

HEALTH DEPT COPY: 6/11/07

Scanned 05/07/07

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLSWORTH CITY, MD 21043 PERMITS (410) 313-2155 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B07001606
Building Address: 12013 Sand Hill Manor Drive		Property Owner's Name: Russell & Mary Cipolla	
Suite/Apt. #: _____ SDP/WP/Petition #: _____		Address: 12013 Sand Hill Manor Drive	
Census Tract _____ Subdivision _____		City: MARIOTTESVILLE State MD Zip Code: 21104	
Section _____ Area _____ Lot _____		Home Phone: 410-696-2487 Work Phone: _____	
Tax Map _____ Parcel _____ Grid _____		Applicant's Name & Mailing Address, (if other than stated hereon): Owner	
Zoning _____ Map Coordinates _____ Lot size _____		Phone: 410-696-2487 Fax: 410-696-2489	
Existing Use: Masonry with SFD		Contractor Company: All American Home Improvement	
Proposed Use: SFD w/ New Entrance		Contact Person: Bill Christian	
Estimated Construction Cost \$: 4,500		Address: _____	
Description of Work: New Entrance, Platform & Steps & Rail		City: _____ State MD Zip Code: _____	
Occupant or Tenant: Occupant		License No: MHC # 71486	
Contact Name: _____		Phone: 410-969-7487 Fax: _____	
Address: _____		Engineer or Architect Company: _____	
City: _____ State _____ Zip Code: _____		Contact Person: _____	
Phone: _____ Fax: _____		Address: _____	
		City: _____ State _____ Zip Code: _____	
		Phone: _____ Fax: _____	

BUILDING DESCRIPTION - COMMERCIALBUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics		Utilities	
Height:	Water Supply: _____	SF Dwelling ☐ SF Townhouse ☐	Water Supply: _____
No. of stories:	Public ☐ Private ☐	Depth _____ Width _____	Public ☒ Private ☐
Gross area, sq. ft. per floor:	Sewage Disposal: _____	1st floor: _____	Sewage Disposal: _____
Use group:	Public ☐ Private ☐	2nd floor: _____	Public ☐ Private ☒
Construction type:	Electric Yes ☐ No ☐	Basement: _____	Electric Yes ☐ No ☐
Reinforced Concrete ☐	Gas Yes ☐ No ☐	Finished Basement ☐ Unfinished Basement ☐	Gas Yes ☐ No ☐
Structural Steel ☐	Heating System: _____	Crawl space ☐ Slab on Grade ☐	Heating System: _____
Masonry ☐	Electric ☐ Oil ☐	No. of Bedrooms: _____	Electric ☐ Oil ☐
Wood Frame ☐	Natural Gas ☐	Height: _____	Natural Gas ☐
State Certified Modular ☐	Propane Gas ☐	Multi-family dwellings: _____	Propane Gas ☐
	Sprinkler system: N/A ☐	No. of efficiency units: _____	Heating System: _____
	Full ☐	No. of 1 BR units: _____	Electric ☐ Oil ☐
	Partial ☐	No. of 2 BR units: _____	Natural Gas ☐
	Other Suppression ☐	No. of 3 BR units: _____	Propane Gas ☐
	# of Heads _____	Other Structure: _____	Sprinkler system: N/A ☐
		Dimensions: _____	NFPA #13D ☐
		Footings: _____	NFPA #13R ☐
		Roof Height: _____	Other: _____
		State Certified Modular ☐	
		Manufactured Home ☐	

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

Print Name

Title/Company

Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

** PLEASE WRITE NEATLY AND LEGIBLY. **

- FOR OFFICE USE ONLY -

AGENCY DATE SIGNATURE APPROVAL

DPZ SETBACK INFORMATION

PROPERTY ID#

Land Development, DPZ
State Highways
Building Official 6/13/07
Dev. Engineering, DPZ
Health 6/14/07
Fire Protection
Is Sediment Control approval required prior to issuance?
YES ☐ NO ☐

Front: _____ Filing fee \$ 25.00
Rear: _____ Permit fee \$ 25.00
Side: _____ Excise tax \$
Side St.: _____ Add'l per. fee \$ 2.50
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 # 2179
SDP/Red-line approval date _____ Validation #
Accepted by _____

Distribution of Copies
T:\forms\PERMIT.FRM

White: Building Official

Green: LDD, DPZ

Yellow: DED, DPZ

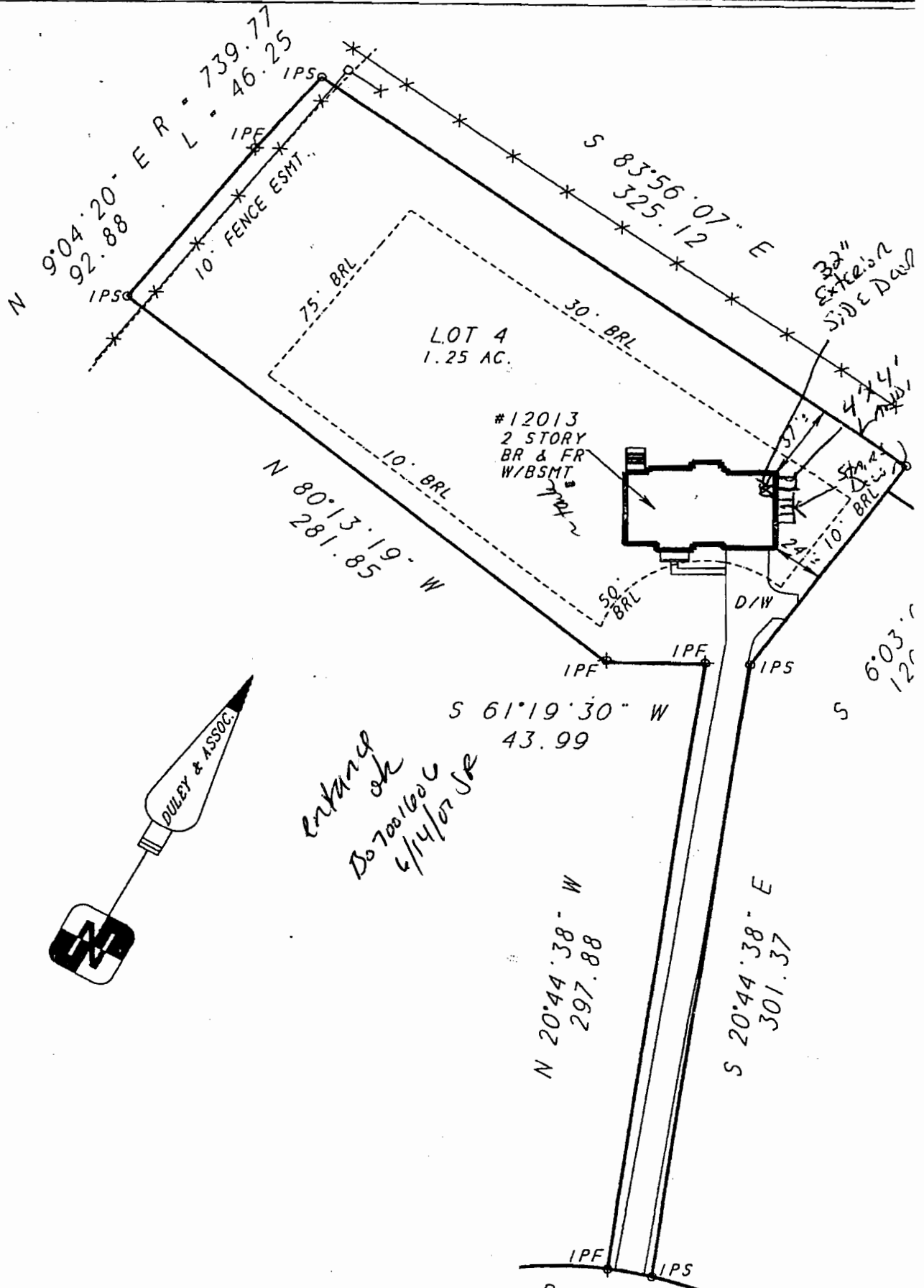
Pink: Health

Gold: SHA

Rev. 11/4/04

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HEALTH DEPT



12013 Sand Hill Manor Drive
Marriottsville, MD, 21104

Bo7001606

HEALTH DEPT

SIDE OF HOUSE

Front of House

32" Standard Exterior Door

4' X 4' LANDING
3 or 4 STEPS
POSTS & RAIL - WHITE VINYL
PLATFORM & STEPS - TREK

3 1/2'
High

36"
Footers