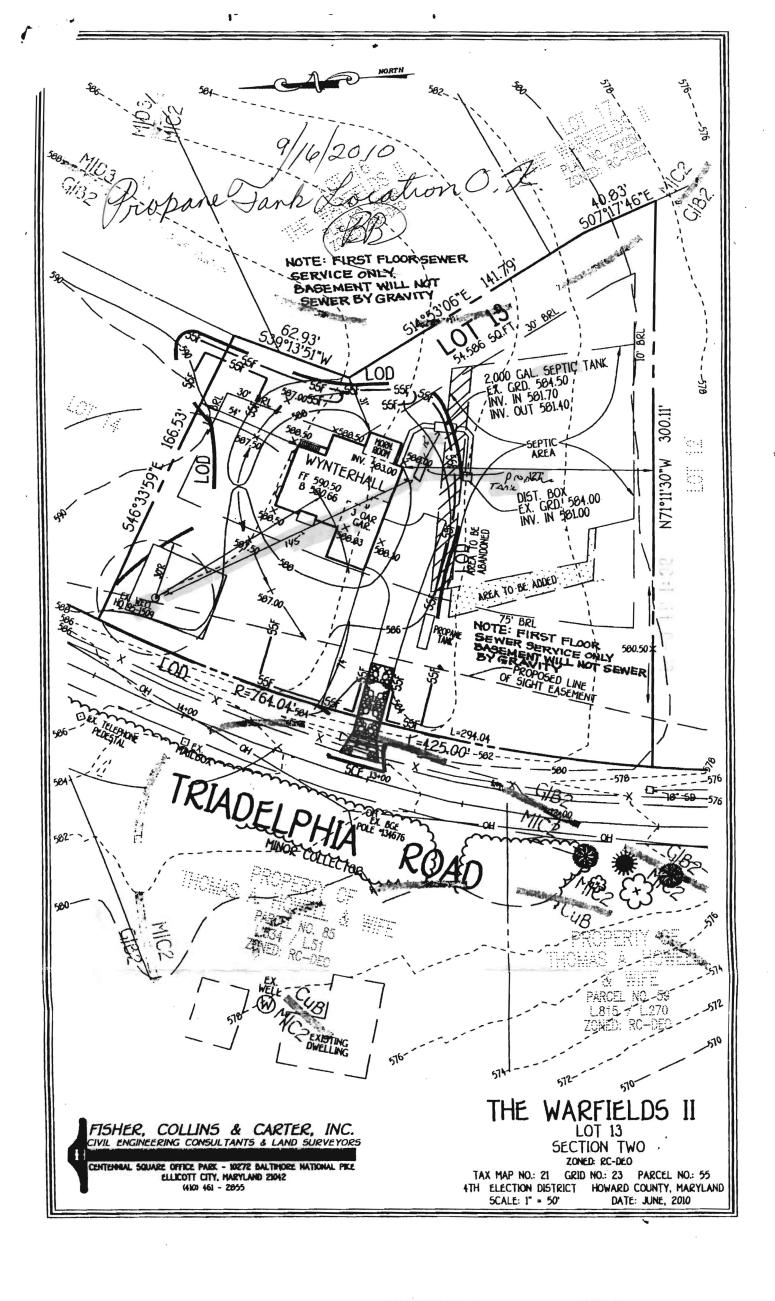
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

Rev. 11/4//04

PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800	PERMIT AF	PPLICATION	10003810
Building Address 14581	Tuddelohia pd	Property Owner's Name NVA Inc.	
" wind and zings		Address	
Suite/Apt. #: SDP/WP/		6085 marshalu	Dr
Census Tract Subdivision		City Elkinder State	and zin code 71075
SectionAreaLot		Home Phone Wo Applicant's Name & Mailing Address, (if of	ork Phone ther than stated hereon):
Tax Map Parcel Grid		JEREMU Clancy 7051 macheth way	
Zoning Map Coordinates Lot size		110 010 tep 1	Eldersburg and Zirsay
Existing Use		Contractor Company Valley Na	monel gases
Proposed Use Estimated Construction Cost \$	00	Contact Person	,
*		William Gree	y')
Description of Work		Address 7701 Mont	
intell a low got propose		CityStateZip Code 20794	
1 Frank		License No. Phone Fax	
Occupant or Tanant		11.9= 15.0' - (11)	
Occupant or Tenant		Engineer or Architect Company	
Contact Name		Contact Person	
Address		Address	
City State Zip Code			
Phone Fax		City State _	Zip Code
		Phone Fax	
BUILDING DESCRIPTI	ON - <u>COMMERCIAL</u>	BUILDING DESCRIP	TION - RESIDENTIAL
Building Characteristics	<u>Utilities</u>	Building Characteristics	<u>Utilities</u>
Height:	Water Supply:	SF Dwelling □ SF Townhouse □ Depth Width	Water Supply: Public
No. of stories:	Private	1st floor:	Private Sewage Disposal:
	Sewage Disposal: Public	2nd floor: Basement:	Public
Gross area, sq. ft. per floor:	Private	Finished Basement ☐ Unfinished Basement☐ Crawl space ☐ Slab on Grade ☐	Private
Use group:	Electric Yes □ No □ Gas Yes □ No □	No. of Bedrooms	Electric Yes ☐ No ☐ Gas Yes ☐ No ☐
	Heating System:	Multi-family dwellings:	Heating System:
Construction type: Reinforced Concrete	Electric Oil	No. of 1 BR units:	Electric Oil Natural Gas
Structural Steel	Natural Gas □ Propane Gas □	No. of 3 BR units:	Propane Gas □
Masonry Wood Frame	Sprinkler system: N/A	Other Structure: Dimensions:	Sprinkler system: N/A
A 1 4	Full Partial	Footings: Roof Height:	NFPA #13D NFPA #13R Other:
State Certified Modular	Other Suppression # of Heads	State Certified Modular	Other:
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOW	WS: (1) THAT HE/SHE IS ALTIHORIZED TO MAKE THIS ADI	Manufactured Home PLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SH	FWILL COMPLY WITH ALL RECHIATIONS OF
HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE			ATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIAL
1 A Can		Humy Cann	
Applicant's Signature	- Ed Son -	Print Name	THE OWNER OF THE OWNER,
Title/Company	Charles nameble to: DIRECTOR O	Date 5 NAMES OF USING PROCESSING	
	** PLEASE WRITE N	F FINANCE OF HOWARD COUNTY EATLY AND LEGIBLY. **	
AGENCY DATE	- FOR OFFI	CE USE ONLY - DPZ SETBACK INFORMATION	PROPERTY ID#:
Land Development, DPZ		Front: Fill	ng fee \$
State Highways Building Official			rmit fee \$
Dev. Engineering, DPZ	D- B.		d'i per. fee \$
Health 9/6/2010 Bruan Daker Fire Protection			TAL FEES \$
Is Sediment Control approval required prior to issuance?			b-total paid \$lance due \$
YES D NO D		YES D NO D Ch	eck #
CONTINGENCY CONSTRUCTION START:		Historic District? Va	lidation #
ONE STOP SHOP:		Lot Coverage for NewTown Zone	
Stability of Orallas		SDP/Red-line approval date	Accepted by
Distribution of Copies- White: Building	Official Green: LDD, DPZ	Yellow: DED, DPZ Pinic Health	Gold: SHA



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3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455
INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800
Building Address **HOWARD COUNTY** PERMIT NUMBER PERMIT APPLICATION Property Owner's Name
Address ON S
City | Control | S
Home Phone Triade State MD Work Phone SDP/WP/Petition #: Suite/Apt. #: Applicant's Name & Mailing Address, (if other than stated herein): Subdivision Kerwin Tax Map Parcel Grid Phone 43 Map Coordinates Lot Size Zoning Existing Use Vacant No Contractor Company Proposed Use Single temperature Estimated Construction Cost \$ Contact Person Address Description of Work New 2 City 4 State Zip Code 3 Car garage License No. Phone Fax bosement Occupant or Tenant Engineer or Architect Company Contact Name Contact Person Address Address City State Zip Code City_ State Zip-Code_ Fax BUILDING DESCRIPTION - COMMERCIAL BUILDING DESCRIPTION - RESIDENTIAL **Building Characteristics Building Characteristics** Water Supply: SF Dwelling SF Townhouse Depth Width Water Supply:
____Public Height: Depth 1st floor: 2nd floor: Public Private No. of stories: Private × Sewage Disposal: Sewage Disposal: 2nd floor: Basement: Gross area, sq. ft. per floor: Public Public Private Private Finished Basement

Unfinished Basement

Crawl space

Slab on Grade Use group: Electric Electric Yes □ No □ Yes □ No □ No. of Bedrooms _____ Construction type:
_____ Reinforced Concrete Gas Yes I No I Gas Yes D No D Multi-family dwellings: Structural Steel Heating System: Heating System: No. of efficiency units: Masonry Oil 🗆 Oil 🗆 Electric Electric 📮 No. of 1 BR units: Natural Gas Natural Gas □ Wood Frame No. of 2 BR units: Propane Gas Propane Gas -No. of 3 BR units: State Certified Modular Sprinkler system: N/A D NFPA #13D Sprinkler system: N/A □ Other Structure: Full Dimensions: NFPA #13R Partial Footings: _ Other Suppression Other: Roof: # of Heads State Certified Modular 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 Print Name **Email Address** Title/Company Date Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
PLEASE WRITE NEATLY AND LEGIBLY. - FOR OFFICE USE ONLY -PROPERTY ID # SIGNATURE APPROVAL **DPZ SETBACK INFORMATION** AGENCY Filing fee and Development, DPZ State Highways Rear: Permit fee Side: **Building Officials** Excise tax Dev. Engineering, DPZ Add'l per fee

TOTAL FEES \$ All minimum setbacks met? Fire Protection YES D NO D Sub-total paid \$ Is Entrance Permit Required? Is Sediment Control approval required prior to issuance? Balance due YES 🗆 NO 🗆 YES 🗆 NO D **Historic District?** Validation YES D NO D Lot Coverage for New Town Zone

CONTINGENCY CONSTRUCTION START:

□ ONE STOP SHOP:

White: Building Officials

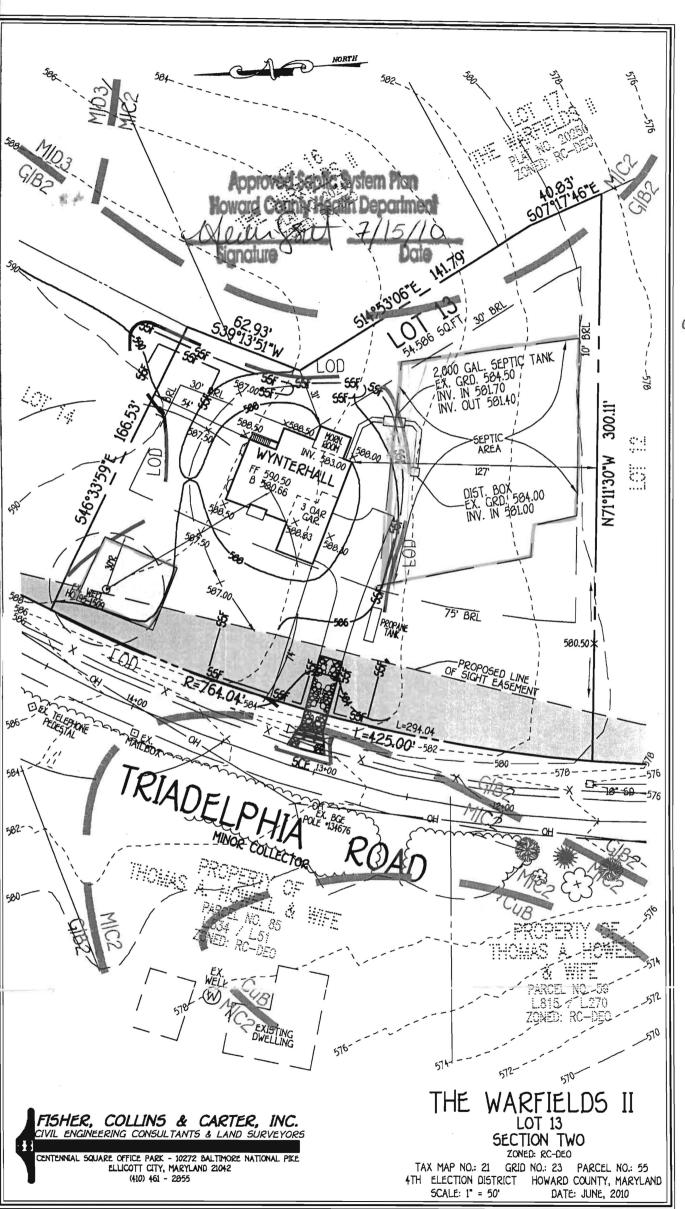
Green: LDD, DPZ

SDP/Red-line approval date

Yellow: DED, DPZ Pink: Health

Gold: SHA

Accepted by



diversity