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LICENSES AND PERMITS	PERMIT APP	LICATION	B070	0 506
	PERMIT AFT	LIOP Sumar's Namel	)ILLIAMSBI	IRG GROUP LLC
DEGNATS (110) 313 2453 BESTECTIONS (410) 313 1810 AUTOMATED IN COMMATCH (410) 313 3800 Uilding Address 4639 SHEPPARD	MANOR DRIVE F	Property Owner S Name		
ELLICOTT CITY	21049 3-11 1	Address 5485 HA	KPEKS II	ikin si
ELLI CON C	F86-99	AD L	state M	) zip Code 21044
Suite/Apt. #:SDP/WP/Peudo	HEPPARN MANOR	City Column	La State II	0-97-88 X/8
Suite/Apt. #:SDP/WP/Petition	10	Home Phone Applicant's Name & Mail	ing Address, (if other	than stated hereon):
Section Area		Applicant's Name & man		DOT UZES
$n \alpha$ $\lambda \lambda$	Grid	Phone	Fax 446-	.997-4358
Tax Map Parcel Parcel Zorning N=D Map Coordinates 10F/3	Lot size 46, 179 49	Phone Contractor Company	SAME AS	OWNER
Existing Use VACANT LOT	······			
Proposed UseFD Estimated Construction Cost \$	000	Contact Person	·	
Description of Work MONEL: HUNT	-INGTON W/			
SUNROOM, BCALGARAGE		- Address		
	1	City	State	Zip Code
FULLBENT, IQR, ZFB 4 BR	INS, IFF	License No.	Fax	
Occupant or Tenant SAME AS OWNER				
		Engineer & Architect Company FSH ASSOC.		
Contact Name		Contact Person ZACH FISCH		
Address		Address 6339 HOWARD LANE		
City State Zip Code				
Phone		City ELKRIDGE State MD Zip Code 21075		
Phone Fax		Phone 410-567	-5200 Fax 4	10-796-1562
BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - RESIDENTIAL		
Building Characteristics	Utilities	Building Cha		<u>Utilities</u>
Height:	Water Supply: Public	SF Dwelling Dy SF	Townhouse D Width	Water Supply: Public
No. of stories;	Private Sewage Disposal:	1st floor: 2nd floor:	<u></u>	Every Sewage Disposal:
Gross area, sq. ft, ber floor;	Public Private	Basement:		Public Private
		Finished Basement	on Grade 🛛 💦	Electric Yes) No
Use group:	Electric Yes I No I Gas Yes I No I	No. of Bedrooms Height:		Gas Yes No
	Heating System:	Not of efficiency units:		Heating System: Electric 🔯 Oil 🖾
Construction type: Reinforced Concrete	Electric D Oil D Natural Gas D	No. of 1 BR units: No. of 2 BR units: No. of 3 BR units:		Natural Gas
Structural Steel	Propane Gas	No. of 3 Bre units:		
Wood Frame	Sprinkler system: N/A	Dingensions:		Sprinkler system: N/A
	Full Partial	Roof Neight:		NFPA #13R Other:
State Certified Modular	Other Suppression # of Heads	State Certified Manufactured		
r				WILL COMPLY WITH ALL REGULATIONS OF
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS; HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/	SHE WILL PERFORM NO WORK ON THE ABOVE RE	FERENCED PROPERTY NOT SPECIFICAL	LY DESCRIBED IN THIS APPLICA	TION; (5) THAT HE/SHE GRANTS COUNTY OFF
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/ THE RIGHT TO ENTER ONTO THIS BRODERTY FOR THE PURPOSE OF	SHE WILL PERFORM NO WORK ON THE ABOVE RE	FERENCED PROPERTY NOT SPECIFICAL	LY DESCRIBED IN THIS APPLICAT	TION; (5) THAT HE/SHE GRANTS COUNTY OFF
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