DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MO 21043
PERMITS (410) 313-3455 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800

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HOWARD COUNTY PERMIT APPLICATION

206001297

	000010	
Building Address 2730 SYKES U1=4E	ROAD Property Owner's Name MICHAEL D. LUZINS	
WEST FRIENDSHIP MD 2.	201	
	Address 2750 SYKES VILLE ROAD	
Suits/Apt. #: SDP/WP/Petition #: Census Tract Subdivision VOZNIAK	+ CALDER City WEST FRIENDSHIP State MD Zip Code 21794	
	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	
Section Area Lot Tax Map Parcel O3 - 281507	Applicate Name Of Address Of the Name of t	
Zoning Map Coordinates Lot size 3		
Existing Use FILE D SF D	Contractor Company MIKE LUZICAS	
Proposed Use POLL BARM	Contractor Company 7-17 KL 2021 34 3	
Estimated Construction Cost \$ &	Contact Person OWNER	
Description of Work CONSTRUCT 30	Address 2750 SYKE, JILLE RD.	
POLE BARN	City WEST FREE ODSHIP State MD Zip Code 21794	
18 18 18 18 18 18 18 18 18 18 18 18 18 1	License No.	
	Phone 418 -447 - 5528 Fax	
Occupant or Tenant OWNER	Engineer or Architect Company	
Contact Name Michia D	Contact Person	
Address 2 / 3 / 5 / 2 / 2 / / 2 / / 66/		
City Wash For OSHII State MD Zip Co	Address	
	City State Zip Code	
Phone 4/10 442-5528 Fax	Phone Fax	
BUILDING DESCRIPTION - COMMERC	BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics U	tilities <u>Building Characteristics</u> <u>Utilities</u>	
Height: Water Supply		
No. of stories:	1st floor:	
Sewage Disp Public	Public	
Gross area, sq. ft. per floor:	Basement:	
Electric Yes I	Crawl space □ Slab on Grade □ Electric Yes □ No □	
Use group: Gas Yes	□ No /□ Height:	
Heating Syste	Pm: No. of efficiency units: Flectric D Oil D	
Construction type: Electric Reinforced Concrete Natural Gas	I No. of 2 BR units: I Natural Gas Li	
Structural Steel Propane Gas Masonry		
Wood Frame Sprinkler sys		
Full Partial	Footings: Roof Height: NFPA #13D NFPA #13R Other:	
State Certified Modular Other S	suppression State Certified Modular ads Manufactured Home	
HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO	HORIZED TO MAKE THIS APPLICATION; (2)THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIA	
THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK	MICHAEL D. LUZIUS	
Applicant's Signature		
Title/Company	Print Name 7/11/2006 Date	
Checks payable	to: DIRECTOR OF FINANCE OF HOWARD COUNTY PLEASE WRITE NEATLY AND LEGIBLY. **	
AGENCY DATE SIGNATURE A		
Land Development, DPZ		
State Highways >Building Official	Reer: Permit fee \$	
Dev. Engineering, DPZ	Side St.: Add'l per. fee \$	
(Health 7/20/06 Sars)	All minimum setbacks met? TOTAL FEES \$	
Fire Protection / ' Is Sediment Control approval required prior to issuance?	YES INO II Sub-lotal paid \$	
YES D NO D	YES NO Check # 1507	
	Historic District? Validation #	
CONTINGENCY CONSTRUCTION START:	YES II NO II	
ONE STOP SHOP: Lot Coverage for NewTown Zone SDP/Red-line approval date Accepted by		
Distribution of Copies- White: Building Official Gr		

