



Building Address: 3677 Polly Dr. to Di
 City: Elkridge City State: MD Zip Code: 21043
 Suite/Apt. #: _____ SDP/NP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Walter & Guadalupe
 Address: 3677 Polly Dr. to Di
 City: Elkridge State: MD Zip Code: 21043
 Phone: 410 612 4220 Fax: _____
 Email: _____

Existing Use: SFD
 Proposed Use: SFD w/ Deck w/ steps
 Estimated Construction Cost: \$ 9,500
 Description of Work: 1.2 x 7.5 Deck w/ steps

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Walter & Guadalupe
 Address: 3677 Polly Dr. to Di
 City: Elkridge State: MD Zip Code: 21043
 Phone: 410 612 4220 Fax: _____
 Email: _____

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

Contractor Company: Walter & Guadalupe
 Contact Person: Walter
 Address: 3677 Polly Dr. to Di
 City: Elkridge State: MD Zip Code: 21043
 License No.: 20072
 Phone: _____ Fax: _____
 Email: 410 612 4220

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: | |
| Area of construction (sq. ft.): _____ | 2 nd floor: | |
| Use group: _____ | Basement: | |
| | <input type="checkbox"/> Finished Basement | |
| | <input type="checkbox"/> Unfinished Basement | |
| | <input type="checkbox"/> Crawl Space | |
| | <input type="checkbox"/> Slab on Grade | |
| Construction type: | No. of Bedrooms: _____ | |
| <input type="checkbox"/> Reinforced Concrete | Multi-family Dwelling | |
| <input type="checkbox"/> Structural Steel | No. of efficiency units: _____ | |
| <input type="checkbox"/> Masonry | No. of 1 BR units: _____ | |
| <input type="checkbox"/> Wood Frame | No. of 2 BR units: _____ | |
| <input type="checkbox"/> State Certified Modular | 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 | |
|--------------------------------------|--|
| Electric: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Gas: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Water Supply | |
| <input type="checkbox"/> Public | |
| <input type="checkbox"/> Private | |
| Sewage Disposal | |
| <input type="checkbox"/> Public | |
| <input type="checkbox"/> Private | |
| 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 THE COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: _____ Print Name: Walter & Guadalupe
 Email Address: _____ Date: 9/6/17
 Title/Company: _____

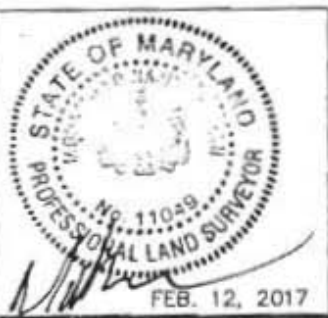
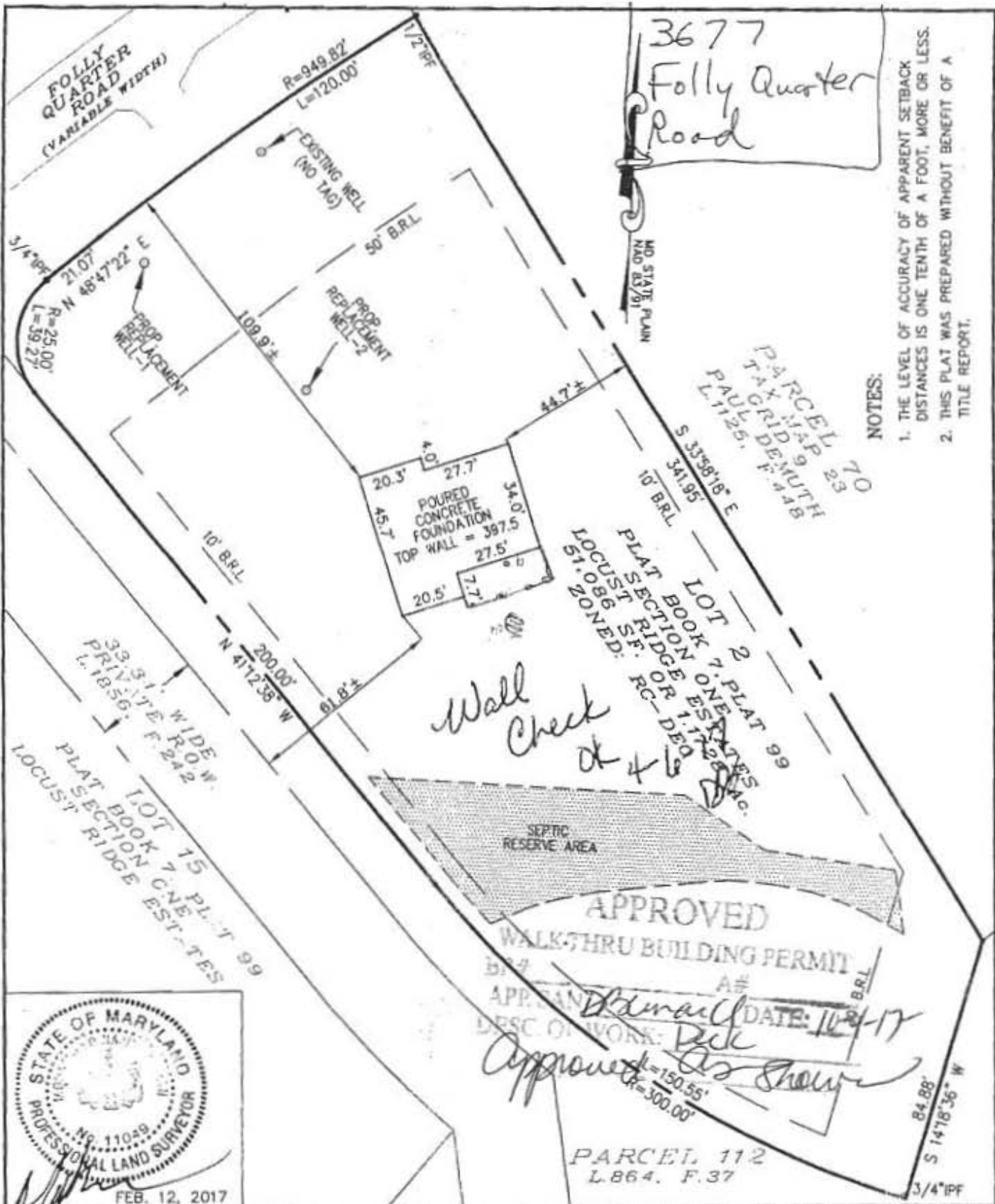
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

| AGENCY | DATE | SIGNATURE OF APPROVAL |
|--------------------|------|-------------------------------|
| State Highways | | |
| Building Officials | | |
| PSZA (Zoning) | | |
| PSZA (Engineering) | | |
| Health | | <u>Walter & Guadalupe</u> |

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

| DFZ 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 |
| Let Coverage for New Town Zone: _____ |
| SDP/Red-line approval date: _____ |

| Filing Fee | \$ |
|----------------|----|
| Permit Fee | \$ |
| Tech Fee | \$ |
| Excise Tax | \$ |
| PSPS | \$ |
| Guaranty Fund | \$ |
| Add'l per Fee | \$ |
| Total Fees | \$ |
| Sub-Total Paid | \$ |
| Balance Due | \$ |
| Check | # |



PREPARED BY: **NJR & ASSOCIATES, LLC.**
LAND SURVEYING AND PLANNING
 2770 STATE ROUTE 32
 WEST FRIENDSHIP, MARYLAND 21794
 TEL: (240) 508-3200

FILE NO. 3311