

Suite/Apt. #___

Section:

Zoning: ___

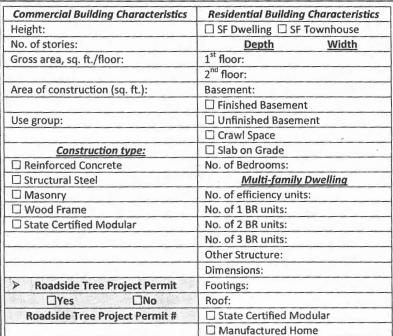
Building Permit Application

Howard County Maryland Department of Inspections, Licenses and Permits 3430 Court House Drive Permits: 410-313-2455

Date Received:
Date Received.

Permit No.: <u>617-003</u>233 www.howardcountymd.gov

Building Address: 13950 Roy	vermill Rd.	Property Owner's Name: Dacic + mi	chelle Bossman
West Friendship state	MD Zip Code: 21794	Address: 13950 Ravec mill	34.
		With st Friendship State: MD	Zip Code: 21794
Suite/Apt. #SDP	/WP/BA #:	Phone: 410 - 489 - 0919 Fax:	
Census Tract:	Subdivision:	Email: daric. bessman@1	ierizon. Net
Section: Area	a:Lot:	Applicant's Name & Mailing Address, (If other	er than stated herein)
		Applicant's Name: John Biley	
	Grid:	Address: 1189 hay Rd.	
Zoning: Map Coordinat	tes: Lot Size:	City: Sykesyille State: Mb	Zip Code: 21784
		Phone: 410 · 447-3678 Fax:	
Existing Use:		Email:	
Proposed Use:		Contractor Company: Clockwork	Builders, Ltd.
Estimated Construction Cost: \$ 28	.600	Contact Person: John Riley	•
Description of Work: 690 9/14		Address: 1/88 Day Rd.	
	water - 2	CitySylvesuile State: MA	
wetbar, Full Bath	+ o FFICE	License No. : 70347	
,		Phone:Fax:	,
Occupant/Tonant Name: DasiG	+ Michelle Bossman	Email:	
Was tenant space previously occupied?		Engineer/Architect Company:	
Contact Name: Dacie + mic	helle Bossman	Responsible Design Prof.:	
Address: 13950 Rover M	VII Rd.	Address:	
· .	State: MD Zip Code: Z1794	City:State:Zi	p Code:
Phone: 410 - 489 - 0919 H	Fax:	Phone:Fax:	
Email: daric.bassman	overizon net	Email:	
Commercial Building Characteristics	Residential Building Characteristics	Utilities	
Height:	☐ SF Dwelling ☐ SF Townhouse	Electric: Yes No	
No. of stories:	Depth Width	Gas: Yes No	
Gross area, sq. ft./floor:	1 st floor:	Water Supply	
	2 nd floor:	Public	
Area of construction (sq. ft.):	Basement:	Private	
	☐ Finished Basement		
Use group:	☐ Unfinished Basement	Sewage Disposal	
Construction type	☐ Crawl Space ☐ Slab on Grade	☐ Public	
Construction type: ☐ Reinforced Concrete	No. of Bedrooms:	☐ Private	
☐ Structural Steel	Multi-family Dwelling	<u>Heating System</u>	
☐ Masonry	No. of efficiency units:	☐ Electric ☐ Oil	
☐ Wood Frame	No. of 1 BR units:	☐ Natural Gas ☐ Propane Gas	
☐ State Certified Modular	No. of 2 BR units:	☐ Other:	
	No. of 3 BR units:	Sprinkler System:	
	Other Structure:	☐ Yes ☐ No	
	Dimensions:		
> Roadside Tree Project Permit	Footings:	Grading Permit Number:	
□Yes □No	Roof:		
Roadside Tree Project Permit #	☐ State Certified Modular	Building Shell Permit Number:	
	☐ Manufactured Home	Building Shell Permit Number:	
WITH ALL REGULATIONS OF HOWARD COUNTY V	WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE JNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PRO	O MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CON WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPE PIPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTE	RTY NOT SPECIFICALLY DESCRIBED IN
- Alburance a sillum anno	,		
Email Address	7	Date	
Title/Company	The state of the state of the second state of the second state of the		



Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

**PLEASE WRITE NEATLY & LEGIBLY*

-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	3/24/1	Buther

Is Sediment Control approval required for issuance? ☐ Yes ☐ No ☐ CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION		
Front:		
Rear:		
Side:		
Side St.:		
All minimum setbacks met?	☐ Yes	□No
Is Entrance Permit Required?	☐ Yes	□No
Historic District?	☐ Yes	□No
Lot Coverage for New Town Z	one:	
SDP/Red-line approval date:		

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	#

Distribution of Copies:

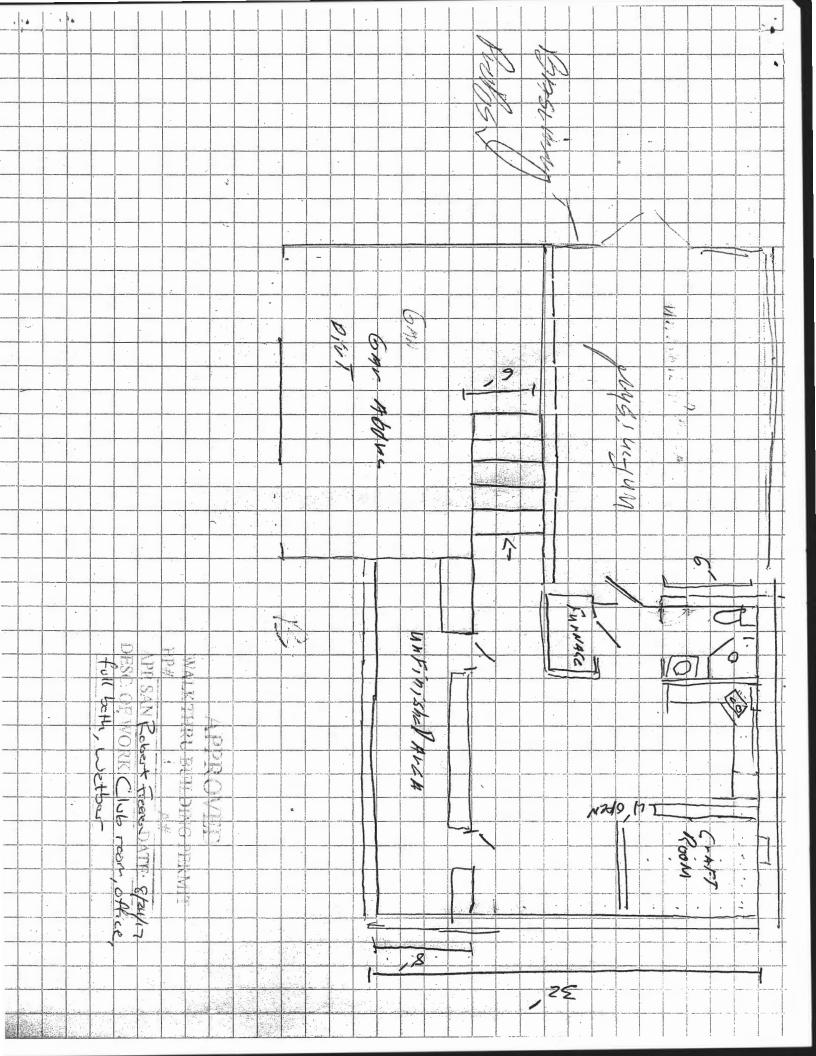
White: Building Officials

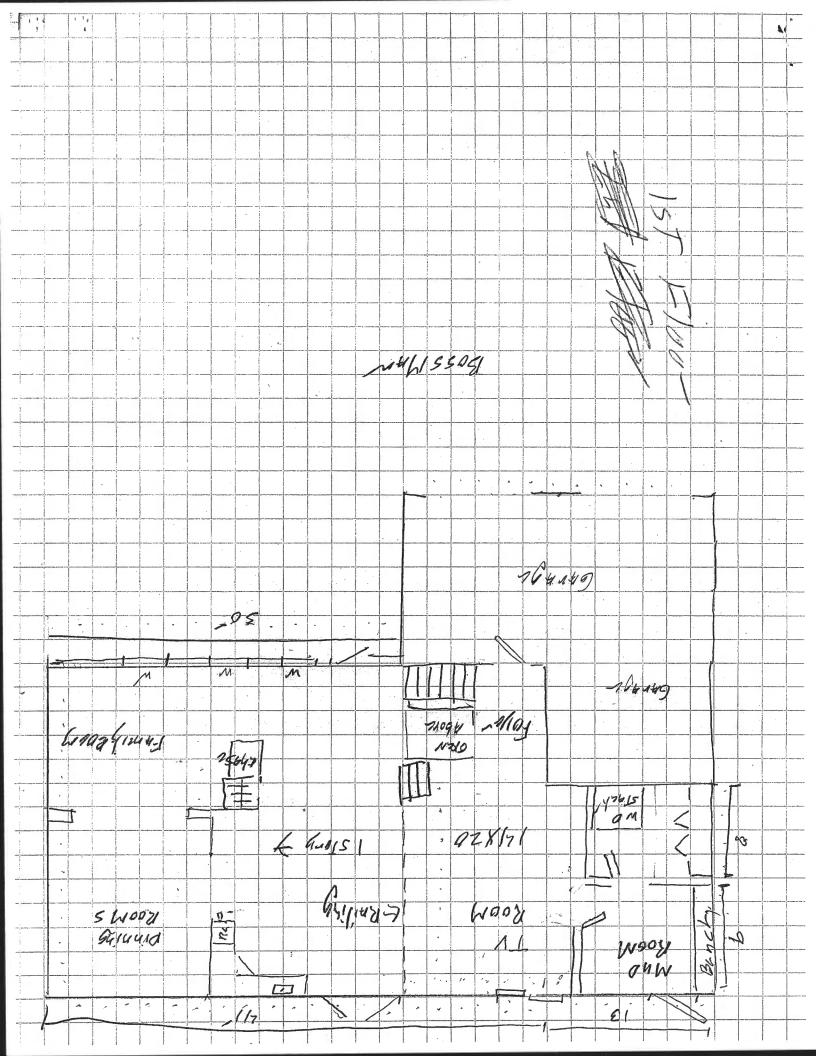
Green: PSZA,Zoning

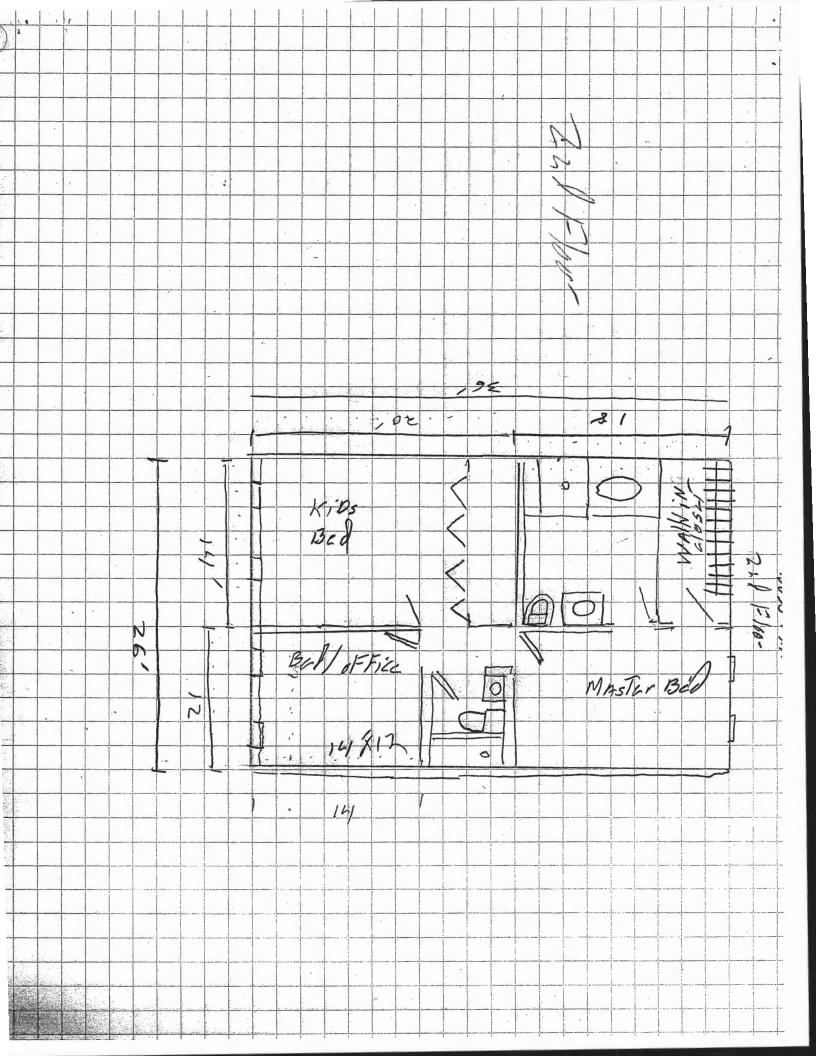
Yellow: PSZA, Engineering

Pink: Health

Gold: SHA







Existing
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