of the state of	YES 🗆 NO 🗇	Sub-	total paid 3.\$
	, the state of the state of	is Entrance Permit	required? Bala	ice due (\$
YES E NO E	Marco?)		Sub- required? Bake Chec Valid	co due \$ 100 mm m

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Approved first first first Howard Country in sent

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