



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: 12336 Pans Spring Ct
City: Ellicott City 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: _____
Proposed Use: in ground swimming pool
Estimated Construction Cost: \$ 30,000
Description of Work: construct in ground swimming pool w/ cartridge filter, fenced to code and filled by tanker truck 20x40
Occupant or Tenant: _____

Was tenant space previously occupied? Yes No
Contact Name: Dushn Gacou
Address: 8335 Pulaski Hwy
City: Rosedale State: MD Zip Code: 21237
Phone: 443-270-3781 Fax: _____
Email: Dushn@elitepools.com

Property Owner's Name: Adora Job, bobie NDU
Address: 12336 Pans Spring Ct
City: Ellicott City State: MD Zip Code: 21042
Phone: 410-808-6988 Fax: _____
Email: _____

Applicant's Name & Mailing Address (If other than stated herein)
Applicant's Name: Dushn Gacou
Address: 8335 Pulaski Hwy
City: Rosedale State: MD Zip Code: 21237
Phone: 443-270-3781 Fax: _____
Email: _____

Contractor Company: Elite Pools/Heritage Elite
Contact Person: Dushn Gacou
Address: 8335 Pulaski Hwy
City: Rosedale State: MD Zip Code: 21237
License No.: 71753
Phone: 443-270-3781 Fax: _____
Email: Dushn@elitepools.com

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ 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"/> 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 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: Dushn Gacou
Email Address: Dushn@elitepools.com
Title/Company: Project Manager

Print Name: Dushn Gacou
Date: 12/8/16

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>12/5/16</u> | <u>H. Oswald</u> |

| 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 | # |

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

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

1 11Y 1

1 11Y 1

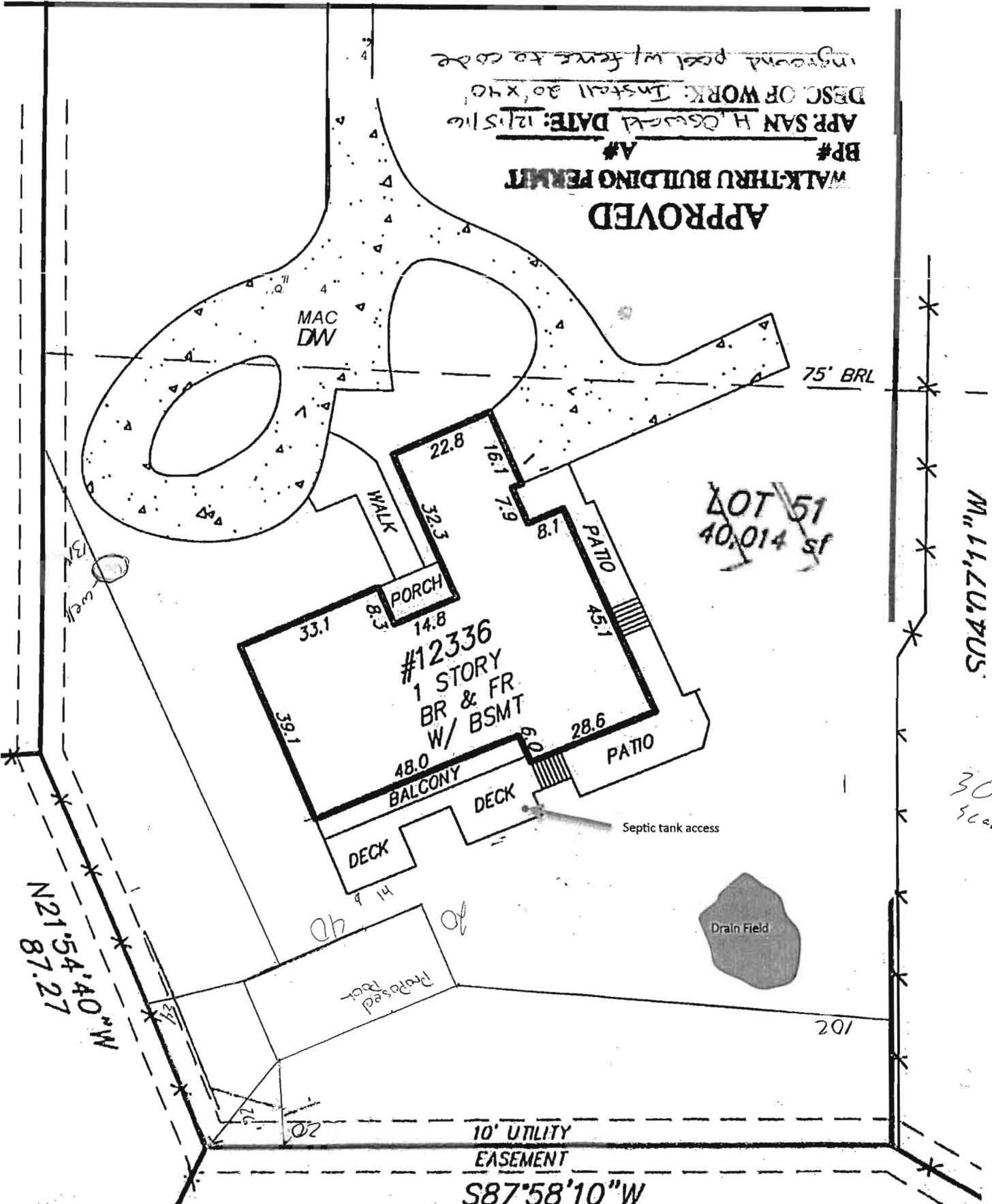
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S85952'49"E

178.30

APPROVED
WALK-THRU BUILDING PERMIT
BP#
APR SAN H. OGDEN DATE: 12/15/16

DESC OF WORK: Install 30' x 40' underground pool w/ fence to code



~~LOT 51~~
40,014 SF

504'07.11" W

30
50' x 40'

N21°54'40" W
87.27

10' UTILITY
EASEMENT
S87°58'10" W

20'

Proposed Pool



Septic tank access

MAC DW

75' BRL

#12336
1 STORY
BR & FR
W/ BSMT

WALK

PORCH

PATIO

PATIO

BALCONY

DECK

DECK

Drain Field

20'

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