Permits: 410-313-2455 Inspections: 410-313-1810 Automated Line: 410-313-3800 Howard County Building/Fire Permit Application Department of Inspections, Licenses & Permits

3430 Court House Drive Ellicott City, MD 21043

Permit Number: B11002028

Duilding Address. NI O.P.A.	1 thom I love			
Building Address:	Silva Coay	Property Owner's Name:	1 1 2	
	1	Address: 6905 Rockled	1	
Suite/Apt. #SDP,	/WP/BA #•	City: Bethesde State:	Zip Code:	
		Home Phone:	Work Phone:	
Census Tract:		Applicant's Name & Mailing Address	(If other than stated herein):	
Section:Are	ea:Lot:C	Applicant 3 Name & Maining Address	, (ii other than stated herein).	
Tax Map: Parcel:_	Grid:		Carol Viers	
	es:Lot Size:	Phone: F	ax:	
Existing Use: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	· ·	Email:	· · · · · · · · · · · · · · · · · · ·	
V		Contractor Company:		
Proposed Use: SFD Estimated Construction Cost: \$ 350,000		Contact Person:		
		Address:		
Description of Work:		City:State:	Zip Code:	
GETE IND	F 1 - 2 - 3	License No. :		
			Fax:	
		Email:		
Occupant or Tenant:	¥		<u> </u>	
Was tenant space previously occupied?	P □Yes □No	Engineer/Architect Company:		
Contact Name:	· · · · · · · · · · · · · · · · · · ·	Responsible Design Prof.:	<u> </u>	
Address:		Address:		
City:		City:State:		
		103		
Phone:		Phone:	4	
Email:	· · · · · · · · · · · · · · · · · · ·	Email:		
BUILDING DESCRIPT	TION - COMMERCIAL	BUILDING DESCRIP	PTION – RESIDENTIAL	
Building Characteristics	Utilities	Building Characteristics	Utilities	
Height:	Water Supply	☐ SF Dwelling ☐ SF Townhouse		
No. of stories:	☐ Public	Depth Width 1 st floor:	Public	
Gross area, sq. ft./floor:	☐ Private	2 nd floor:	☐ Private Sewage Disposal	
	Sewage Disposal	Basement: 74	☐ Public	
Area of construction (sq. ft.):	☐ Public	☑ Finished Basement	☐ Private	
	☐ Private	☐ Unfinished Basement	Electric: ☐ Yes ☐ No	
Use group:	Electric: ☐ Yes ☐ No	☐ Crawl Space	Gas:	
	Gas: ☐ Yes ☐ No	☐ Slab on Grade No. of Bedrooms:	Heating System ☐ Electric	
Construction type:	Heating System	Multi-family Dwelling	Oil	
☐ Reinforced Concrete	☐ Electric ☐ Oil	No. of efficiency units:	☐ Natural Gas	
☐ Structural Steel	☐ Natural Gas ☐ Propane Gas	No. of 1 BR units:	☐ Propane Gas	
☐ Masonry	<u>Sprinkler System:</u>	No. of 2 BR units:	<u> </u>	
☐ Wood Frame	□ N/A	No. of 3 BR units: Other Structure:	· · · · · · · · · · · · · · · · · · ·	
☐ State Certified Modular	□ Full	Dimensions:		
> Roadside Tree Project Permit	☐ Partial	Footings:	> Roadside Tree Project Permit	
☐Yes ☐No	Other Suppression	Roof:	□Yes □No	
Roadside Tree Project Permit #	No. of Heads:	☐ State Certified Modular	Roadside Tree Project Permit #	
West Control of the C		│ │ │	and the second s	
WITH ALL REGULATIONS OF HOWARD COUNTY V	ES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO VHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE VINTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROI	VILL PERFORM NO WORK ON THE ABOVE REFEREN	CED PROPERTY NOT SPECIFICALLY DESCRIBED IN	
	المراجعة ال المراجعة المراجعة ال	The same of the sa		
Email Address		ate		
Title/Company		The second secon		
	·			

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	1-21-1	Dang Bungre
Fire Protection		

Front:	,	
Rear:		
Side:		
Side St.:		
All minimum setbacks met?	☐ Yes	□No
Is Entrance Permit Required?	☐ Yes	□No
Historic District?	☐ Yes	□No
Lot Coverage for New Town Z	one:	
SDP/Red-line approval date:		

Filing Fee	\$ /1		
Permit Fee	\$		
Tech Fee	\$		
Excise Tax	\$		
PSFS	\$		
Guaranty Fund	\$		
Add'l per Fee	\$		
Total Fees	\$		
Sub- Total Paid	\$		
Balance Due	\$		
Gold: SHA	2017		

Distribution of Copies: White: Building Officials T:\Operations\Updated Forms\New building app 11.10.2010.docx

 $\ \square$ ONE STOP SHOP

Green: PSZA,Zoning

Yellow: PSZA,Engineering

Pink: Health

