

SANDY SPRING 08/31/07

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3400 COUNTY HOUSE DRIVE ELICOTT CITY, MD 21043 (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-2800		HOWARD COUNTY PERMIT APPLICATION		PERMIT NUMBER B07003626	
Building Address <u>11811 Shepards Crossing</u> <u>Clarksville, 21029</u>			Property Owner's Name <u>David Campbell</u>		
Suite/Apt. #: _____ SDP/WP/Petition #: _____			Address <u>1811 Shepards XING</u>		
Census Tract _____ Subdivision <u>Chaple Woods</u>			City <u>Clarksville</u> State <u>MD</u> Zip Code <u>21029</u>		
Section _____ Area _____ Lot <u>20</u>			Home Phone _____ Work Phone _____		
Tax Map <u>29</u> Parcel <u>86</u> Grid <u>7</u>			Applicant's Name & Mailing Address, (if other than stated hereon): <u>T+A Contractors, Inc.</u>		
Zoning _____ Map Coordinates _____ Lot size _____			Phone <u>301-924-2111</u> Fax <u>301-549-4266</u>		
Existing Use <u>SF</u>			Contractor Company <u>T+A Contractors, Inc.</u>		
Proposed Use <u>Screened porch / 2 decks</u>			Contact Person <u>Jessica Carter</u>		
Estimated Construction Cost \$ <u>9,000</u>			Address <u>4512 Sandy Spring Rd.</u>		
Description of Work <u>Construct 25.4 x 14</u> <u>screenporch. Attach 2 open</u> <u>decks: 14 x 9 + 24 x 14 w/ landing</u> <u>& Steps to grade. Square ft. 812 ft.</u>			City <u>Burrowsville</u> State <u>MD</u> Zip Code <u>20810</u>		
Occupant or Tenant <u>property owner</u>			License No. <u>17489</u>		
Contact Name _____			Phone <u>301-924-2111</u> Fax <u>301-549-4266</u>		
Address <u>See Above</u>			Engineer or Architect Company _____		
City _____ State _____ Zip Code _____			Contact Person _____		
Phone _____ Fax _____			Address <u>N/A</u>		
City _____ State _____ Zip Code _____			City _____ State _____ Zip Code _____		
Phone _____ Fax _____			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: ☐ 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: <u>N/A</u> ☐ ☐ 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: _____ 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: _____ Dimensions: _____ Footings: _____ Roof Height: <u>350</u> ☐ 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: <u>N/A</u> ☐ ☐ 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.

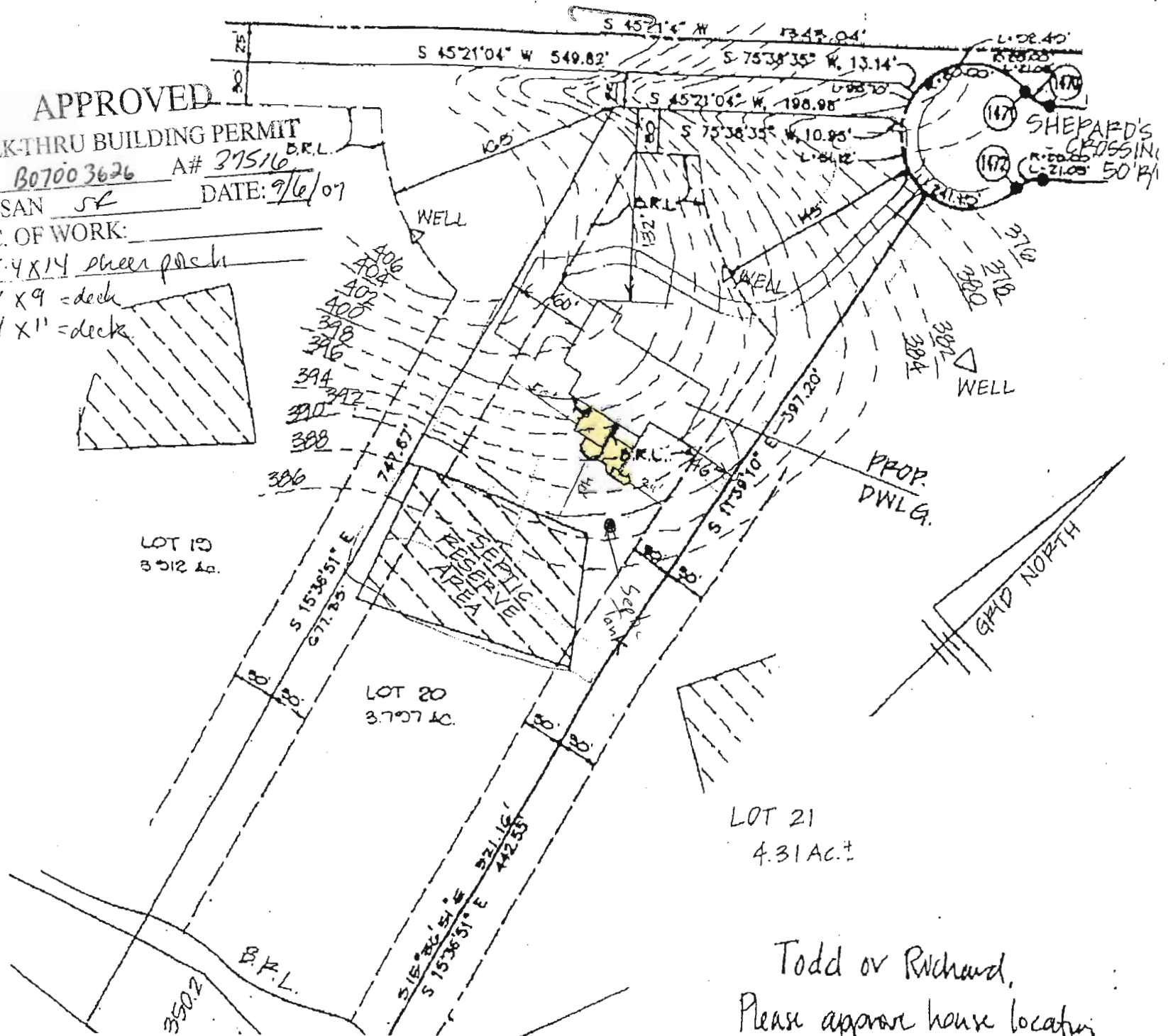
Jessica Carter
 Applicant's Signature
Agent / T+A Contractors, Inc
 Title/Company
015 06
 Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

Jessica CARTER
 Print Name
8/30/07
 Date

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#	
☒ Land Development, DPZ ☒ State Highways ☒ Building Official ☒ Dev. Engineering, DPZ ☒ Health ☒ Fire Protection	<u>9/6/07</u>	<u>[Signature]</u>	Front: _____ Rear: _____ Side: _____ Side St.: _____ All minimum setbacks met? YES ☐ NO ☐ Is Entrance Permit required? YES ☐ NO ☐ Historic District? YES ☐ NO ☐ Lot Coverage for NewTown Zone _____ SDP/Red-line approval date _____	Filing fee \$ <u>25.00</u> Permit fee \$ <u>193.00</u> Excise tax \$ _____ Add'l per. fee \$ <u>6.30</u> TOTAL FEES \$ <u>94.30</u> Sub-total paid \$ _____ Balance due \$ _____ Check # <u>3694</u> Validation # _____	<u>25.00</u> <u>193.00</u> <u>6.30</u> <u>94.30</u> <u>3694</u>
Is Sediment Control approval required prior to issuance? YES ☐ NO ☐			Accepted by <u>[Signature]</u>		
CONTINGENCY CONSTRUCTION START: ☐ ONE STOP SHOP: ☐			Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA		

WALK-THRU BUILDING PERMIT
BP# B07003626 A# 37516 ^{B.C.L.}
APP. SAN SK DATE: 9/6/07
DESC. OF WORK: _____

25.4 x 14 sheer porch
14 x 9 = deck
24 x 11 = deck



Todd or Richard,
Please approve house location