DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3400 COURT HOUSE DRIVE ELLCOIT CITY, MO 21043 PERMITS (110) 313-3855 INSPECTIONS (410) 313-1610

## HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

_	PERMIT AP	PLICATION		,
Building Address 15600 Bo	Ashy PANKRd	Property Owner's Name	Jerry.	+ Lisa Honsberge
Woodbinz 21797		Address 15600 Bushy Park RL		
Suite/Apt. #: SDP/WP/Petition #:		-	1	
Census Tract Subdivision CAHAN RUN		city Woodh in z state Mdzip code 21797		
Section Area Lot		Home Phone 410-442-7716 Work Phone		
Tax Map Parcel Grid		Applicant's Name & Mailing Address, (if other than stated hereon):		
Zoning Map Coordinates /3-H/Lot size		Phone Fax		
Existing Use SFD		Contractor Company MANY Ingl. Pool 5		
Proposed Use SPD+ PCU Estimated Construction Cost \$ 25,000		Contact Person Joann Lathan		
Description of Work Inground Poul 23×39'				
in rear yard w/4		Address 9 515 Gew. g LAnz		
to code. Pool Fill	ed by Truck	City Columbia State M Zip Code 2/04/		
		Phone 410-915-4408 Fax		
Occupant or Tenant	mer	Engineer or Architect Company		
Contact Name		Contact Person		
Address		Address		
City State _	Zip Code			
Phone Fax		City	State	Zip Code
TIMIS FAX		Phone	Fax	
BUILDING DESCRIPTION	- <u>COMMERCIAL</u>	BUILDING DESCRIPTION - RESIDENTIAL		
Building Characteristics	<u>Utilities</u>	Building Characteri		<u>Utilities</u>
Height	Water Supply: Public	SF Dwelling  SF Townh  Depth	ouse 🗆   Width	Water Supply:Public
No. of stories:	Private	1st floor:		Private
1	Sewage Disposal:	2nd floor:	♡'	Sewage Disposal:
Gross area, so, ft. per floor:	Sewage Disposal: Public Private	2nd floor: 3 - 6	8'	Sewage Disposal: Publie Private
Gross area, sq. ft. per floor:	Public Private	Basement: Finished Basement  Unfinished Crawl space  Slab on Gravian	de □	Public Private  Electric Yes   No
Gross area, sq. ft. per floor:  Use group:	Public	Basement: Finished Basement   Crawl space   Slab on Gravino, of Bedrooms  Height: Multi-family dwellings:	de 🖸	Publie Private Electric Yes □ No □ Gas Yes □ No □
Use group:	Public Private  Electric Yes No Gas Yes No Heating System:	Basement: Finished Basement  Unfinish Crawl space  Slab on Grav No. of Bedrooms Hoight: Multi-family dwellings: No. of efficiency units: No. of 1 BR units:	de []	Public Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil
Use group:  Construction type: Reinforced Concrete	Public Private  Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra No. of Bedrooms Height: Multi-family dwellings: No. of efficiency units:	de []	Public Private  Electric Yes   No   Gas Yes   No   Heating System:
Use group:  Construction type: Reinforced Concrete Structural Steel	Public Private  Electric Yes No Gas Yes No Heating System:	Basement: Finished Basement   Finished Basement   Crawl space   Slab on Gravious  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:	de []	Public Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas
Use group:  Construction type: Reinforced Concrete	Public Private  Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: Cother Structure: Dimensions:	de []	Public Private  Electric Yes   No   Gas Yes   No    Heating System: Electric   Oil   Natural Gas   Propane Gas    Sprinkler system: N/A   NFPA #13D
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry	Public Private  Electric Yes No Gas Yes No Heating System: Electric Oil Natural Gas Propane Gas	Basement:  Finished Basement   Finished Basement   Crawl space   Slab on Grave  No. of Bedrooms  Height:  Multi-family dwellings:  No. of efficiency units:  No. of 1 BR units:  No. of 3 BR units:  Other Structure:	de []	Public Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry	Public Private  Electric Yes  No  Gas Yes No  Heating System: Electric Oil Natural Gas Propane Gas  Sprinkler system: N/A  Full	Basement:  Finished Basement   Crawl space   Slab on Gra  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:  Cther Structure:  Dimensions:  Footings:	de D	Public Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system:  NFPA #13D NFPA #13R
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular	Public Private  Electric Yes  No  Sas Yes No  Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A Full Partial Other Suppression # of Heads	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: Cther Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home	de D	Public Private  Electric Yes   No   Gas Yes   No    Heating System: Electric   Oil   Natural Gas   Propane Gas    Sprinkler system: N/A   NFPA #13D NFPA #13R Other:
Use group:  Construction type:  Reinforced Concrete  Structural Steel  Masonry  Wood Frame	Public Private  Electric Yes  No  Sas Yes No  Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A Full Partial Other Suppression # of Heads	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: Cther Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home	de D	Public Private  Electric Yes   No   Gas Yes   No    Heating System: Electric   Oil   Natural Gas   Propane Gas    Sprinkler system: N/A   NFPA #13D NFPA #13R Other:
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular	Public Private  Electric Yes  No  Sas Yes No  Heating System: Electric Oil Natural Gas Propane Gas Sprinkler system: N/A Full Partial Other Suppression # of Heads	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: Cther Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home	de D	Public Private  Electric Yes   No   Gas Yes   No    Heating System: Electric   Oil   Natural Gas   Propane Gas    Sprinkler system: N/A   NFPA #13D NFPA #13R Other:
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  THE UNDERSTONED HEREBY CERTIFIES HID AGREES AS FOLLOWS: HOWARD COUNTY WHICH ARE APPLICABLE THERETO (4) THAT HE THE RIGHT TO EMBER ONTO THIS PROPERTY FOR ITHE PURPOSE OF	Public Private  Electric Yes  No  Sas Yes No  Heating System: Electric Oil  Natural Gas Propane Gas Sprinkler system: N/A Sprinkler	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: Cither Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home UCATION; (2)THAT THE INFORMATION IS CORR REDICED PROPERTY NOT SPECIFICALLY DESCRIPTION.  Print Name  Date	IF  ECT; (3) THAT HE/SHE W.  IBED IN THIS APPLICATION  THIS APPLICATION	Public Private  Electric Yes   No   Gas Yes   No    Heating System: Electric   Oil   Natural Gas   Propane Gas    Sprinkler system: N/A   NFPA #13D NFPA #13R Other:
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  The understough hereby certifies And Agrees As FOLLOWS: HOWARD COUNTY WHICH ARE APPLICABLE THERETO (4) THAT HE THE RIGHT TO BYTHER ONTO THIS PROPERTY FOR THE PURPOSE OF Applicatur's Signature	Public Private  Electric Yes  No  Gas Yes No  Heating System: Electric Oil  Natural Gas Propane Gas  Propane Gas  Sprinkler system: N/A  Full Partial Other Suppression for Heads  (1) That Net/Set is authorized to Make this applies will perform No work on the Above Refer Respectives the Work Permitted and Positive No.	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: No. of 3 BR units: Cother Structure: Dimensions: Footings: Roof Height: State Certified Modula Manufactured Home Ucanok (2)That the Information is core Reduced Property Not specialcally descent Reduced Property Not specialcally descent Print Name  Date  FFINANCE OF HOWARD COLE EATLY AND LEGIBLY.**	IF  ECT; (3) THAT HE/SHE W.  IBED IN THIS APPLICATION  THIS APPLICATION	Public Private  Electric Yes   No   Gas Yes   No    Heating System: Electric   Oil   Natural Gas   Propane Gas    Sprinkler system: N/A   NFPA #13D NFPA #13R Other:
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  The understough hereby certifies And Agrees As FOLLOWS: HOWARD COUNTY WHICH ARE APPLICABLE THERETO (4) THAT HE THE RIGHT TO BYTHER ONTO THIS PROPERTY FOR THE PURPOSE OF Applicatur's Signature	Public Private  Electric Yes  No  Gas Yes No  Heating System: Electric Oil  Natural Gas Propane Gas  Propane Gas  Sprinkler system: N/A  Full Partial Other Suppression for Heads  (1) That Net/Set is authorized to Make this applies will perform No work on the Above Refer Respectives the Work Permitted and Positive No.	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra No. of Bedrooms Height: Multi-family dwellings: No. of efficiency units: No. of 1 BR units: No. of 3 BR units: No. of 3 BR units: Cother Structure: Dimensions: Footings: Roof Height: State Certified Modula Manufactured Home UCATION (ZITHAT THE INFORMATION IS CORR RENCED PROPERTY NOT SPECIFICALLY DESCR FOTICES.  Print Name  Date  FFINANCE OF HOWARD COLU	ECT; (3) THAT HEISHE WIBED IN THIS APPLICATION	Public Private  Electric Yes   No   Gas Yes   No    Heating System: Electric   Oil   Natural Gas   Propane Gas    Sprinkler system: N/A   NFPA #13D NFPA #13R Other:
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  The understrue hereby certifies And Agrees As FOLLOWS: THE RIGHT TO BYTER ONTO THIS PROPERTY FOR IMPERIORS OF Applicant's Signature  Applicant's Signature  Title/Company  AGENCY Land Development, DFZ	Public Private  Electric Yes  No  Gas Yes No  Heating System: Electric Oil  Natural Gas Propane Gas  Propane Gas  Propane Gas  No  Full Partial Other Suppression # of Heats  (1) That Ne/She is authorized to Make thas appressed in the Work Permitted and Positive in Partial Parti	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: Cither Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home Ucanok (2)That The Information is core Resided Property Not specifically described to the core.  Print Name  Date  FRINANCE OF HOWARD COLL ATLY AND LEGIBLY. **  EUSE ONLY  DET. SETBACK INF	ECT. (3) THAT HEISHE WISED IN THIS APPLICATION  INTY  CORMATION  FILING	Public Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   NFPA #13D   NFPA #13D   NFPA #13R   Other:  ALL COMPLY WITH ALL REGULATIONS OF MIX (6) THAT HE/SHE GRANT'S COUNTY OFFICIALS
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  The understand Hereby certifies this Agrees As FOLLOWS: HOWARD COUNTY WHICH ARE APPLYABLE THERETO (A) THAT HE THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF Applicant's Signature  Title/Company	Public Private  Electric Yes  No  Gas Yes No  Heating System: Electric Oil  Natural Gas Propane Gas  Propane Gas  Propane Gas  No  Full Partial Other Suppression # of Heats  (1) That Ne/She is authorized to Make thas appressed in the Work Permitted and Positive in Partial Parti	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: Cher Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home Ucanox (2)That THE INFORMATION IS CORR RESIDED PROPERTY NOT SPECIFICALLY DESCRIPTIONES.  Print Name  Date  FRINANCE OF HOWARD COLL SATLY AND LEGIBLY. ***  EUSE ONLY  DEZ SETBACK INF	ECT; (3) THAT HE/SHE WISED IN THIS APPLICATION  FIND PORTMATION PORTMATION	Public Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   NFPA #13D   NFPA #13D   NFPA #13R   Other:  ALL COMPLY WITH ALL REGULATIONS OF SM. (5) THAT HE/SHE GRANT'S COUNTY OFFICIALS
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  The understoned Heriest Certifies And Agrees As FOLLOWS: HOWARD COUNTY WHICH ARE APPLYABLE THERETO (4) THAT HE THE RIGHT TO BYTEE ONTO THIS PROPERTY FOR THE PURPOSE OF APPLICABLE SIGnature  Applicant's Signature  Title/Company  AGENCY Land Development, DF7 State Highways	Public Private  Electric Yes  No  Gas Yes No  Heating System: Electric Oil  Natural Gas Propane Gas  Propane Gas  Propane Gas  No  Full Partial Other Suppression # of Heats  (1) That Ne/She is authorized to Make thas appressed in the Work Permitted and Positive in Partial Parti	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: Cther Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home UCATION (2)THAT THE INFORMATION IS CORR RENCED PROPERTY NOT SPECIFICALLY DESCRIPTION AND LEGIBLY.  Print Name  Date  FRINANCE OF HOWARD COLE CATLY AND LEGIBLY.  DPZ SETBACK INF Front: Reser: Side: Side St.:	INTY  CORMATION  Filing  Portit  Exci.  Add	Public  Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   NFPA #13D   NFPA #13D   NFPA #13R   Other:  ILL COMPLY WITH ALL REGULATIONS OF SM (5) THAT HE/SHE GRANT'S COUNTY OFFICIALS  PROPERTY ID:    Get   Propane Gas
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  The understoned Hereby Certifies And Agrees As FOLLOWS: HOWARD COUNTY WHICH ARE APPLYABLE THERETO (4) THAT HE THE RIGHT TO BYTER ONTO THIS PHAPERTY FOU INTERPURPOSE OF Applicant's Signature  Applicant's Signature  Title/Company  AGENCY DATE Land Development DPZ State Highways Building Official	Public Private  Electric Yes  No  Gas Yes No  Heating System: Electric Oil  Natural Gas Propane Gas  Propane Gas  Propane Gas  No  Full Partial Other Suppression # of Heats  (1) That Ne/She is authorized to Make thas appressed in the Work Permitted and Positive in Partial Parti	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: Cither Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home Ucanok (2)That The Information is correctly Reside PROPERTY NOT SPECIFICALLY DESCRIPTION ATTENANCE OF HOWARD COLE EATLY AND LEGIBLY.**  Date Frint Name  Date Front: CE USE OMLY.  DPZ SETBACK INF Front: Resir: Side: Side St: All minimum setbacks met?	ECT; (3) THAT HE/SHE WINED IN THIS APPLICATION FILING PORTITY  EXCELLENT Add TOT	Public  Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   NFPA #13D   NFPA #13D   NFPA #13R   Other:  ILL COMPLY WITH ALL REGULATIONS OF SX (5) THAT HE/SHE GRANTS COUNTY OFFICIALS  PROPERTY ID:  The Same Grant Score State
Use group:  Construction type:  Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  The understoned Hereby Certifies who Agrees As Follows: HOMARIO COUNTY WHICH ARE APPLY ASIE THE PETO (A) THAT HE THE RIGHT TO BYTER ONTO THIS PROPERTY FOR IMPROVINGES OF THE PETO (A) THAT HE THE RIGHT SIGNATURE APPLICANT SIGNATURE  Applicant's Signature  Title/Company  AGENCY Land Development. DFZ  Strip Highways Building Official Day, Engineering, DFZ  Health Fire Protection Is Sediment Control approved required prior to	Public Private  Electric Yes  No  Gas Yes No  Heating System: Electric Oil  Natural Gas  Propane Gas  Sprinkler system: N/A  Sprinkler Suppression  Sprinkler Suppression  Sistem: N/A  Sprinkler Suppression  S	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: Cther Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home UCATION (2)THAT THE INFORMATION IS CORR RENCED PROPERTY NOT SPECIFICALLY DESCRIPTION AND LEGIBLY.  Print Name  Date  FRINANCE OF HOWARD COLE CATLY AND LEGIBLY.  DPZ SETBACK INF Front: Reser: Side: Side St.:	ECT. (3) THAT HE SHE WINE WINTY  FORMATION FILING POINT EXCEL Add TOT Sub-	Public  Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   NFPA #13D   NFPA #13D   NFPA #13R   Other:  ILL COMPLY WITH ALL REGULATIONS OF SM (5) THAT HE/SHE GRANT'S COUNTY OFFICIALS  PROPERTY ID:    Get   Propane Gas
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  The INDERSTRUED HEREBY CERTIFIES AND AGREES AF POLLOWS: HOWARD COUNTY WHICH ARE APPLY ABLE THERETO (4) THAT HE THE RIGHT TO BYTER ONTO THIS PROPERTY FOR IMPROVINGE OF THE POLYMONS OF THE PO	Public Private  Electric Yes  No  Gas Yes No  Heating System: Electric Oil  Natural Gas  Propane Gas  Sprinkler system: N/A  Sprinkler Suppression  Sprinkler Suppression  Sistem: N/A  Sprinkler Suppression  S	Basement:  Finished Basement    Unfinish Crawl space    Slab on Gra No. of Bedrooms Height: Multi-family dwellings: No. of efficiency units: No. of 1 BR units: No. of 3 BR units: No. of 3 BR units: Cither Structure: Dimensions: Footings: Roof Height: State Certified Modula Manufactured Home UCANOK (ZITHAT THE INFORMATION IS CORR RENCED PROPERTY NOT SPECIFICALLY DESCRIPTION Print Name  Date  FFINANCE OF HOWARD COU- CATLY AND LEGIBLY.  DET SETBACK INF Front: Reser: Side: Side: St. All minimum setbacks met? YES □ NO □ Is Entrance Permit I YES □ NO □	ECT. (3) THAT HE/SHE WISED IN THIS APPLICATION FISION FISION Pour Excla Add' TOT Sub- sequired? Balls Check	Public  Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   NFPA #13D   NFPA #13R   Other:  AL COMPLY WITH ALL REGULATIONS OF DIA (5) THAT HE/SHE GHANT'S COUNTY OFFICIALS  PROPERTY ID:    Test   Gas   County   Coun
Use group:  Construction type:  Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  The understoned Hereby Certifies who Agrees As Follows: HOMARIO COUNTY WHICH ARE APPLY ASIE THE PETO (A) THAT HE THE RIGHT TO BYTER ONTO THIS PROPERTY FOR IMPROVINGES OF THE PETO (A) THAT HE THE RIGHT SIGNATURE APPLICANT SIGNATURE  Applicant's Signature  Title/Company  AGENCY Land Development. DFZ  Strip Highways Building Official Day, Engineering, DFZ  Health Fire Protection Is Sediment Control approved required prior to	Public Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   Full Partial Other Suppression # of Heads  (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLIES WHEN THE MOORE REFERENCE HER SPECTING THE WORK PERMITTED AND POSTING WITH PROPERTY PLEASE WRITE NE FOR OFFI	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra No. of Bedrooms Height: Multi-family dwellings: No. of efficiency units: No. of 1 BR units: No. of 3 BR units: No. of 3 BR units: Cither Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home ULANDOK, Cythat The Information is corr Renced PROPERTY NOT SPECIFICALLY DESCRIPTION Print Name  Date  FFINANCE OF HOWARD COU- CATLY AND LEGIBLY.  DFZ SETBACK INF Front: Reser: Side: Side: St.: All minimum setbacks met? YES □ NO □ Is Entrance Permit in	ECT. (3) THAT HE/SHE WISED IN THIS APPLICATION FISION FISION Pour Excla Add' TOT Sub- sequired? Balls Check	Public  Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   NFPA #13D   NFPA #13R   Other:  ALCOMPLY WITH ALL REGULATIONS OF SX (5) THAT HE/SRE GRANTS COUNTY OFFICIALS  PROPERTY IDS: I fee
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  The understough Hereby Certifies you agrees as Follows: Howard County welch are applying the Hereby (of) that he the right to brief not only	Public Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   Full Partial Other Suppression # of Heads  (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLIES WHEN THE MOORE REFERENCE HER SPECTING THE WORK PERMITTED AND POSTING WITH PROPERTY PLEASE WRITE NE FOR OFFI	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: Cither Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home Ucanok (2)That The Information is core Reside Property Not specifically described to the core.  Print Name  Date  Print Name  Date  FINANCE OF HOWARD COLL ATLY AND LEGIBLY.  Side St.: All minimum setbacks met? YES □ NO □ Is Entrance Permit 1 YES □ NO □ Is Entrance Permit 1 YES □ NO □ List Coverage for NewTown Zon	ECT. (3) THAT HE SHE WISED IN THIS APPLICATION FILID FORMATION FILID POINT Exclid Addi Addi Addi Addi Addi Addi Addi A	Public  Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   NFPA #13D   NFPA #13R   Other:  AL COMPLY WITH ALL REGULATIONS OF DIA (5) THAT HE/SHE GHANT'S COUNTY OFFICIALS  PROPERTY ID:    Test   Gas   County   Coun
Use group:  Construction type: Reinforced Concrete Structural Steel Masonry Wood Frame  State Certified Modular  The indepsioned Hereby certifies his agrees as follows: Howard County which are applyable themerof (d) that he the right to enter our ones playerry routine purpose of Applicant's Signature  Applicant's Signature  Title/Company  AGENCY DATE Land Development. DPZ State Highways Building Official Dev. Engineering. DPZ Health Tes Protection Is Sediment Control approved required prior to YES D' NO D  CONTINGENCY CONSTRUCTION	Public Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   Full Partial Other Suppression # of Heads  (1) THAT NE/SHE IS AUTHORIZED TO MAKE THIS APP ISSE WILL PERFORM NO WORK ON THE ABOVE REFE RESPECTING THE WORK PERIMITED AND POSITIVE NET PLEASE WRITE NET POR OFFICE SIGNATURE APPROVAL	Basement:  Finished Basement  Unfinish Crawl space  Slab on Gra 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: No. of 3 BR units: Cither Structure: Dimensions: Footings: Roof Height:  State Certified Modula Manufactured Home UCATION (2)THAT THE INFORMATION IS CORR RESIDED PROPERTY NOT SPECIFICALLY DESCRIPTION OTICES.  Print Name  Date  Print Name  Date  FINANCE OF HOWARD COLITICALLY ALLY AND LEGIBLY.  SIGH St.: All minimum setbacks met? YES IND II Is Entrance Permit 1 YES IND II Lot Coverage for NewTown Zon SOP/Red-line approval data.	ECT. (3) THAT HE SHE WISED IN THIS APPLICATION FILID FORMATION FILID POINT Exclusion Addi Addi Addi Addi Addi Addi Addi Add	Public  Private  Electric Yes   No   Gas Yes   No   Heating System: Electric   Oil   Natural Gas   Propane Gas   Sprinkler system: N/A   NFPA #13D   NFPA #13R   Other:  AL COMPLY WITH ALL REGULATIONS OF DIA (5) THAT HE/SHE GHANT'S COUNTY OFFICIALS  PROPERTY ID:    Test   Gas   County   Coun

DEPARTMENT OF INSPECTIONS, UCENSES AND PERMITS
3400 COURT HOUSE DRIVE
ELLICOTT COTY, 400 21043
PERMITS (410) 313, 3455 INSPECTIONS (410),313,1810
AUTOMATED INFORMATION (430) 313,34800

## HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

Building Address 8214 El Ko	Dr	Property Owner's Name Jerny+Lisa Honsberge		
Ellicutt City 21043		Address Con A. Bush		
Suite/Apt. #:   SDP/WP/Petition #:		Woodbins 21797		
Census Tract Subdivision Caltai Run		City Chirola Cal State Md Zip Code 21043		
Section Area Lot		Home Phone 110-442-7716 Work Phone Applicant's Name & Mailing Address, (if other than stated hereon):		
Tax Map Parcel Grid		A Abricant a Marine a maring / 22 octob	5215/ 11/21/ 5/21/5/	
Zoning Map Coordinates 13-1	Lot size	Phone Fax		
Existing Use SFP		Contractor Company MARY 1902 Pouls		
Proposed Use SPD+(Po-1) Estimated Construction Cost \$ 25,006		Contact Person JOAnn LAtham		
Description of Work Inground Pod 23x 39		Aut 1		
in rear vary w/48" high Fence		Address 4515 beru	ng CA	
to code. Pool Filled by Truck		City Co   1/1 9 - State Zip Code 21 0 46  License No. 1/6 9 9  Phone 410 - 49 5 - 1/6 60 Fax		
Occupant or Tenant		Engineer or Architect Company		
Contact Name		Contact Person		
Address				
City State Zip Code		Address		
		CityStateZip Code		
Phone Fax		Phone Fax		
BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL		
Building Characteristics	<u>Utilities</u>	Building Characteristics	<u>Utilities</u>	
Height:	Water Supply: Public	SF Dwelling	Water Supply: Public	
No. of stories:	Private Sewage Disposal:	1st floor:	Frivate Sewage Disposal:	
Gross area, sq. ft. per floor:	Public Private	Basement:  Finished Basement □ Unfinished Basement	Public Private	
Use group:	Electric Yes □ No □ Gas Yes □ No □	Crawl space  Slab on Grade  No. of Bedrooms Height:	Electric Yes □ No □ Gas Yes □ No □	
	Heating System:	Multi-family dwellings: No. of efficiency units:	Heating System:	
Construction type: Reinforced Concrete	Electric  Oil  I	No. of 1 BR units: No. of 2 BR units:	Electric  Oil  Natural Gas  O	
Structural Steel Masonry	Propane Gas □	No. of 3 BR units: Other Structure:	Propane Gas	
Wood Frame	Sprinkler system: N/A	Dimensions: Footings:	Sprinkler system: N/A  NFPA #13D	
Charles O self-self-self-self-self-self-self-self-	Full Partial	Roof Height:	NFPA #13R Other:	
State Certified Modular	Other Suppression # of Heads	State Certified Modular Manufactured Home		
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: HOWARD COUNT WHICH ARE APPLICABLE THEREFO; (8) THAT HE/ THE RIGHT TO ENTER ONTO THIS PROJECTLY FOR THE BURPOSE OF	.] (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPI /SHE WILL PERFORM NO WORK ON THE ABOVE REFE!	LICATION; (2)THAT THE INFORMATION IS CORRECT; (3) THAT HE/S RENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPL	SHE WILL COMPLY WITH ALL REGULATIONS OF ICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS	
THE RIGHT TO ENTER ONTO THIS PROJECTLY FOR THE SURPOSE OF	INSPECTING THE WORK PERMITTED AND POSTING N	otices. J. Latham		
Applicart's Signature		Print Name		
Title/Company		11-2-06 Date		
<u> </u>	** PLEASE WRITE NE	F FINANCE OF HOWARD COUNTY EATLY AND LEGIBLY. ** INSE ONLY -		
AGENCY DATE Land Development, DPZ	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:	
State Highways		Rear	Permit fee \$	
			Excise tex S	
Health		AND ASSESSMENT OF THE PARTY OF	TOTAL FEES \$	
Fire Protection			Sub-total peid \$	
Is Sediment Control approval required prior to issuance? YES D. NO. D.			Balance due \$	
			/alidation #	
CONTINGENCY CONSTRUCTION START:  ONE STOP SHOP:		YES O NO O		
Distribution of Copies- White: Building Official Green: LDD; DPZ		Lot Coverage for NewTown Zons	是1000年的1000年的1000年201日日	
		Lot Coverage for NewTown Zons SDP/Red-line approval date Yéllow: DED, DPZ Pink: Health	Accepted by	

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 B00147243

Building Address 15600 Bughy Park Del		Property Owner's Name JERRY & LISA / DISBERGEN			
Woodbire MO 21794		Address 15 600 Bushy Park Da.			
Suite/Apt. #: SDP/WP/Petition #:		City Woodby State MD Zip Code 21794			
Census Tract Subdivision		Home Phone Was Work Phone			
Section Area	Lot	Litera It to make			
Tax Map Parcel Grid		Extended, 116 36 -			
Zoning Map Coordinates	Lot size		Phone At 159 191 Fax VIII - 1914 1/2019		
Existing Use Proposed Use			Contractor Company		
Proposed Use		Contact Person	Contact Person Dovid Limbary		
Description of Work Costonel 12 12 46 Bullinose		Address The Land			
5/yh Sour hom. 14 2 4 1.1 1 8 4		City State	City State Zip Code Zip Code		
Trought deal Stepe to	more Report STO	Phone Proceedings of the Parks	Phone Phone 1251 - 186 Fax And 15 16 16		
Occupant or Tenant		Engineer or Architect Company			
Contact Name		Contact Person			
Address		Address			
City State		City State	e Zip Code		
Phone Fax		Phone	Fax		
BUILDING DESCRIPTION -	COMMERCIAL	BUILDING DESCRIPTION	N - <u>RESIDENTIAL</u>		
Building Characteristics	<u>Utilities</u>	Building Characteristics	<u>Utilities</u>		
Height:	Water Supply: Public	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	Private		
Use group:	Electric Yes \( \text{No} \) \( \text{D} \)  Gas Yes \( \text{No} \) \( \text{D} \)	Crawl space ☐ Slab on Grade ☐ No. of Bedrooms	Electric Yes \( \text{No} \) \( \text{Gas} \) \( \text{Yes} \) \( \text{No} \) \( \text{D} \)		
	Heating System:	Multi-family dwellings: No. of efficiency units:	Heating System: Electric □ Oil □		
Construction type: Reinforced Concrete	Electric □ Oil □ Natural Gas □	No. of 1 BR units:  No. of 2 BR units:  No. of 3 BR units:	Natural Gas ☐ Propane Gas ☐		
Structural Steel Masonry	Propane Gas	Other Structure:			
Wood Frame	Sprinkler system: N/A	Dimensions: Footings:	Sprinkler system: N/A  NFPA #13D		
	Full   Partial	Roof:	NFPA #13R Other:		
State Certified Modular	Other Suppression # of Heads	State Certified Modular Manufactured Home			
THE UNDERSHINED HERBBY CERTIFIES AND AGREES AS FOLLOWS: (1 COUNTY WHICH ARE APPLICABLE THERETO, (4) THAT HE/SHE WILL P ENTER ONTO THIS PROPERTY FOR THE PURITYSE OF INSPECTING THE W	FREORM NO WORK ON THE ABOVE REFERENCED I				
į.		Down J. Lom	and right staff hims		
Applicant's Signature		Print Name 6/4/03			
Title/Company		Date	t or		
	** PLEASE WRITE N	OF FINANCE OF HOWARD COUNTY EATLY AND LEGIBLY. **	A STATE OF THE STA		
AGENCY DATE	- FOR OFF SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:		
Land Development, DPZ			Filing fee \$		
State Highways Building Official	X - 2 -		Permit fee \$Excise tax \$		
Dev, Engineering, DPZ	Ma	Side St.:	Add'I per, fee \$		
Fire Protection			TOTAL FEES \$ / ) Sub-total paid \$		
Is Sediment Control approval required prior to issuance?		Is Entrance Permit required?	Balance due \$		
YES 🗆 NO 🗆			Check # <u>72664</u> Validation #		
CONTINGENCY CONSTRUCTION START: ☐ CONTINGENCY CONSTRUCTION START: ☐ CONTINUE STOP SHOP: ☐ CONTINUE START: ☐ CONTINUE ST		YES D NO D			
		Lot Coverage for NewTown ZoneSDP/Red-line approval date			
		Vellow: DED DD7 Pink: Health			

