G07000 63 DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MO 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810
AUTOMATED IN FORMATION (410) 313-3810 PERMIT NUMBER HOWARD COUNTY PERMIT APPLICATION SHEPPARA MANR DRIVE Property Owner's Name 634 1TY MD 21042 Address SDP/WP/Petition #: Census Tract 605 101 Subdivision SHEAPARS MANOR 410-997-8320 X18 Applicant's Name & Mailing Address, (if other than stated he Map Coordinates 10F13 Lot size 47343 Fax410-997-4358 Phone Contractor Company SAME Existing Use Proposed Use Contact Person Estimated Construction Cost \$ 300,000 Description of Work MODEL: RUTLETGE W/8'KITCHEN Address EXT, CONSERVATORY 3UARGARAGE City State Zip Code STRY, FULLBEME, IDR, 3FB, IHB, License No. Phone AS DUDNIFER Engineer or A Contact Name Address Zip Code City . Phone Fax Phone BUILDING DESCRIPTION - COMMERCIAL **BUILDING DESCRIPTION - RESIDENTIAL Building Characteristics** Utilities **Building Characteristics** Utilities SF Dwelling \textit{\textit{Depth}} Water Supply: Height: SF Townhouse Water Supply: Public Private **Public** Width No. of stories: 1st floor: Private Sewage Disposal: Sewage Disposal: 2nd floor: **Public** Public Basement: X Private Gross area, sq. ft. per floor: Private Finished Basement Unfinished Basement Crawl space Slab on Grade No. of Bedrooms Electric Yes No □ Gas Yes No □ Electric Yes □ No □ Use group: Height: Multi-family dwellings: Gas Yes □ No □ Heating System: Electric Oi Natural Gas No. of efficiency units:
No. of 1 BR units:
No. of 2 BR units:
No. of 3 BR units: Heating System: Oil 🗆 Construction type: Electric Oil П Reinforced Co Natural Gas Propane Gas Structural Steel Propane Gas Masonry Sprinkler system: N/A Wood Frame Sprinkler system: N/A nsions: NFPA#13D Full NFPA #13R Roof Height Partial State Certified Modular Other Suppression State Certified Modular # of Heads Manufactured Home INDERSIGNED 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 ARD 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 OF RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES. nt's Signature Print Name AGEN 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 100 Front: Filing fee 320 State Highways Rear. Permit fee Building Official 7522 24 Side Excise tax 160 33 Dev. Engineering, DPZ Side St Add'I per, fee 10/2 Health All minimum setbacks met? TOTAL FEES Fire Protection YES | NO | Sub-total paid Is Sediment Control approval required prior to issuance? Is Entrance Permit required? Balance due YES I NO I YES I NO I 743 Check ric District? Validation TED NO D CONTINGENCY CONSTRUCTION STARLANS RECEIV ONE STOP SHOP: Lot Coverage for NewTown Zone SDP/Red-line approval date Accepted by Distribution of Copies-White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA T-YourselPERMIT FRM Rev. 11/4//04