

Permits: 410-313-2455
 Inspections: 410-313-1810
 Automated Line: 410-313-3800

Howard County Building/Fire Permit Application
 Department of Inspections, Licenses & Permits
 3430 Court House Drive
 Ellicott City, MD 21043

Permit Number:

B13000345

Building Address: 11267 Independence Way
~~14540 Edgewoods Way~~
 Ellicott City, MD 21042

Suite/Apt. #: _____ SDP/WP/BA #: 607000212

Census Tract: _____ Subdivision: Howard Crossing

Section: _____ Area: _____ Lot: 58

Tax Map: _____ Parcel: _____ Grid: _____

zoning _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Vacant lot

Proposed Use: Residential Home

Estimated Construction Cost: \$ 550,000

Description of Work: two story, 4 bdrm, 3.5 baths, 3 car garage

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: Toll MD III LP

Address: 14540 Edgewoods Way

City: Crofton State: MD Zip Code: 21737

Home Phone: _____ Work Phone: 410 489 2275

Applicant's Name & Mailing Address, (if other than stated herein): _____

Phone: _____ Fax: _____

Email: _____

Contractor Company: Toll MD III LP

Contact Person: Nathan Brandenburg

Address: 14540 Edgewoods Way

City: Crofton State: MD Zip Code: 21737

License No.: 5049

Phone: 410 489 2275 Fax: _____

Email: Nbrandenburg@tollbrothersinc.com

Engineer/Architect Company: ESE

Responsible Design Prof.: Mike Boyce

Address: 7164 Columbia Gateway Dr. #230

City: Columbia State: MD Zip Code: 21046

Phone: 410 365 4175 Fax: _____

Email: Mboyce@ESEeng.com

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height: _____	<u>Water Supply</u>
No. of stories: _____	<input type="checkbox"/> Public
Gross area sq. ft./floor: _____	<input type="checkbox"/> Private
Area of construction (sq. ft.): _____	<u>Sewage Disposal</u>
	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use of building: _____	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
Construction type: _____	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
Window type: _____	<input type="checkbox"/> N/A
Structure: <input type="checkbox"/> Single <input type="checkbox"/> Multi-Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit # _____	No. of Heads: _____

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
Depth _____ Width _____	<input type="checkbox"/> Public
1 st floor: <u>57</u> <u>77</u>	<input checked="" type="checkbox"/> Private
2 nd floor: <u>57</u> <u>77</u>	<u>Sewage Disposal</u>
Basement: <u>57</u> <u>77</u>	<input checked="" type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input type="checkbox"/> Private
<input checked="" type="checkbox"/> Unfinished Basement	Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms: <u>4</u>	<input checked="" type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units: _____	<input checked="" type="checkbox"/> Natural Gas
No. of 1 BR units: _____	<input type="checkbox"/> Propane Gas
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> Manufactured Home	

I HEREBY CERTIFY AND AGREE AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT PERMITTED BY THIS PERMIT; (4) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Application Signature: David East Print Name: _____

Date: 1/29/13

Company: Toll Brothers Email: deract@tollbrothersinc.com

RECEIVED JAN 29 2013 LICENSES & PERMITS DIVISION

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

AGENCY	DATE	SIGNATURE OF APPROVAL
Sealing		
Building Official		
PSZA (Engineering)		
Health		
Fire		
Is Seismic Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No		
PERMIT CONSTRUCTION START		
SHOP		

DPZ SETBACK INFORMATION

Front: _____

Rear: _____

Side: _____

Side St.: _____

All minimum setbacks met? Yes No

Is Entrance Permit Required? Yes No

Historic District? Yes No

Lot Coverage for New Town Zone: _____

SDP/Red-line approval date: _____

Filing Fee	\$ 100.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$

CK# 04233754