Building Permit Application

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

DILP 2019 APR 10 AM 8:21

Date Received: _____

EC/OK AKH 4/10/19

Permit No.: B/9001050

Building Address: 3615 SCHEEL DRIVE
City: ELLICOTT CITY State: MD Zip Code: 21042
Suite/Apt. #_____ SDP/WP/BA #: _____
Subdivision: _____
Lot: 17 Tax Map: _____ Parcel: _____

Existing Use: primary resident
Proposed Use: primary resident
Estimated Construction Cost: $ 50,000
Description of Work: Adding to the 1st level 500 SF study rooms and 500 SF family room with wooden deck. The whole addition will be raised up to create covered terrace and carport.
Occupant/Tenant Name: _____
Was tenant space previously occupied? ☐Yes ☐No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: HAYMAN Z. ELASHRY
Address: 3615 Scheel Dr.
City: ellicott city State: MD Zip Code: 21042
Phone: 202-492-8648 Fax: _____
Email: heLashry@gmail.com

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: myself
Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: _____
License No. : _____
Phone: _____ Fax: _____
Email: _____

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Commercial Building Characteristics	*Residential Building Characteristics*		
Height:	■ SF Dwelling ☐ SF Townhouse		
No. of stories:		**Depth**	**Width**
Gross area, sq. ft./floor:	1st floor:	29'0"	58'0"
	2nd floor:		
Area of construction (sq. ft.):	Basement:	20'0"	58'0"
	☐ Finished Basement		
Use group:	■ Unfinished Basement		
	☐ Crawl Space		
Construction type:	☐ Slab on Grade		
☐ Reinforced Concrete	No. of Bedrooms:		
☐ Structural Steel	***Multi-family Dwelling***		
☐ Masonry	No. of efficiency units:		
☐ Wood Frame	No. of 1 BR units:		
☐ State Certified Modular	No. of 2 BR units:		
	No. of 3 BR units:		
	Other Structure:		
	Dimensions:		
➢ Roadside Tree Project Permit	Footings:		
☐Yes ■No	Roof:		
Roadside Tree Project Permit #	☐ State Certified Modular		
	☐ Manufactured Home		

Utilities	
Electric: ■ Yes ☐ No	
Gas: ☐ Yes ■ No	
Water Supply	
☐ Public	
■ Private	
Sewage Disposal	
☐ Public	
■ Private	
Heating System	
■ Electric ☐ Oil	
☐ Natural Gas ☐ Propane Gas	
☐ Other:	
Sprinkler System:	
☐ Yes ■ No	
Grading Permit Number:	
Building Shell Permit Number:	

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 Hayman Z. Elashry

heLashry@gmail.com
Email Address

Date 04/10/2019

Senior Architect
Title/Company

RECEIVED
APR 10 2019
LICENSES & PERMITS DIVISION

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	7/1/2019	

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

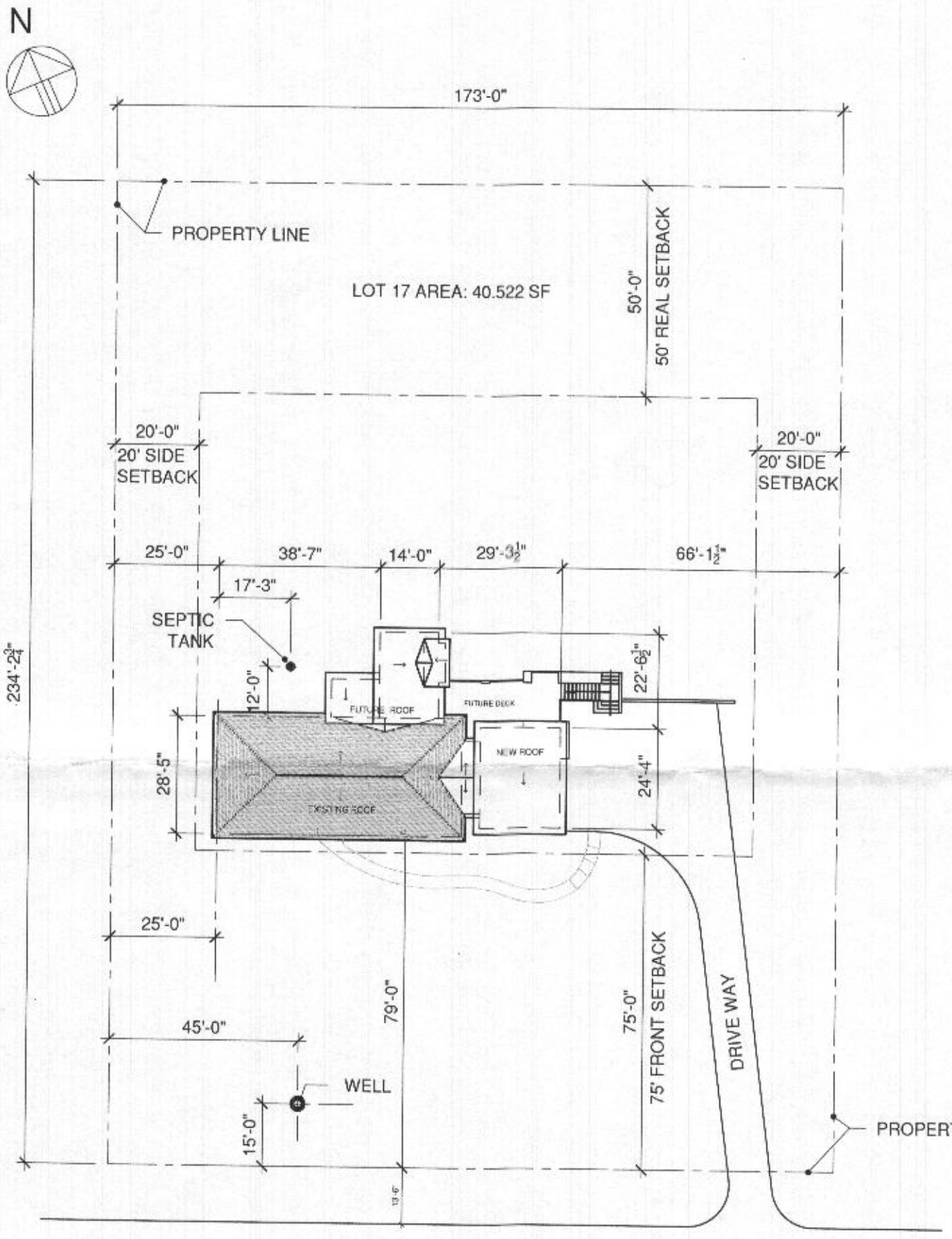
DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met? ☐ Yes ☐ No	
Is Entrance Permit Required? ☐ Yes ☐ No	
Historic District? ☐ Yes ☐ No	
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	$ 35
Permit Fee	$
Tech Fee	$
Excise Tax	$
PSFS	$
Guaranty Fund	$
Add'l per Fee	$
Total Fees	$
Sub- Total Paid	$
Balance Due	$
Check	# 1340

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

T:\Operations\Updated Forms\BuildingPermitApplication03.29.2018.docx

AKH



1/100 PLOT PLAN
SCALE: 1/32"=1'-0"

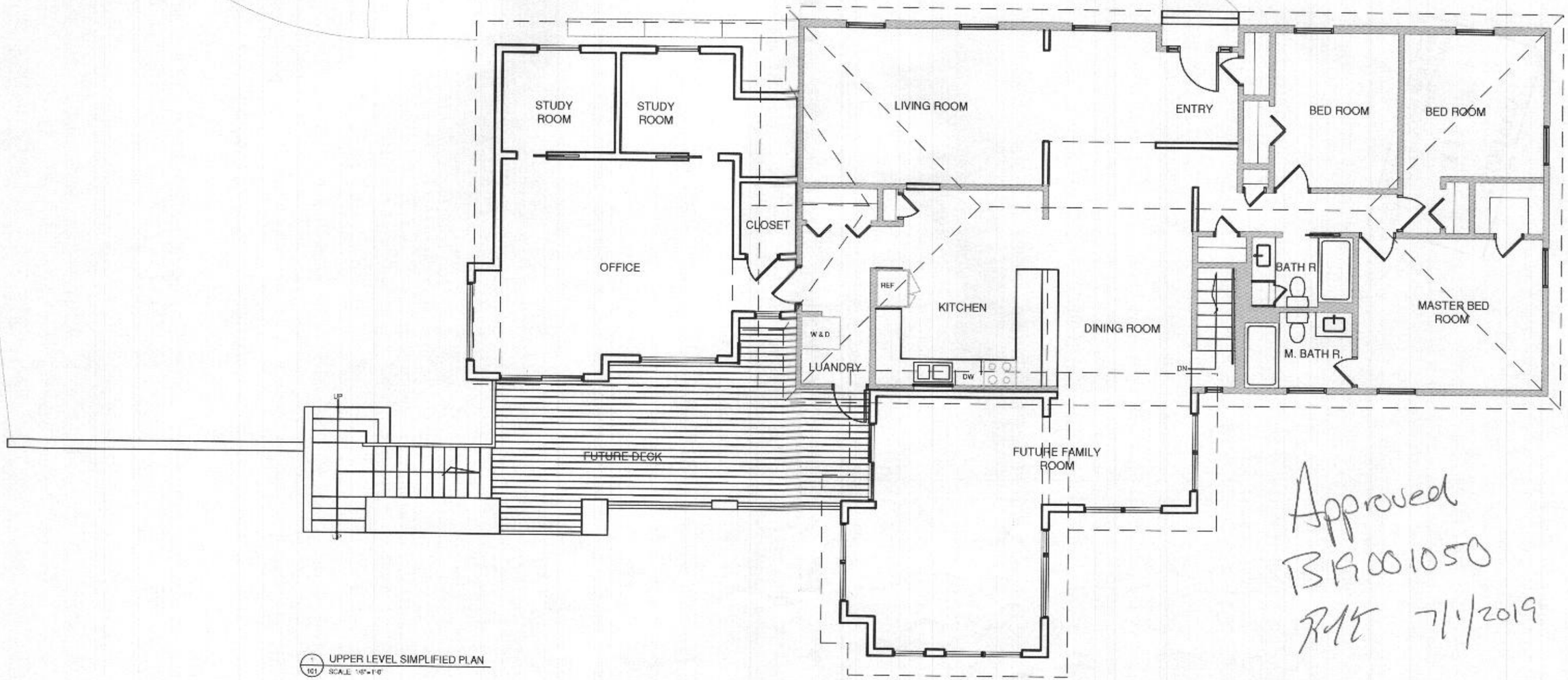
REVISED
Date: 6-12-19
Comments: Revised plot plan to reduce addition and remove deck size

Approved B1900105O
7/1/2019 RJE

NEW ADDITION

3615 SCHEEL DRIVE ELLICOTT CITY, MD 21042

Health



UPPER LEVEL SIMPLIFIED PLAN
SCALE: 1/8" = 1'-0"

Approved
B1900105O
RJE 7/1/2019

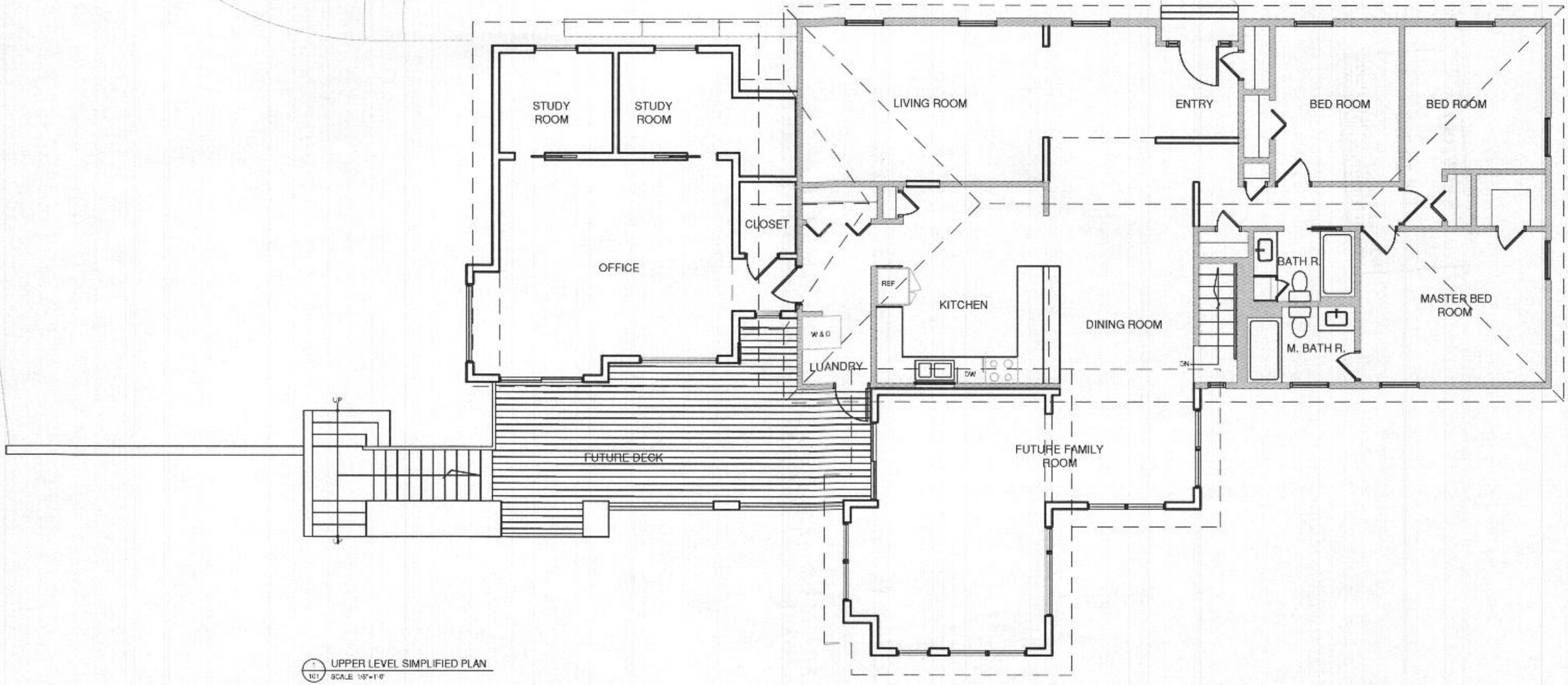
NEW ADDITION

3615 SCHEEL DRIVE ELLICOTT CITY, MD 21042

SHEET NUMBER:

A-101

SIMPLIFIED PLAN



1/101 UPPER LEVEL SIMPLIFIED PLAN
SCALE: 1/8"=1'-0"

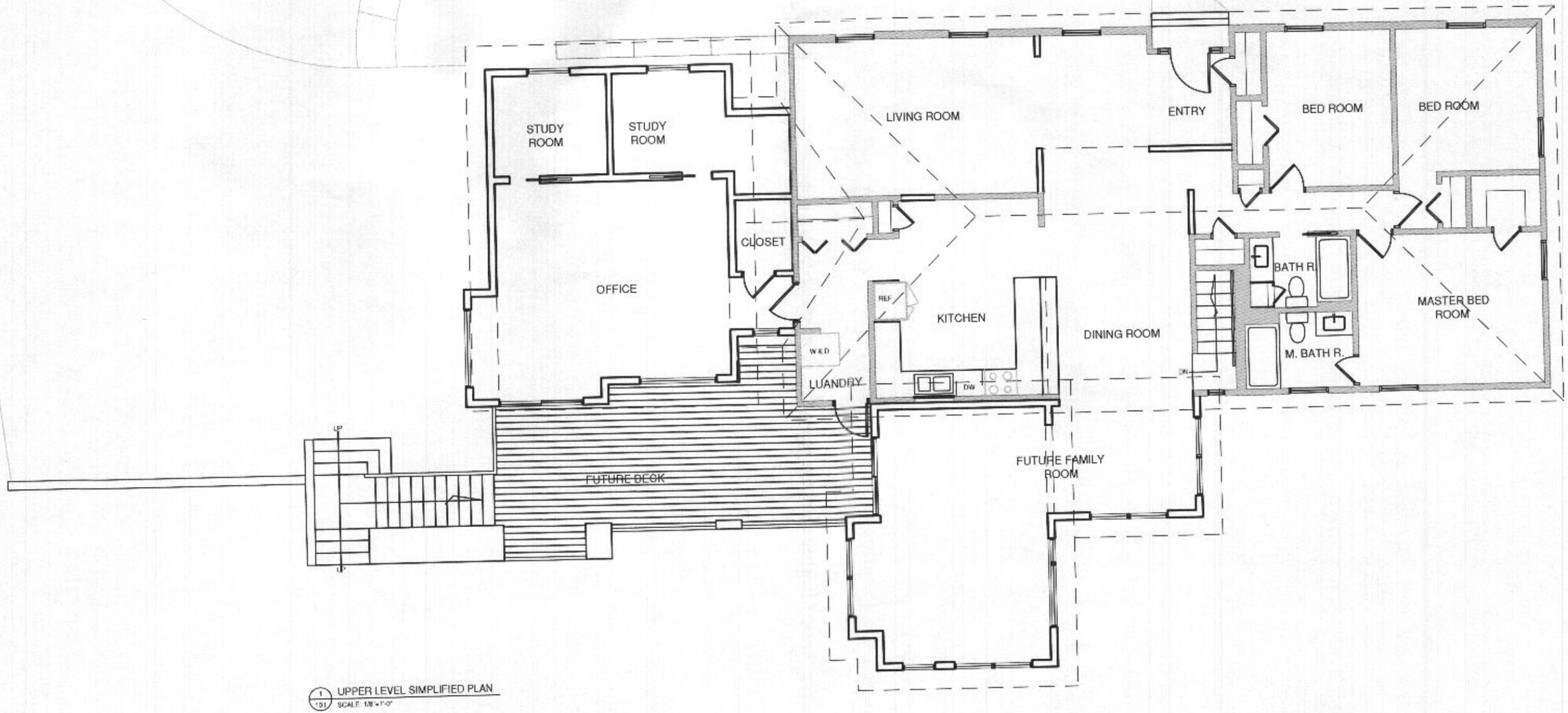
NEW ADDITION

3615 SCHEEL DRIVE ELLICOTT CITY, MD 21042

SHEET NUMBER:

A-101

SIMPLIFIED PLAN



1/101 UPPER LEVEL SIMPLIFIED PLAN
SCALE: 1/8"=1'-0"

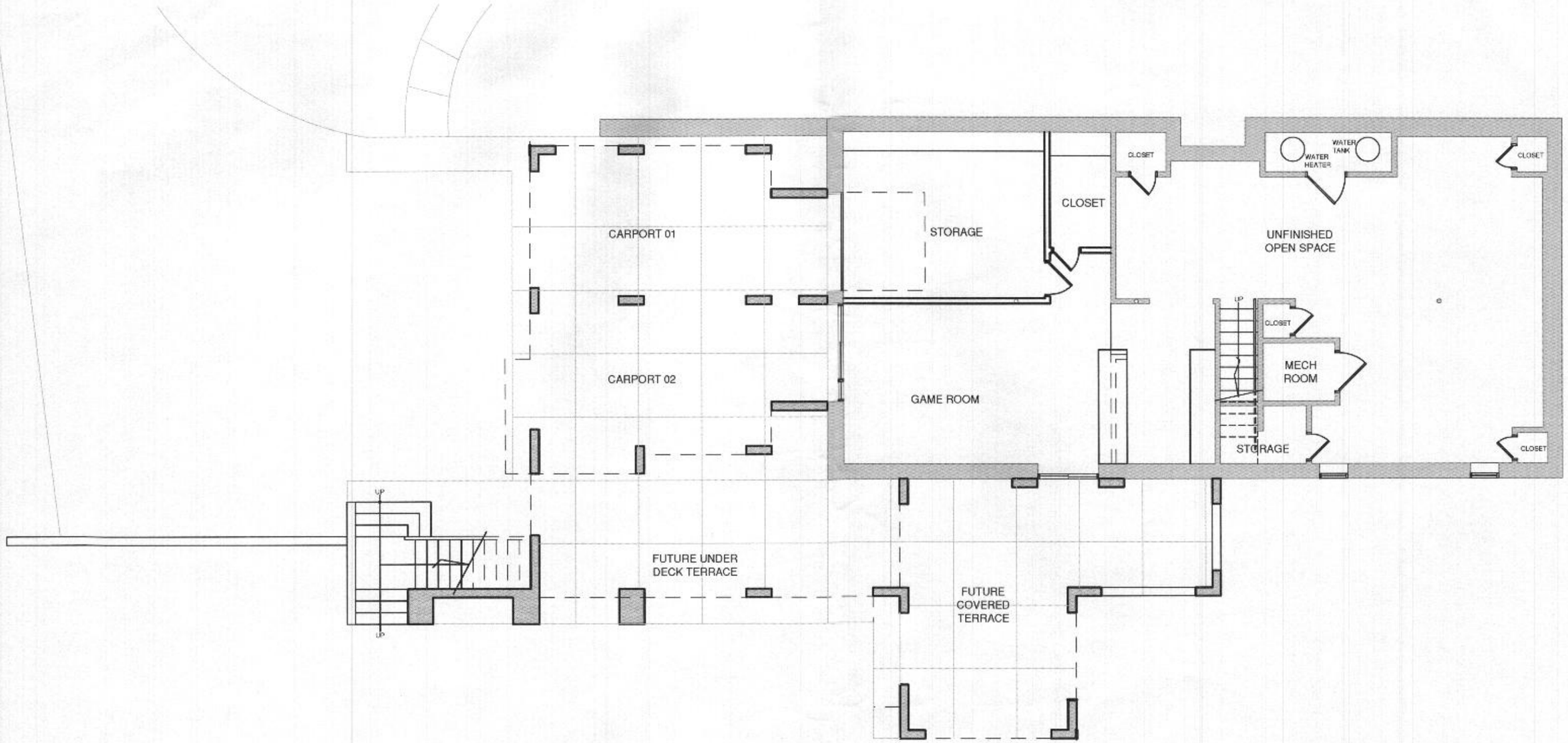
NEW ADDITION

3615 SCHEEL DRIVE ELLICOTT CITY, MD 21042

SHEET NUMBER:

A-101

SIMPLIFIED PLAN



1/102 LOWER LEVEL SIMPLIFIED FLOOR PLAN
SCALE: 1/4"=1'-0"

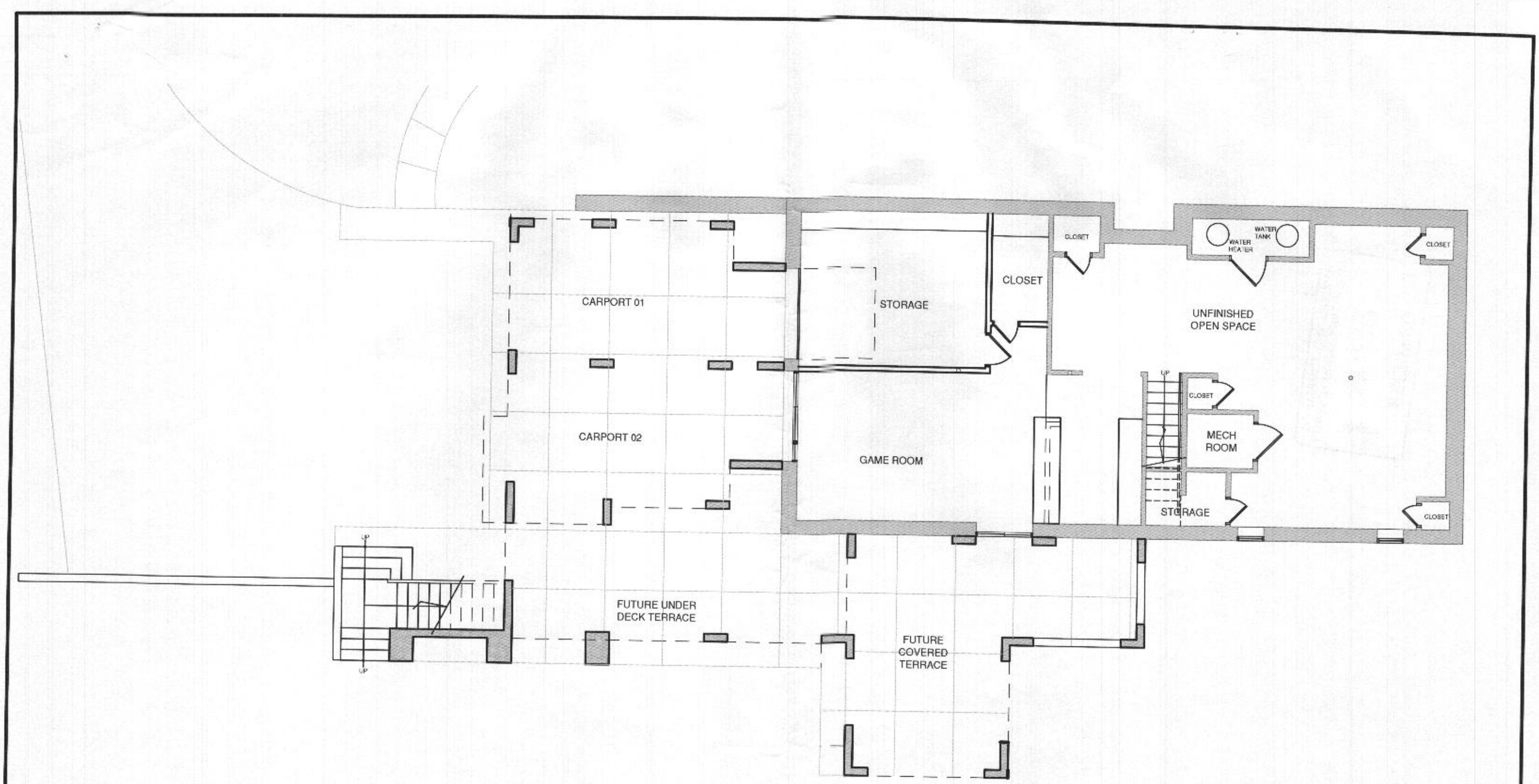
NEW ADDITION

3615 SCHEEL DRIVE ELLICOTT CITY, MD 21042

SHEET NUMBER:

A-102

SIMPLIFIED PLAN



1/102 LOWER LEVEL SIMPLIFIED FLOOR PLAN
SCALE: 1/4"=1'-0"

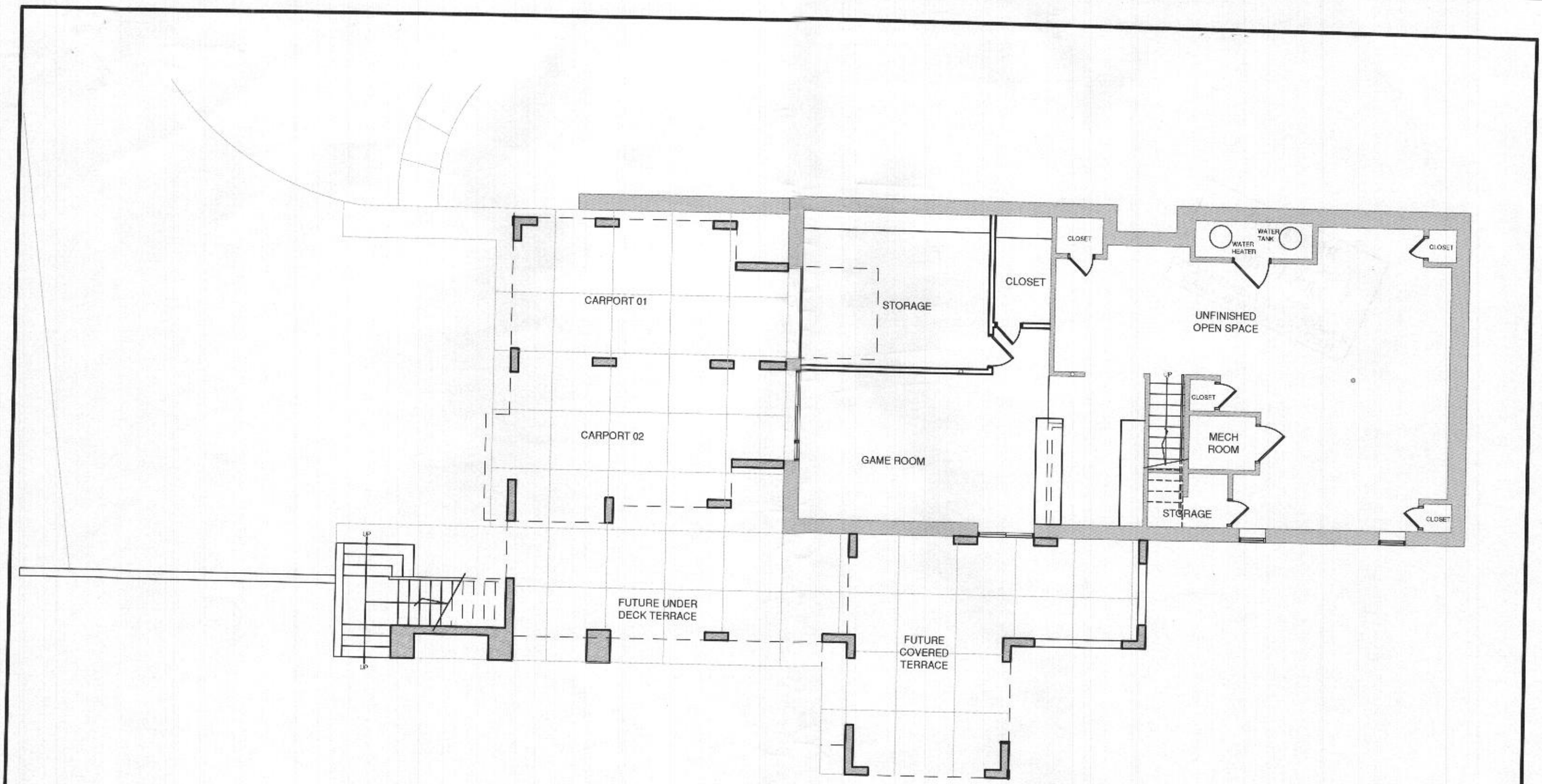
NEW ADDITION

3615 SCHEEL DRIVE ELLICOTT CITY, MD 21042

SHEET NUMBER:

A-102

SIMPLIFIED PLAN



1/102 LOWER LEVEL SIMPLIFIED FLOOR PLAN
SCALE: 1/4"=1'-0"

NEW ADDITION

3615 SCHEEL DRIVE ELLICOTT CITY, MD 21042

SHEET NUMBER:

A-102

SIMPLIFIED PLAN