



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: 13348 Long Leaf Dr.
City: Clarksville State: MD Zip Code: 21029
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: 0000
Section: _____ Area: _____ Lot: 5
Tax Map: 0034 Parcel: 0169 Grid: 0009
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFD 2 story Residence
Proposed Use: SFD 2 story Residence
Estimated Construction Cost: \$ 50,000
Description of Work: Add 252 SF Sunroom w/ storage space (unfinished) underneath

Occupant or Tenant: Dan Tyler
Was tenant space previously occupied? Yes No
Contact Name: Dan Tyler
Address: Same
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: Dan Tyler
Address: 13348 Long Leaf Dr.
City: Clarksville State: MD Zip Code: 21029
Phone: _____ Fax: _____
Email: g.dan.tyler@gmail.com

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Winthorpe Design + Build
Address: 13050 Wainwright Rd
City: Highland State: MD Zip Code: 20777
Phone: 301 854 0892 Fax: _____
Email: Krag@winthorpe.com

Contractor Company: Winthorpe Design + Build
Contact Person: Krag Siechelstiel
Address: 13050 Wainwright Rd
City: Highland State: MD Zip Code: 20777
License No.: 36208
Phone: 301 854 0892 Fax: _____
Email: Krag@winthorpe.com

Engineer/Architect Company: Pankaj Patel
Responsible Design Prof.: _____
Address: 13418 Good Times Ct
City: Highland State: MD Zip Code: 20777
Phone: 410-622-1622 Fax: _____
Email: Patelppp@gmail.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:
	2 nd floor:
Area of construction (sq. ft.):	Basement:
	<input type="checkbox"/> Finished Basement
Use group:	<input type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
Construction type:	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:
<input type="checkbox"/> Structural Steel	Multi-family Dwelling
<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:
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:
<input type="checkbox"/> Yes <input 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 type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input type="checkbox"/> Yes <input checked="" 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.

[Signature]
Applicant's Signature
Krag@winthorpe.com
Email Address
OP. Mgr / Winthorpe Design
Title/Company

Krag Siechelstiel
Print Name
4/20/16
Date

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
PLEASE WRITE NEATLY & LEGIBLY
-FOR OFFICE USE ONLY-

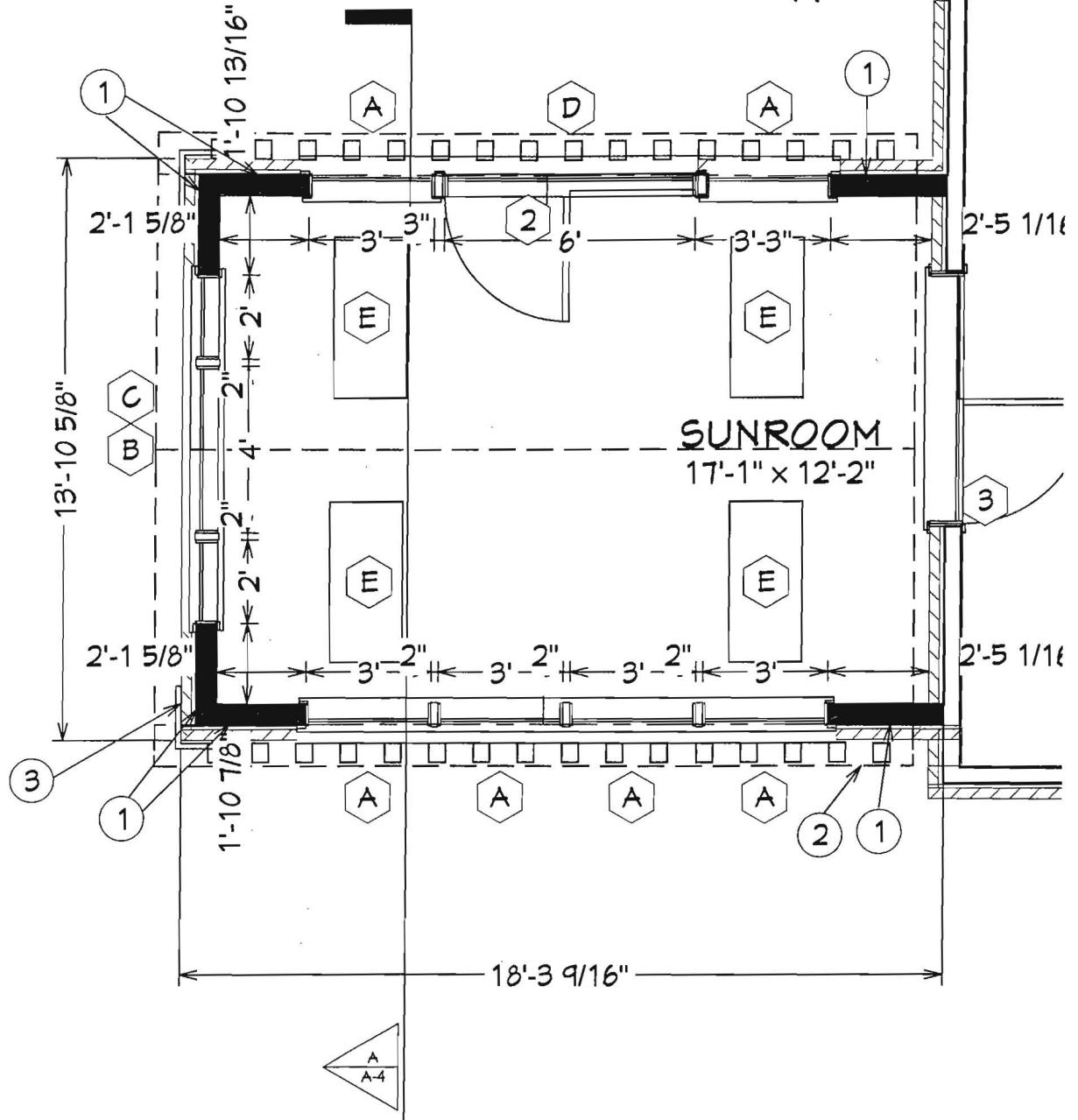
AGENCY	DATE	SIGNATURE OF APPROVAL	DPZ SETBACK INFORMATION	Filing Fee	\$
State Highways			Front:	Permit Fee	\$
Building Officials			Rear:	Tech Fee	\$
PSZA (Zoning)			Side:	Excise Tax	\$
PSZA (Engineering)			Side St.:	PSFS	\$
Health	<u>4/20/16</u>	<u>[Signature]</u>	All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No	Guaranty Fund	\$
			Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Add'l per Fee	\$
			Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fees	\$
			Lot Coverage for New Town Zone:	Sub- Total Paid	\$
			SDP/Red-line approval date:	Balance Due	\$
				Check	#

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

13348 Long Lea R Drive

WALKTHRU
 BP#
 APP. SAID
 DESC. OF WORK
 252 ft

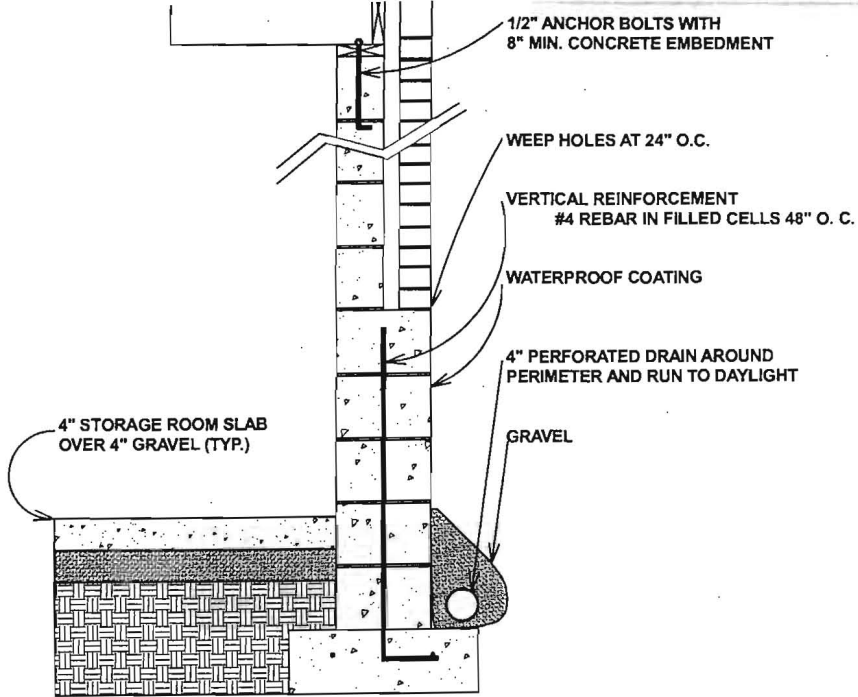
Sunroom approved



PROPOSED FIRST FLOOR PLAN
 1/4" = 1'-0"

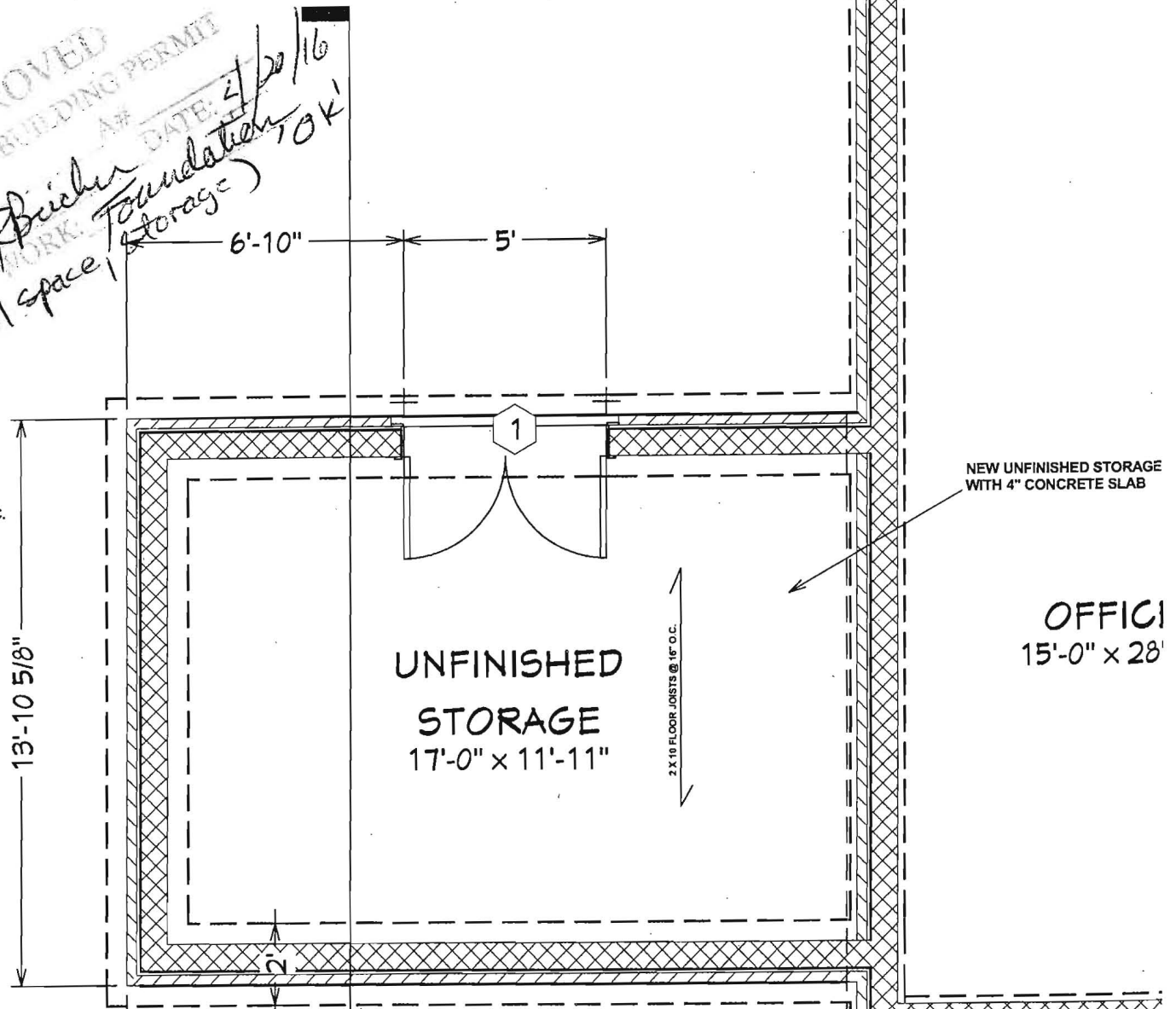
FLOOR PLAN NOTES

- 1 BRACED WALL PANELS - 2' MIN. WIDTH (SEE ELEVATIONS AND DETAIL)
- 2 TURNED ELECTRIC METER STAND
- 3 BRICK FACE TO MATCH EXISTING (QUIONS AT FRONT & REAR CORNER SUNROOM)



13348 Long Leaf Drive

APPROVED
 WALK-THRU BUILDING PERMIT
 BP# _____ A# _____ DATE: 4/20/16
 APP SAN _____
 DESC OF WORK: (crawl space, Foundation, Storage) OK!



FOUNDATION WALLS WITH
 FILLED CELLS AT 48" O.C.
 REINFORCING
 TO MATCH EXISTING