



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.: B18001275

Building Address: 13861 Triadelphia Mill rd.
City: Dayton State: MD Zip Code: 21036
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: 0000
Section: _____ Area: _____ Lot: _____
Tax Map: 0034 Parcel: 0249 Grid: 001
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Single family dwelling
Proposed Use: Fuel supply for heat & generator
Estimated Construction Cost: \$ 10700.00

Description of Work: Removal of propane tank & installation of gas line from tank to stub out & tank to generator. 100' Galley

Occupant/Tenant Name: _____

Was tenant space previously occupied? ☐ Yes ☒ No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Commercial Building Characteristics	Residential Building Characteristics
Height: _____	☐ SF Dwelling ☐ 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: _____
Construction type: _____	☐ Finished Basement
☐ Reinforced Concrete	☐ Unfinished Basement
☐ Structural Steel	☐ Crawl Space
☐ Masonry	☐ Slab on Grade
☐ Wood Frame	No. of Bedrooms: _____
☐ State Certified Modular	No. of efficiency units: _____
	No. of 1 BR units: _____
	No. of 2 BR units: _____
	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
☒ Roadside Tree Project Permit	Footings: _____
☐ Yes ☐ No	Roof: _____
☐ Roadside Tree Project Permit # _____	☐ State Certified Modular
	☐ Manufactured Home

Property Owner's Name: Nathan Iager
Address: 13861 Triadelphia Mill rd.
City: Dayton State: MD Zip Code: 21036
Phone: 301 325 9378 Fax: _____
Email: nathanlager@gmail.com

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

Contractor Company: Suburban Propane
Contact Person: Brent Stubbs
Address: 31 Derwood Cir
City: Rockville State: MD Zip Code: 20850
License No.: 782163
Phone: 301 251 0666 Fax: 301 251 0408
Email: bstubbs@suburbanpropane.com

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Utilities	
Electric: ☐ Yes ☐ No	
Gas: ☐ Yes ☐ No	
Water Supply	
☐ Public	
☒ Private	
Sewage Disposal	
☐ Public	
☒ Private	
Heating System	
☐ Electric ☐ Oil	
☐ Natural Gas ☐ Propane Gas	
Other: _____	
Sprinkler System:	
☐ Yes ☐ No	
Grading Permit Number: _____	
Building Shell Permit Number: _____	

RECEIVED
APR 20 2018
LICENSES & PERMITS
DIVISION

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 THEREOF; (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.

Brent Stubbs
Applicant's Signature
bstubbs@suburbanpropane.com
Email Address
Suburban Propane
Title/Company

Brent Stubbs
Print Name
4/19/18
Date

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>5/1/18</u>	<u>RAT</u>

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

DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
Are 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	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

Distribution of Copies: White: Building Officials

Green: PSZA, Zoning

Yellow: PSZA, Engineering

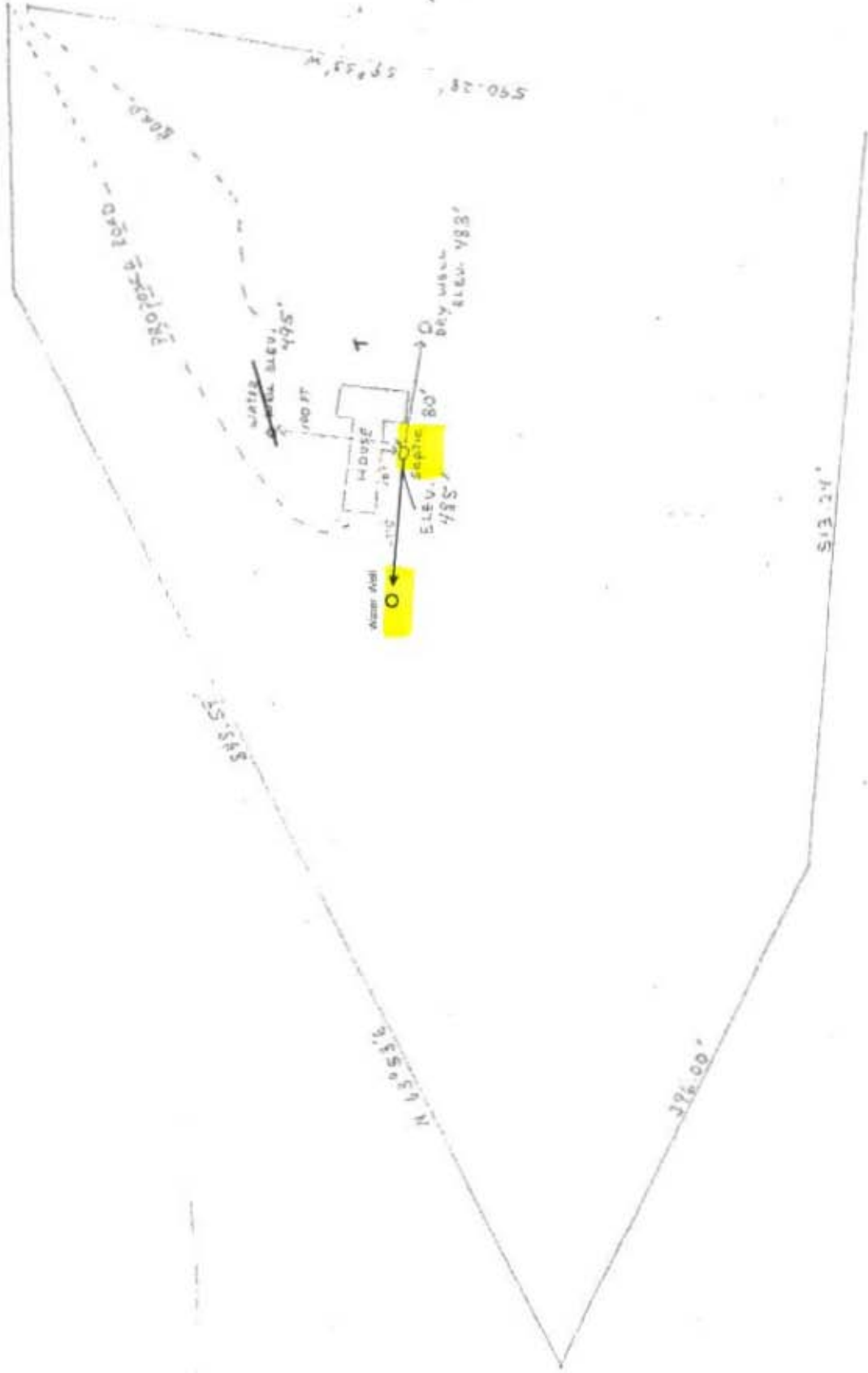
Pink: Health

Gold: SHA

~~R-1A~~ 5/9/18

17512

#18840 James Jolly 8813



SEWAGE PLAN

J.H. JOLLY PROPERTY
13861 TRIDELPHIA MILL RD.

SCALE
1" = 100 FT