

DEPT. OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLCOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		HOWARD COUNTY PERMIT APPLICATION		808001988 PERMIT NUMBER																																																																									
Building Address <u>15131 SAPPING RIDGE</u>			Property Owner's Name <u>PATEL</u> Address <u>15131 SAPPING RIDGE DR</u> City <u>DATON</u> State <u>MO</u> Zip Code <u>21036</u> Phone <u>405311995</u> Phone Applicant's Name & Mailing Address, (if other than stated herein):  Phone _____ Fax _____																																																																										
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision _____ Section _____ Area _____ Lot _____ Tax Map _____ Parcel _____ Grid _____ Zoning _____ Map Coordinates _____ Lot Size _____			Contractor Company <u>BUNTING HOME REMODELING LLC</u> Contact Person <u>PAUL BUNTING</u> Address <u>1260 LINDEN AVE</u> City <u>BALTIMORE</u> State <u>MD</u> Zip Code <u>21227</u> License No. <u>121627</u> Phone <u>410 952 4626</u> Fax <u>410 242 8544</u> Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____																																																																										
Existing Use <u>RES</u> Proposed Use <u>RES</u> Estimated Construction Cost \$ <u>22,000</u> Description of Work <u>DECK &amp; GAZEBO</u> <u>24 x 17 Deck, 12 x 12 Gazebo</u> Occupant or Tenant <u>PATEL</u> Contact Name _____ Address <u>15131 SAPPING RIDGE DR</u> City <u>DATON</u> State <u>MO</u> Zip Code <u>21036</u> Phone _____ Fax _____			BUILDING DESCRIPTION - <u>COMMERCIAL</u> <table border="1"><thead><tr><th>Building Characteristics</th><th>Utilities</th></tr></thead><tbody><tr><td>Height: _____</td><td>Water Supply: _____ Public _____ Private _____</td></tr><tr><td>No. of stories: _____</td><td>Sewage Disposal: _____ Public _____ Private _____</td></tr><tr><td>Gross area, sq. ft. per floor: _____</td><td>Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/></td></tr><tr><td>Use group: _____</td><td>Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/></td></tr><tr><td>Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____</td><td>Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____</td></tr></tbody></table>			Building Characteristics	Utilities	Height: _____	Water Supply: _____ Public _____ Private _____	No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>	Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____																																																												
Building Characteristics	Utilities																																																																												
Height: _____	Water Supply: _____ Public _____ Private _____																																																																												
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____																																																																												
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>																																																																												
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>																																																																												
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____																																																																												
			BUILDING DESCRIPTION - <u>RESIDENTIAL</u> <table border="1"><thead><tr><th>Building Characteristics</th><th>Utilities</th></tr></thead><tbody><tr><td>SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1<sup>st</sup> floor: _____ 2<sup>nd</sup> floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ 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 _____</td><td>Water Supply: _____ Public _____ Private _____ Sewage Disposal: _____ Public _____ Private _____ Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____</td></tr></tbody></table>			Building Characteristics	Utilities	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 <sup>st</sup> floor: _____ 2 <sup>nd</sup> floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ 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 _____	Water Supply: _____ Public _____ Private _____ Sewage Disposal: _____ Public _____ Private _____ Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____																																																																				
Building Characteristics	Utilities																																																																												
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 <sup>st</sup> floor: _____ 2 <sup>nd</sup> floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ 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 _____	Water Supply: _____ Public _____ Private _____ Sewage Disposal: _____ Public _____ Private _____ Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> 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 THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.																																																																													
Applicant's Signature <u>Paul L. Bunting</u> Title/Company <u>BUNTING HOME REMODELING LLC</u>			Print Name <u>Paul L. Bunting</u> Date <u>7-3-8</u>																																																																										
Checks payable to: <b>DIRECTOR OF FINANCE OF HOWARD COUNTY</b> <b>**PLEASE WRITE NEATLY AND LEGIBLY.**</b> <b>- FOR OFFICE USE ONLY -</b>																																																																													
<table border="1"><thead><tr><th>AGENCY</th><th>DATE</th><th>SIGNATURE</th><th>APPROVAL</th><th>DPZ SETBACK INFORMATION</th><th>PROPERTY ID #</th></tr></thead><tbody><tr><td>Land Development, DPZ</td><td></td><td></td><td></td><td>Front: _____</td><td>Filing fee \$</td></tr><tr><td>State Highways</td><td></td><td></td><td></td><td>Rear: _____</td><td>Permit fee \$</td></tr><tr><td>Building Officials</td><td></td><td></td><td></td><td>Side: _____</td><td>Excise tax \$</td></tr><tr><td>Dev. Engineering, DPZ</td><td></td><td></td><td></td><td>Side St: _____</td><td>Add'l per fee \$</td></tr><tr><td>Health</td><td><u>7/3/08</u></td><td><u>R. Bunting</u></td><td></td><td>All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/></td><td>TOTAL FEES \$</td></tr><tr><td>Fire Protection</td><td></td><td></td><td></td><td>Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/></td><td>Sub-total paid \$</td></tr><tr><td colspan="4">Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/></td><td>Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/></td><td>Balance due \$</td></tr><tr><td colspan="4">CONTINGENCY CONSTRUCTION START: <input type="checkbox"/></td><td>Lot Coverage for New Town Zone _____</td><td>Check # <u>1136</u></td></tr><tr><td colspan="4">ONE STOP SHOP: <input type="checkbox"/></td><td>SDP/Red-line approval date _____</td><td>Validation # _____</td></tr><tr><td colspan="4">Distribution of Copies - White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA</td><td colspan="2">Accepted by _____</td></tr><tr><td colspan="4">Terms/building permit application</td><td colspan="2">REV 10/28/04</td></tr></tbody></table>						AGENCY	DATE	SIGNATURE	APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID #	Land Development, DPZ				Front: _____	Filing fee \$	State Highways				Rear: _____	Permit fee \$	Building Officials				Side: _____	Excise tax \$	Dev. Engineering, DPZ				Side St: _____	Add'l per fee \$	Health	<u>7/3/08</u>	<u>R. Bunting</u>		All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$	Fire Protection				Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$	Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>				Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$	CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>				Lot Coverage for New Town Zone _____	Check # <u>1136</u>	ONE STOP SHOP: <input type="checkbox"/>				SDP/Red-line approval date _____	Validation # _____	Distribution of Copies - White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA				Accepted by _____		Terms/building permit application				REV 10/28/04	
AGENCY	DATE	SIGNATURE	APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID #																																																																								
Land Development, DPZ				Front: _____	Filing fee \$																																																																								
State Highways				Rear: _____	Permit fee \$																																																																								
Building Officials				Side: _____	Excise tax \$																																																																								
Dev. Engineering, DPZ				Side St: _____	Add'l per fee \$																																																																								
Health	<u>7/3/08</u>	<u>R. Bunting</u>		All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$																																																																								
Fire Protection				Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$																																																																								
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>				Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$																																																																								
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>				Lot Coverage for New Town Zone _____	Check # <u>1136</u>																																																																								
ONE STOP SHOP: <input type="checkbox"/>				SDP/Red-line approval date _____	Validation # _____																																																																								
Distribution of Copies - White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA				Accepted by _____																																																																									
Terms/building permit application				REV 10/28/04																																																																									

OPEN SPACE LOT 2  
HOMEOWNERS ASSOCIATION

PRESERVATION PARCEL A  
BUILDABLE  
10.87 AC.

GRID NORTH

SEE DETAIL

Septic Tank  
Pump Tank

LOT 1

Septic Easement  
(approx)  
reb

SAPLING RIDGE DRIVE  
(50' R/W)

APPROVED

WALK-THRU BUILDING PERMIT  
BP#80800/889  
APP. BY *P. Bual* A/E

DATE: 7/3/88  
DESC. OF WORK: Deck (24' x 12')  
\$ Gazebo (12' x 12') as shown

SECTION DETAIL

1" = 30'

CERTIFICATE

TO THE BEST OF MY PROFESSIONAL  
KNOWLEDGE AND BELIEF, THAT THE  
BUILDING WALLS SHOWN HEREON  
WERE BASED ON A FIELD RUN  
BY BENCHMARK ENGINEERING, INC.  
THAT THE PROPERTY OUTLINE  
SHOWN ON THE PLAT PREPARED BY  
BENCHMARK ENGINEERING, INC. ENTITLED "HIGH FOREST  
SUBDIVISION", AND RECORDED AMONG  
HOWARD COUNTY AS PLAT

feet  
0 50

TOP OF FOUNDATION WALL ELEVATION = 479.3'  
OFFSET DIMENSIONS TO PROPERTY LINES ARE ± 0.1'