



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: 5/19/15

Permit No.: B15001929

Building Address: 13608 MITCHELLS WAY
City: NE TOWNSHIP State: MD Zip Code: 21094
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: CHAPLE HILL II
Section: _____ Area: _____ Lot: 11
Tax Map: 0015 Parcel: 0119 Grid: 0007
Zoning: _____ Map Coordinates: _____ Lot Size: 48,857

Existing Use: VACANT LOT
Proposed Use: STD
Estimated Construction Cost: \$ 350,000
Description of Work: "CHAPLE HILL" w/
3 CAR GARAGE, PARTIALLY FINISHED
CEMENT 50' D

Occupant or Tenant: N/A
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: Spring Mill LLC
Address: P.O. Box 417, 6930 Ball Mill Pike
City: THURSDAY CITY State: MD Zip Code: 21094
Phone: 410-442-4344 Fax: 410-750-1147
Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: Atlantic Home, LLC
Address: 1115 SHARPLEY COURT
City: THURSDAY CITY State: MD Zip Code: 21094
Phone: 410-442-2211 Fax: 410-442-2215
Email: frank@atlantic-home.com

Contractor Company: Atlantic Home, LLC
Contact Person: FRANK E. KOLMAN, III
Address: 1115 SHARPLEY COURT
City: THURSDAY CITY State: MD Zip Code: 21094
License No.: 13853131 / BLDG # 410
Phone: 410-442-2211 Fax: 410-442-2215
Email: frank@atlantic-home.com

Engineer/Architect Company: HUMPHREYS KRAM ARCHITECTS
Responsible Design Prof.: Lisa Vanden
Address: 1415 N. MOUNTAIN ROAD
City: THURSDAY CITY State: MD Zip Code: 21094
Phone: 410-442-2211 Fax: 410-750-1123
Email: lisa@hkram.com

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
Area of construction (sq. ft.):	2 nd floor:	
Use group:	Basement:	
Construction type:	<input checked="" type="checkbox"/> Finished Basement <u>PARTIAL</u>	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement	
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space	
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Wood Frame	No. of Bedrooms: <u>5</u>	
<input type="checkbox"/> State Certified Modular	Multi-family Dwelling	
<input type="checkbox"/> Roadside Tree Project Permit	No. of efficiency units:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	No. of 1 BR units:	
Roadside Tree Project Permit #	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
	Footings:	
	Roof:	
	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>615009162</u>	
Building Shell Permit Number:	

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: Frank E. Kolman, III
Email Address: frank@atlantic-home.com
Title/Company: Atlantic Home, LLC

Print Name: FRANK E. KOLMAN, III
Date: 5/19/15

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>6/22/2015</u>	<u>[Signature]</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	\$ <u>100</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ <u>50.00</u>
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>21501</u>

