



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: 12869 Lime Kiln Road
 City: Highland State: MD Zip Code: 20777
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Jason Peay
 Address: 12869 Lime Kiln Road
 City: Highland State: MD Zip Code: 20777
 Phone: 301-395-8341 Fax: _____
 Email: jpeay@versatecinc.com

Existing Use: _____
 Proposed Use: _____
 Estimated Construction Cost: \$ 100,000
 Description of Work: Build in unfinished Basement
Full Bathroom, media room, game room, gym
utility room, play room, sitting room, gallery.
approx. 2150 SF
 Occupant of Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Adam August
 Address: 9050 Red Branch Rd. Unit I
 City: Columbia State: MD Zip Code: 21045
 Phone: _____ Fax: _____
 Email: tommchale@clarksvileconstruction.net

Contractor Company: Clarksville Construction Services
 Contact Person: Tom McHale
 Address: 9050 Red Branch Rd. Unit I
 City: Columbia State: MD Zip Code: 21045
 License No.: 78947
 Phone: 4433863099 Fax: _____
 Email: tommchale@clarksvileconstruction.net

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

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:	
<u>2150 SF</u>	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
<u>2150 SF</u>	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
	<input type="checkbox"/> Slab on Grade	
Construction type:	No. of Bedrooms:	
<input type="checkbox"/> Reinforced Concrete	Multi-family Dwelling	
<input type="checkbox"/> Structural Steel	No. of efficiency units:	
<input type="checkbox"/> Masonry	No. of 1 BR units:	
<input type="checkbox"/> Wood Frame	No. of 2 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Roof:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> State Certified Modular	
Roadside Tree Project Permit #	<input type="checkbox"/> Manufactured Home	

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

Thomas McHale
 Applicant's Signature
 tommchale@clarksvileconstruction.net
 Email Address
 Project Manager
 Title/Company

Thomas C McHale
 Print Name
 4/27/16
 Date

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY
-FOR OFFICE USE ONLY-

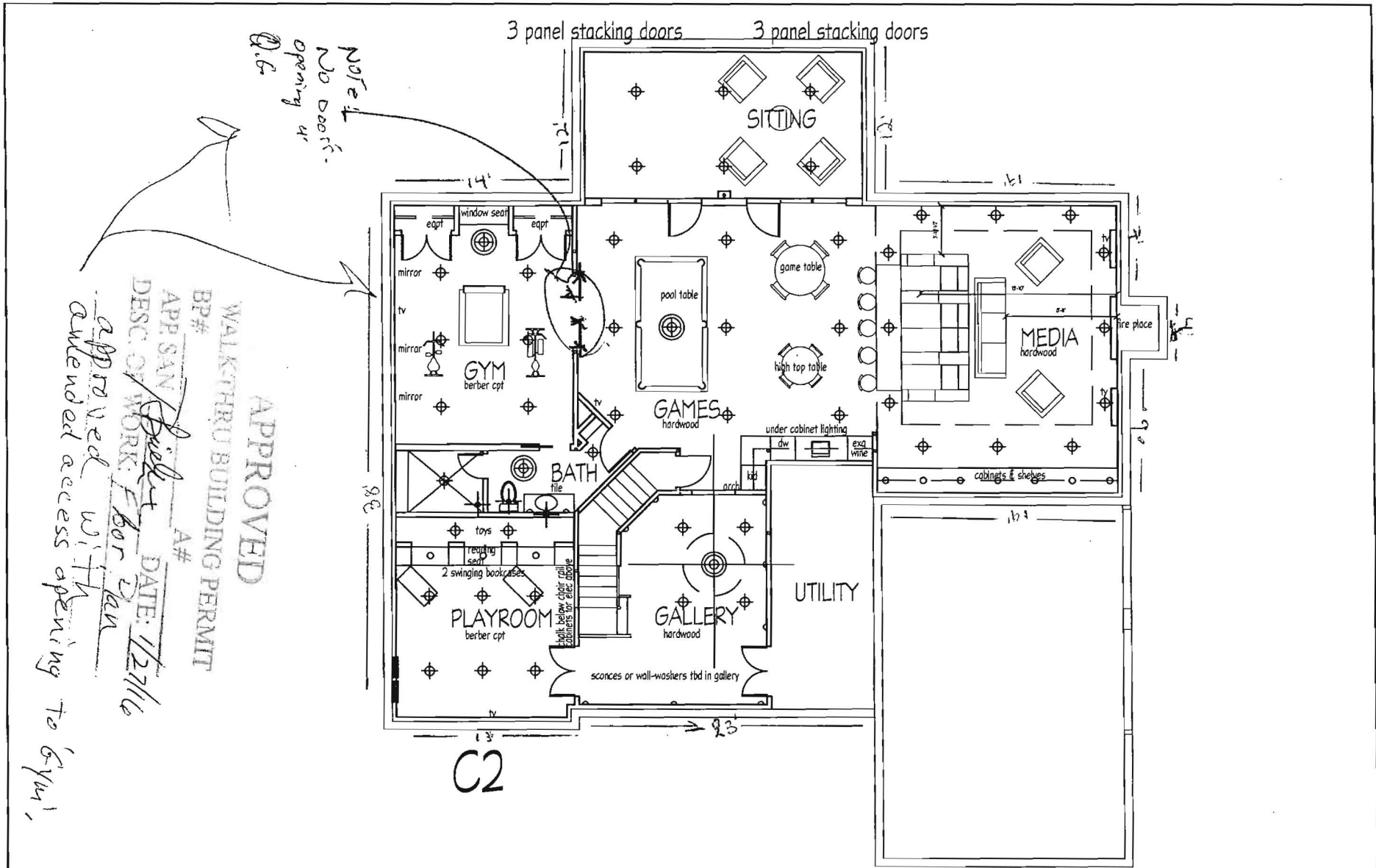
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>4/27/16</u>	<u>R. Beiler</u>

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	#

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA



DRAWING TITLE basement plan	 <p>1993 Barley Road Marriottsville, Maryland 21104 mclark@bluehouseARCH.com www.bluehouseARCH.com Phone: 410-549-3377 Fax: 410-549-3377</p>	FOR DESIGN REVIEW ONLY - NOT FOR CONSTRUCTION	SCALE : 3/32"=1'-0"	PROJ. NO. 16005
PROJECT NAME peay residence basement			DATE : ©01/26/2016	DRAWING NO. sk-1 1 of XX
			FILE No. : 16005	