



NOT in watershed
JMT

Building Permit Application

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

Date Received: _____

Permit No: B18023376

Building Address: 3531 SYLVAN LANE
City: BELMONT CITY State: MD Zip Code: 21043
Suite/Apt. #: _____ SDP/WP/BA #: _____
Subdivision: _____
Lot: _____ Tax Map: 25 Parcel: 246
Existing Use: SINGLE FAMILY
Proposed Use: SINGLE FAMILY
Estimated Construction Cost: \$ \$100,000
Description of Work: small DEMOLITION OF
GASTINCH HOME / GARAGE & ADDITION TO
HOME / MOVE BLUE BOXES
2 STORY ADDITION
Occupant/Tenant Name: _____
Was tenant space previously occupied? ☐ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: BRANDON MORRIS
Address: 3531 SYLVAN LANE
City: BELMONT CITY State: MD Zip Code: 21043
Phone: 217-448-3328 Fax: _____
Email: BRANDONMORRIS86@GMAIL.COM
Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: OWNER
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____
Contractor Company: J.E.G. BUILDING CONTRACTORS INC.
Contact Person: JOSEPH R. HED
Address: 905 GREENBRIAR LANE
City: WARRINGVILLE State: MD Zip Code: 21793
License No.: 91554
Phone: 301-645-4452 Fax: 301-845-7299
Email: JOSEPH.HED@HOTMAIL.COM
Engineer/Architect Company: AMERICAN ENGINEERING SERVICES
Responsible Design Prof.: WILLIAM SIEGAL
Address: 36 CARRIAGE LANE
City: OCEAN PINES State: MD Zip Code: 21011
Phone: 410-513-9705 Fax: _____
Email: WHEATLEYJOSETTE@GMAIL.COM

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor: <u>34'</u>	<u>14'</u>
	2 nd floor: <u>23'</u>	<u>23'</u>
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input checked="" type="checkbox"/> Crawl Space	
	<input type="checkbox"/> Slab on Grade	
Construction type:	No. of Bedrooms:	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Multi-family Dwelling	
<input type="checkbox"/> Structural Steel	No. of efficiency units:	
<input type="checkbox"/> Masonry	No. of 1 BR units:	
<input checked="" type="checkbox"/> Wood Frame	No. of 2 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Water Supply	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Heating System	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

RECEIVED

SEP 21 2018

LICENSES & PERMITS
DIVISION

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: Brandon Morris
Email Address: BRANDONMORRIS86@GMAIL.COM
Title/Company: _____

Print Name: BRANDON MORRIS
Date: 9/14/2018

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		

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

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

Filing Fee	\$ <u>25</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>1024</u>

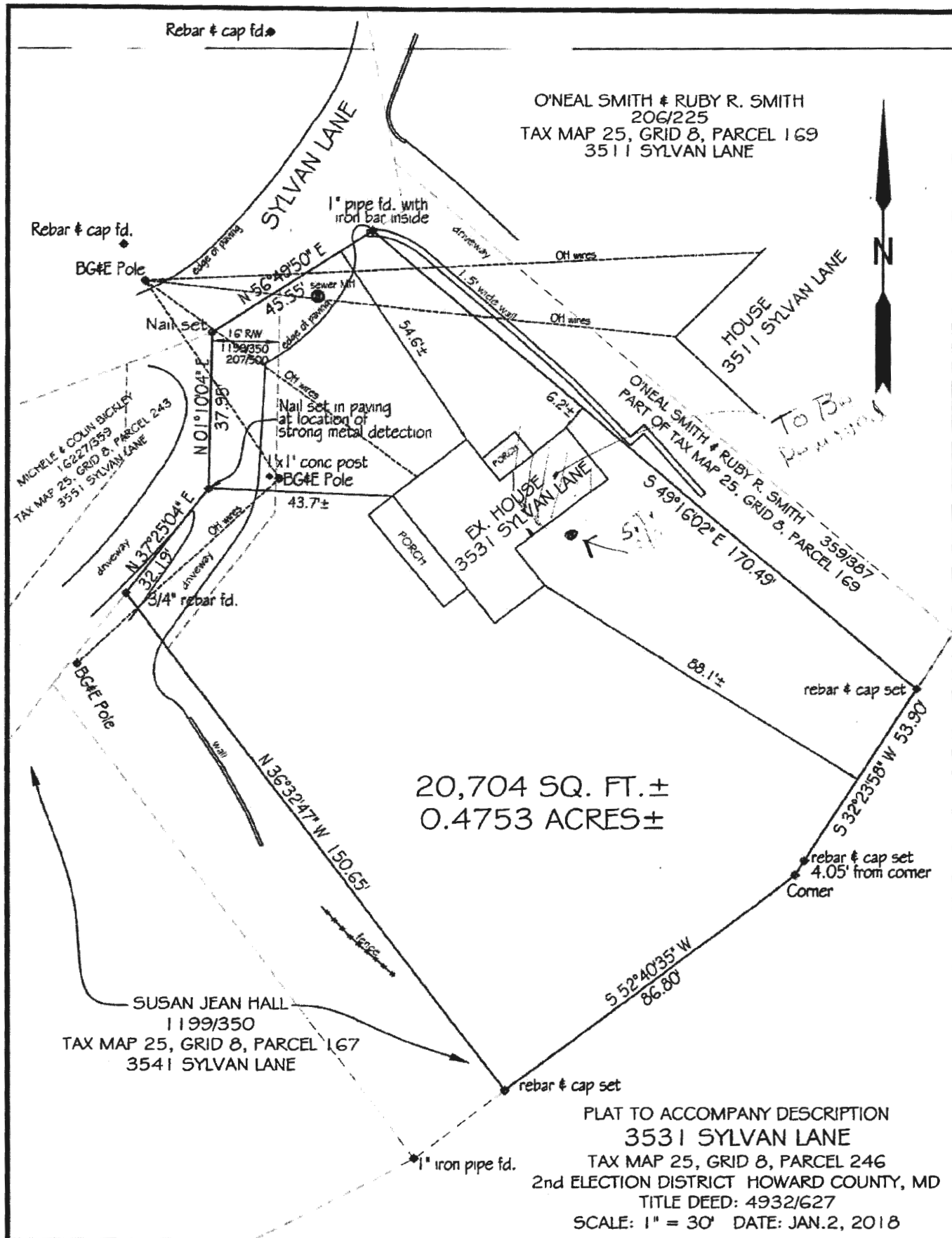
Distribution of Copies: White: Building Officials

Green: PSZA, Zoning

Yellow: PSZA, Engineering

Pink: Health

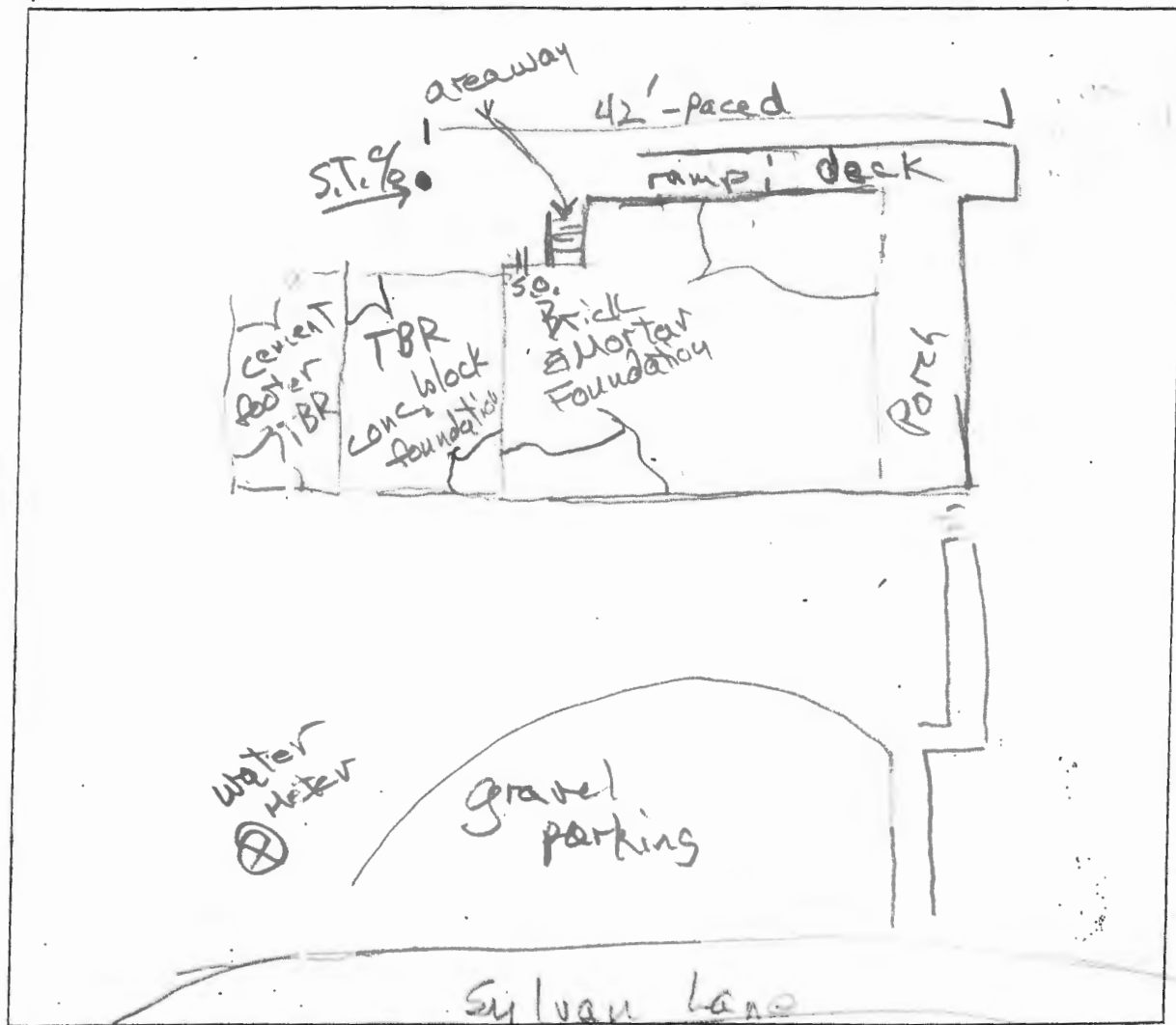
Gold: SHA



SITE INSPECTION SHEET

OWNER: Brandon Morris PHONE #: _____
ADDRESS: 3135 Sylvan Lane CONTRACTOR: Brandon Morris
WELL TAG #: sealed prior era
SUBDIVISION: _____ LOT: _____ COUNTY #: B18003376
PROPOSAL: Remove left side extension and construct addition at back (2-story). Connect to public sewer.

LOCATION DIAGRAM



COMMENTS:

After property is connected to sewer,
Search for Dry Well at end of Deck;
Pump septic tank and dry well, removing all solution;
Abandon septic tank and dry well sealing them with
DATE: 7/30/2021 INSPECTOR: R Bricker
clean earth materials. Will call for inspection,
septic system components abandoned 8/13/2021. reb