



# 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.: \_\_\_\_\_

Building Address: 12640 TRIDELPHIA RD.

City: ELLICOTT State: MD. Zip Code: \_\_\_\_\_

Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_

Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_

Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_

Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: DECK

Proposed Use: DECK

Estimated Construction Cost: \$ 16000

Description of Work: ADD ONTO DECK 4'x11'  
4' WIDE STEPS TO GROUND

Occupant or Tenant: \_\_\_\_\_

Was tenant space previously occupied? ☐ Yes ☐ No

Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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

Property Owner's Name: CHARLES LANGMEAD

Address: 12640 TRIDELPHIA RD

City: ELLICOTT State: MD Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**Applicant's Name & Mailing Address, (if other than stated herein)**

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Contractor Company: ABSOLUTE

Contact Person: MIKE

Address: 1430 BARNHORN RD.

City: SYKESTOWN State: MD Zip Code: 21782

License No.: 131069

Phone: 410 443 3985 Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Engineer/Architect Company: \_\_\_\_\_

Responsible Design Prof.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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

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 \_\_\_\_\_

Date \_\_\_\_\_

Title/Company \_\_\_\_\_

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	<u>9/17/14</u>	<u>H. GOSWAMI</u>

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

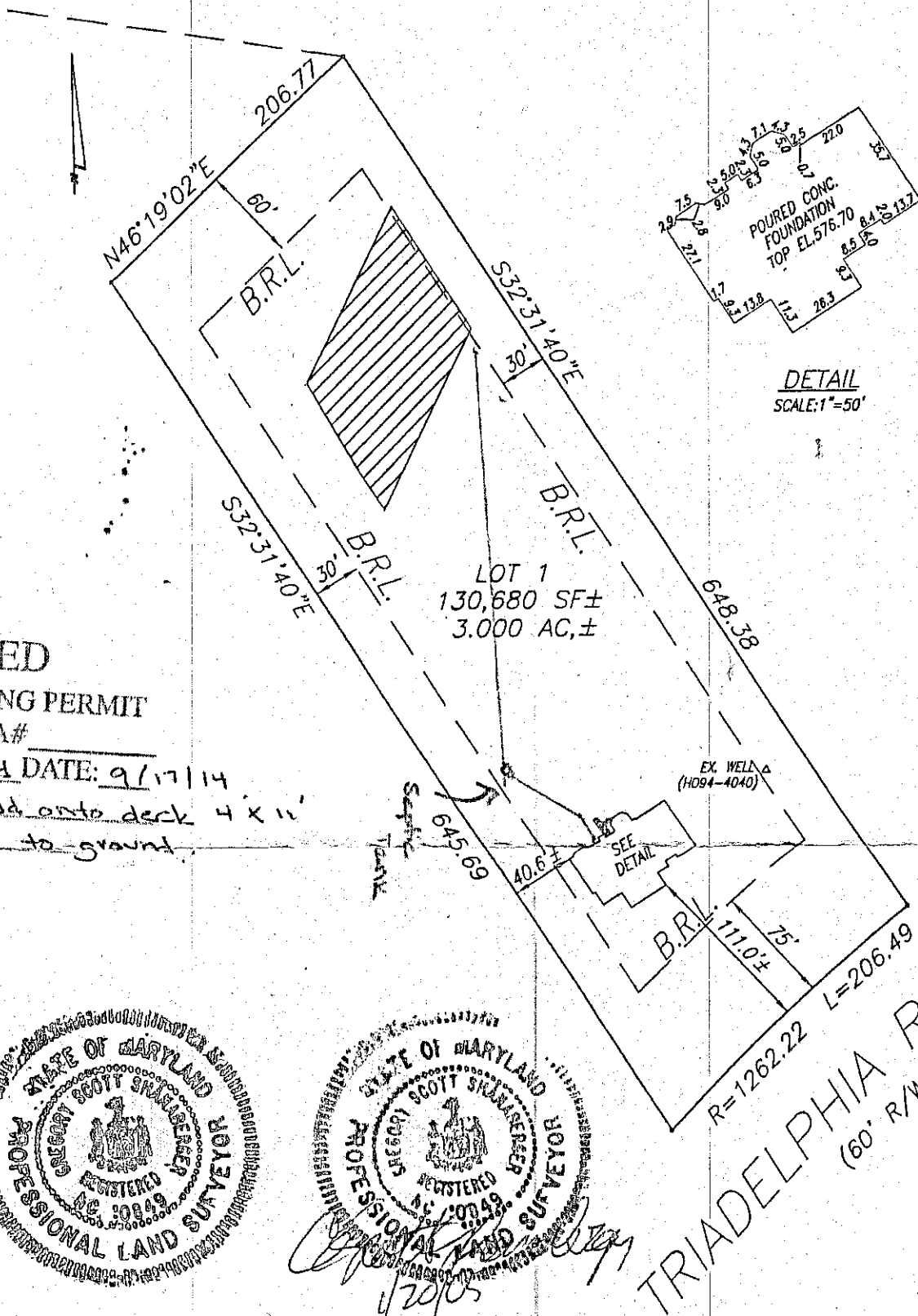
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot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

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

THE PROPERTY SHOWN HEREON  
LIES IN ZONE C AS SHOWN ON  
FLOOD INSURANCE RATE MAP  
NO: 240044 0021B  
DATED: DEC.4, 1986

# NOTES:

1. THIS PLAT IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING, OR REFINANCING.
2. THIS PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES BUILDINGS, POOLS, BUILDING ADDITIONS OR OTHER EXISTING OR FUTURE IMPROVEMENTS.
3. THIS PLAT DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING.
4. ACCURACY OF BUILDING MEASUREMENTS: 0.1'
5. ACCURACY OF SETBACK DIMENSIONS: 0.5'



## APPROVED

WALKTHRU BUILDING PERMIT

BP#

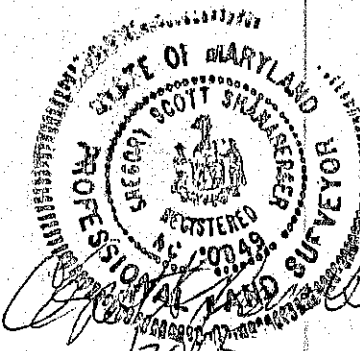
A#

APP. SAN

H. Oswald DATE: 9/17/14

DESC. OF WORK

Add onto deck 4' x 11'  
4' wide steps to ground



I HEREBY CERTIFY THAT I HAVE LOCATED  
THE IMPROVEMENTS AS SHOWN. THIS PLAT  
DOES NOT REPRESENT A BOUNDARY SURVEY  
AND CANNOT BE USED TO ESTABLISH  
PROPERTY LINES OR CORNERS.

*Gregory Scott Shanaberger*  
1/11/05

SHANABERGER & LANE  
8726 TOWN AND COUNTRY BLVD.  
SUITE 201  
ELLCOTT CITY, MD. 21043  
(410)461-9563 FAX:461-9693

LOCATION DRAWING

LOT 1

"TWIGG SUBDIVISION  
LOT 1"

(PLAT #8800)

ELECTION DISTRICT: 3RD

DEED REFERENCE: L.8878/F.114

COUNTY: HOWARD

SCALE: 1"=100'

DATE: JANUARY 17, 2005

DATE OF LATEST FIELD WORK: 1/11/05

8910LC.dwg

12640 Triadelphia Rd