



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.: 8110000757

Building Address: 4305 Backskin Road Dr
City: Farmersville State: MD Zip Code: 21042
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SF D
Proposed Use: SF D w/ deck & steps to garage
Estimated Construction Cost: \$ 15,000
Description of Work: Build 15' wide by 16' long deck w/ 4x4 railing & steps to garage
Occupant or Tenant: Homeowner
Was tenant space previously occupied? ☐ Yes ☒ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: Howard County
Address: 4305 Backskin Road Dr
City: Farmersville State: MD Zip Code: 21042
Phone: _____ Fax: _____
Email: hcountymd@gmail.com

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Howard County
Address: 3375 Park View Dr
City: Farmersville State: MD Zip Code: 21042
Phone: 443 812-4175 Fax: _____
Email: hcountymd@gmail.com

Contractor Company: None
Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: _____
License No.: 100475
Phone: _____ Fax: _____
Email: _____

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: _____ 2 nd floor: <u>3,415</u>
Area of construction (sq. ft.):	Basement: _____ <input checked="" type="checkbox"/> Finished Basement
Use group:	<input type="checkbox"/> Unfinished Basement
Construction type:	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Structural Steel	No. of Bedrooms: <u>5</u>
<input type="checkbox"/> Masonry	Multi-family Dwelling
<input type="checkbox"/> Wood Frame	No. of efficiency units: _____
<input type="checkbox"/> State Certified Modular	No. of 1 BR units: _____
	No. of 2 BR units: _____
	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
➤ Roadside Tree Project Permit	Footings: _____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof: _____
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<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 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:
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: _____
Email Address: _____
Title/Company: _____

Print Name: _____
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	3/8/16	[Signature]

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	\$ <u>55</u>
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$ <u>55</u>
Check	# <u>257</u>

BUCKSKIN WOOD DRIVE
50' PUBLIC R/W
R=335.0



10' PUBLIC-
TREE
MAINTENANCE
EASEMENT

LOT 13

20' PUBLIC
DRAINAGE
AND UTILITY
EASEMENT

LOT 16

SEE
DETAIL

APPROVED

WALK-THRU BUILDING PERMIT
BP#

BP#

A类

APP. SAN

DESC. OF WORK:

DATE: _____

3/8/11

Deck as shown

2/18

12/1/50

**HOUSE LOCATION
DRAWING**

FOUNDATION LOCATION: 3/13/12

FINAL LOCATION: 7/10/12

BOUNDARY SURVEY

SCALE: 1"=60'

DATE: 7/11/12

DATE: 12/12/14
DRAWN BY: JMP

CHECKED BY: M.L.B.

#4305 BUCKSKIN WOOD DRIVE
B.R.L.= BUILDING RESTRICTION LINE
TOP OF FOUNDATION ELEV.= 630.5±

* D box $< 5'$
should be ok
w/ steps