

<small>DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3450 COURT HOUSE DRIVE ELICOTT CITY, MD 21043 PERMITS (410) 313-3455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800</small>		<h2 style="margin:0;">HOWARD COUNTY</h2> <h3 style="margin:0;">PERMIT APPLICATION</h3>		<h2 style="margin:0;">PERMIT NUMBER</h2> <h1 style="margin:0;">B08001297</h1>	
Building Address <u>4638 Sheppard Manor Drive</u> <u>Ellicott City, MD. 21042</u>		Property Owner's Name <u>Eric Pakulla</u>			
Suite/Apt. #: _____ SDP/NP/Petition #: _____ Census Tract _____ Subdivision <u>Williamsburg Sheppard Manor</u>		Address <u>4638 Sheppard Manor Drive</u>			
Section _____ Area _____ Lot <u>11</u> Tax Map <u>29</u> Parcel <u>268</u> Grid <u>1</u>		City <u>Ellicott City</u> State <u>MD</u> Zip Code <u>21042</u>			
Zoning _____ Map Coordinates _____ Lot size _____		Home Phone _____ Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): _____			
Existing Use <u>SFD</u> Proposed Use <u>SFD w/Deck</u> Estimated Construction Cost \$ _____		Contractor Company <u>Pro-Built Construction, Inc.</u> Contact Person <u>Edward Pacylowski</u>			
Description of Work <u>Approx 16x18 Deck</u> <u>Screen porch w/ steps to</u> <u>grade</u>		Address <u>13330 Clarksville Pike</u> City <u>Highland</u> State <u>MD</u> Zip Code <u>20777</u> License No. <u>30247</u> Phone <u>301-854-0821</u> Fax <u>301-854-9632</u>			
Occupant or Tenant _____ Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____		Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____			

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Utilities Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> 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: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____	Building Characteristics SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: _____ 2nd 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 _____ Height: _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: <u>Deck</u> Dimensions: <u>Deck</u> Footings: <u>Post and pier</u> Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Utilities Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> 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: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> 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 THEREON; (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.

Edmund Nafel
 Applicant's Signature
President
 Title/Company

Edward Pacylowski
 Print Name
5.1.08
 Date

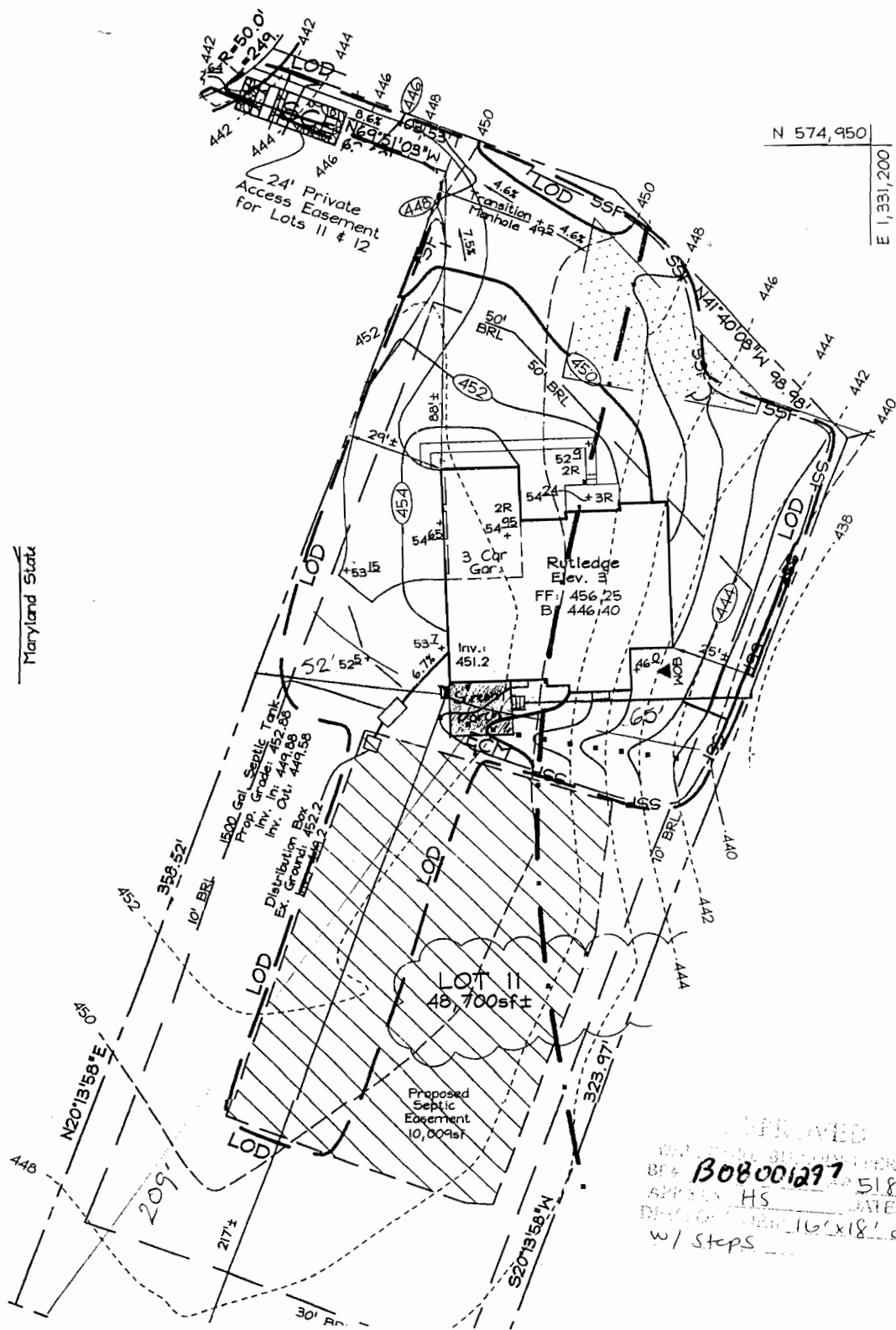
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St: _____	Add'l per. fee \$ _____
Health	<u>5-1-08</u>	<u>[Signature]</u>	All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
			Lot Coverage for New Town Zone _____	
			SDP/Red-line approval date _____	Accepted by _____
Distribution of Copies:	White: Building Official	Green: LDD, DPZ	Yellow: DED, DPZ	Pink: Health
				Gold: SHA

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Rev. 11/4/04

Maryland State



APPROVED
BY: **B08001297** 518599
APPROX. HS DATE: 5-1-08
DRAIN: 16'x18' creek
w/ steps

924929

Plot Too Big To Scan

907000123

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-7455 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B0700 3570

Building Address 4638 SHEPPARD MANOR DRIVEELLICOTT CITY, MD 21042Suite/Apt. #: — SDP/WP/Petition #: GP08-15Census Tract 605101 Subdivision SHEPPARD MANORSection — Area — Lot 11Tax Map 29 Parcel 268 Grid 1Zoning RC-DEO Map Coordinates 10F13 Lot size 48,700 SFExisting Use VACANT LOTProposed Use SFDEstimated Construction Cost \$300,000Description of Work MODEL: RUTLEGE w/8' KITCHENEXT., 3 CAR GARAGE, 2 STORY, FULLBSMT., 12R, 3FB, 1HB, 2FP, 5BROccupant or Tenant SAME AS OWNERContact Name —Address —City — State — Zip Code —Phone — Fax —Property Owner's Name WILLIAMSBURG GROUP LLCAddress 5485 HARPERS FARM RD, #200City COLUMBIA State MD Zip Code 21044Home Phone — Work Phone 410-97-8800 X18

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone — Fax 410-97-4358Contractor Company SAME AS OWNERContact Person —Address —City — State — Zip Code —License No. 155Phone — Fax —Engineer or Architect Company FSH Assoc.Contact Person ZACH FISCHAddress 6339 Howard LaneCity ELKridge State MD Zip Code 21075Phone — Fax —BUILDING DESCRIPTION - COMMERCIALBUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:

☐ Reinforced Concrete
☐ Structural Steel
☐ Masonry
☐ Wood Frame

☐ State Certified Modular

Utilities

Water Supply:

☐ Public
☐ Private

Sewage Disposal:

☐ Public
☐ Private

Electric Yes ☐ No ☐Gas Yes ☐ No ☐

Heating System:

☐ Electric ☐ Oil ☐
☐ Natural Gas ☐
☐ Propane Gas ☐

Sprinkler system: N/A ☐

☐ Full
☐ Partial
☐ Other Suppression
of Heads —

Building Characteristics

SF Dwelling ☒ SF Townhouse ☐Depth — Width —

1st floor:

2nd floor:

Basement:

Finished Basement ☐ Unfinished Basement ☒Crawl space ☐ Slab on Grade ☐No. of Bedrooms 4Height: 28'

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

Utilities

Water Supply:

☐ Public
☒ Private

Sewage Disposal:

☐ Public
☒ Private

Electric Yes ☒ No ☐Gas Yes ☒ No ☒

Heating System:

☒ Electric ☐ Oil ☐
☒ Natural Gas ☐
☒ Propane Gas ☐

Sprinkler system: N/A ☒

☐ 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 THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Suzanne P. Davis

Applicant's Signature

AGENT for WGL LLC

Title/Company

SUZANNE P. DAVIS

Print Name

Date

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

** PLEASE WRITE NEATLY AND LEGIBLY. **

- FOR OFFICE USE ONLY -

AGENCY and Development, DPZ DATE 9/12/07 SIGNATURE APPROVAL [Signature]State Highways —Building Official —City Engineering, DPZ —Health 2/27/08 R. BruchmanFire Protection —

Sediment Control approval required prior to issuance?

YES ☐ NO ☐CONTINGENCY CONSTRUCTION START DATE —ONE STOP SHOP: ☐

DPZ SETBACK INFORMATION

PROPERTY ID#

Front: —Filing fee \$ 100Rear: —Permit fee \$ 149328Side: —Excise tax \$ 73000Side St: —Add'l per fee \$ 149328

All minimum setbacks met?

TOTAL FEES \$ 904200YES ☐ NO ☐Sub-total paid \$ —

Is Entrance Permit required?

Balance due \$ —YES ☐ NO ☐Check # 743

Historic District?

Validation # —YES ☐ NO ☐Lot Coverage for New Town Zone —SDP/Red-line approval date —Accepted by —

Distribution of Copies

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Yellow: DED, DPZ

Pink: Health

Gold: SHA

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