



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: _____

BI 5000 415

Permit No.: _____

Building Address: 17600 Hardy RD
 City: Mt. Airy State: MD Zip Code: 21771
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Laurand
 Section: _____ Area: _____ Lot: 6
 Tax Map: 0007 Parcel: 0509 Grid: 0001
 Zoning: RC DEO Map Coordinates: 39.34,-77.12 Lot Size: 4.9276A

Property Owner's Name: Christian Tillet/Holly Schwarz
 Address: 17600 Hardy Rd
 City: Mt. Airy State: MD Zip Code: 21771
 Phone: 443-621-4519/301-703-5969 Fax: _____
 Email: ctillett@gmail.com

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: N/A OWNER
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Existing Use: Residential
 Proposed Use: Residential with Private Barn for Horses/Livestock
 Estimated Construction Cost: \$ 45,000
 Description of Work: Build a Laredo style barn with electric and plumbing hookup. Barn will have four stalls, a tack portion and a feed portion. Barn will host private horses used for personal uses 48' x 24'
 Occupant or Tenant: Owners - Christian Tillet & Holly Schwarz
 Was tenant space previously occupied? Yes No
 Contact Name: Christian Tillet/Holly Schwarz
 Address: 17600 Hardy Rd
 City: Mt. Airy State: MD Zip Code: 21771
 Phone: 443-621-4519/301-703-5969 Fax: _____
 Email: ctillett@gmail.com

Contractor Company: Maryland Horse Fencing
 Contact Person: Paul Higgins
 Address: 13302 Good Intent Road
 City: Union Bridge State: MD Zip Code: 21791
 License No.: 06377047
 Phone: (410) 848-0637 Fax: _____
 Email: phiggins@marylandhorsefencing.com

Engineer/Architect Company: The Barn Yard
 Responsible Design Prof.: David S
 Address: 11001 York Rd
 City: Cockeysville State: MD Zip Code: 21030
 Phone: (410) 527-1377 Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input 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"/> Craw 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: <u>Barn</u>
	Dimensions: <u>24'x48'</u>
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 type="checkbox"/> Natural Gas <input 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.

Applicant's Signature: Christian Tillet
 CTillett@gmail.com
 Email Address: _____
 Owner
 Title/Company: _____

Print Name: Christian Tillet
 Date: 1/20/15

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

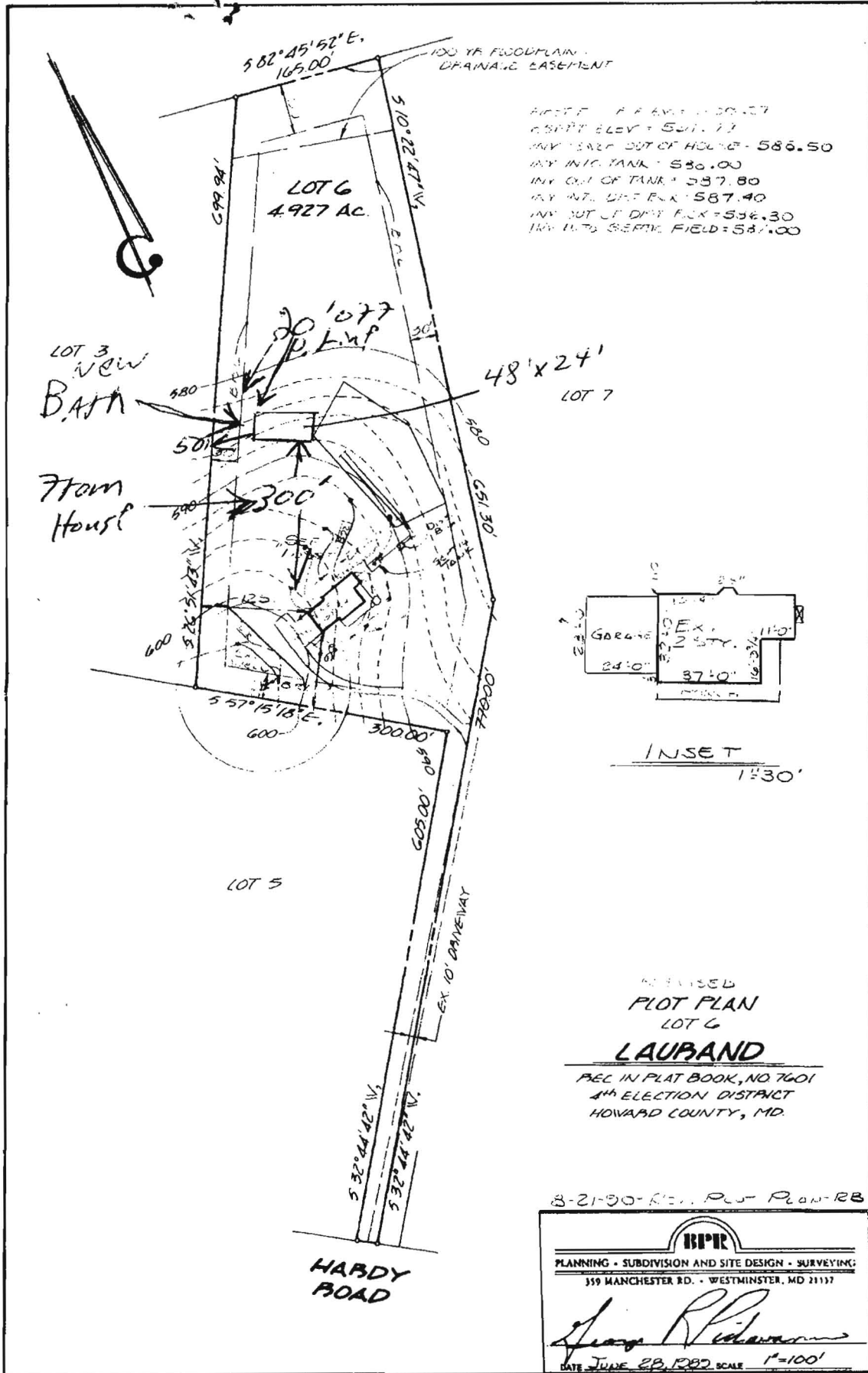
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

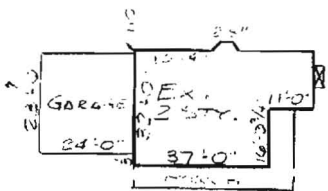
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$ <u>25</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check #	<u>144</u>

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



FIRST FLOOR ELEV = 501.07
 FINISH ELEV = 501.11
 FINISH ELEV OUT OF HOUSE = 586.50
 FINISH ELEV TANK = 586.00
 FINISH ELEV OUT OF TANK = 587.80
 FINISH ELEV DRY PCK = 587.40
 FINISH ELEV DRY PCK = 584.30
 FINISH ELEV SEPTIC FIELD = 587.00



INSET
 1"=30'

REVISIONS
 PLOT PLAN
 LOT 6

LAUBAND

REC IN PLAT BOOK, NO 7601
 4TH ELECTION DISTRICT
 HOWARD COUNTY, MD.

B-21-90-R101-Plan-12B

PLANNING • SUBDIVISION AND SITE DESIGN • SURVEYING
 359 MANCHESTER RD. • WESTMINSTER, MD 21157

 DATE: JUNE 28, 1982 SCALE: 1"=100'

93-031-012

**COMPLETE THIS FORM WHEN DROPPING OFF ANY
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:**

Date: 3/12/15

To: Daniel Swinder - Building Permits
(Person's Name and Division)

From: Christina Tillet (443) 621-4519
(Your Name, Company Name and Telephone Number)

Subject: Project name BARN
Project site address 17600 Hardy Rd, Mt. Airy, MD 21371
Permit # B15000415 SDP # _____
Other information pertinent to this project _____

Health Dept.
DANA BEANARD
Permit: B15000415

Please check the attachments below that you are submitting with this transmittal:

- Letter of response to address plan review comment letter
- Revised plans and/or revised details: When submitting for a complete re-review, **dupli**
- Letter Summarizing Changes
- Energy conservation calculations
- Copies of Plan (be specific).
 - Health Department Request
 - DPZ/ DED Request
 - Applicant's Request
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # _____
- Other _____

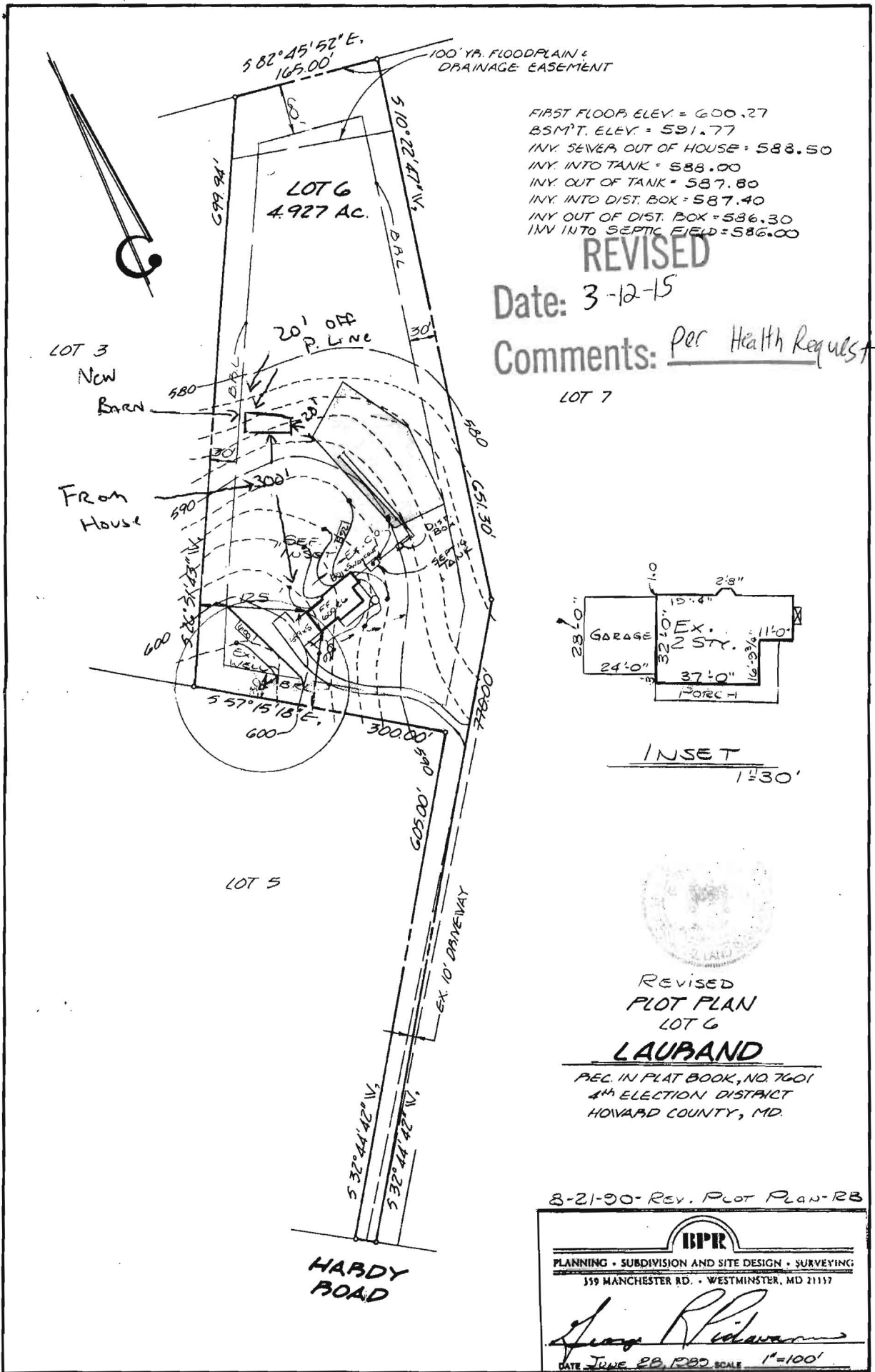
Contact Person Information: (Required)

Christina Tillet Telephone No: 443-621-4519
Please Print Name E-Mail Address: ctillet@gmail.com

PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.

Received by MP

Revision # 2



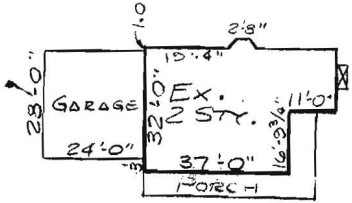
FIRST FLOOR ELEV. = 600.27
 BSM'T. ELEV. = 591.77
 INV. SEWER OUT OF HOUSE = 588.50
 INV. INTO TANK = 588.00
 INV. OUT OF TANK = 587.80
 INV. INTO DIST. BOX = 587.40
 INV. OUT OF DIST. BOX = 586.30
 INV INTO SEPTIC FIELD = 586.00

REVISED

Date: 3-12-15

Comments: per Health Request

LOT 7



INSET
1" = 3'-0"



REVISED
 PLOT PLAN
 LOT 6

LAUBAND

REC. IN PLAT BOOK, NO. 7601
 4TH ELECTION DISTRICT
 HOWARD COUNTY, MD.

8-21-90-REV. PLOT PLAN-RB

BPR
 PLANNING • SUBDIVISION AND SITE DESIGN • SURVEYING
 359 MANCHESTER RD. • WESTMINSTER, MD 21157

Greg R. Lauband

DATE: JUNE 28, 1990 SCALE 1" = 100'

89-021-012