



# 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.: B16 001722

Building Address: 429 Twin Arch Road  
City: Mt Airy State: MD Zip Code: 21771  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
Tax Map: 1 Parcel: 433 31 Grid: 18  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: SFD  
Proposed Use: SFD  
Estimated Construction Cost: \$ 80,000  
Description of Work: Home Renovation  
Addition of second floor

Occupant or Tenant: \_\_\_\_\_  
Was tenant space previously occupied? ☐ Yes ☒ No  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Property Owner's Name: Chris Miller  
Address: 6709 East Ave  
City: Cherry Chase State: MD Zip Code: 20815  
Phone: 410-984-7486 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Applicant's Name & Mailing Address (if other than stated herein)  
Applicant's Name: MPO Systems, LLC  
Address: 16606 Dubbs Rd.  
City: Sparks State: MD Zip Code: 21152  
Phone: 410-343-9353 Fax: \_\_\_\_\_  
Email: trevistyree@live.com

Contractor Company: MPO Systems, LLC  
Contact Person: Trevi Styree  
Address: 16606 Dubbs Rd.  
City: Sparks State: MD Zip Code: 21152  
License No.: 133186  
Phone: 410-984-7486 Fax: \_\_\_\_\_  
Email: trevistyree@live.com

Engineer/Architect Company: **RECEIVED**  
Responsible Design Prof.: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: 22 2016  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Commercial Building Characteristics	Residential Building Characteristics
Height: _____	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: _____	Depth _____ Width _____
Gross area, sq. ft./floor: _____	1 <sup>st</sup> floor: _____
	2 <sup>nd</sup> floor: _____
Area of construction (sq. ft.): _____	Basement: _____
	<input type="checkbox"/> Finished Basement
Use group: _____	<input checked="" type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Crawl Space
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>2</u>
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>
<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 checked="" type="checkbox"/> No	Roof: _____
Roadside Tree Project Permit # _____	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Utilities	DIVISION
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>Heating System</b>	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other: _____	
<b>Sprinkler System:</b>	
<input type="checkbox"/> Yes <input checked="" 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: Mike @ boulder pool. com  
Email Address: Owner MPO SYSTEMS, LLC  
Title/Company: \_\_\_\_\_

Print Name: Michael O'Connor  
Date: 4/21/16

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		
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<input type="checkbox"/> 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>25.00</u>
Permit Fee	\$ _____
Tech Fee	\$ _____
Excise Tax	\$ _____
PSFS	\$ _____
Guaranty Fund	\$ _____
Add'l per Fee	\$ _____
Total Fees	\$ _____
Sub- Total Paid	\$ _____
Balance Due	\$ _____
Check	# <u>1127</u>

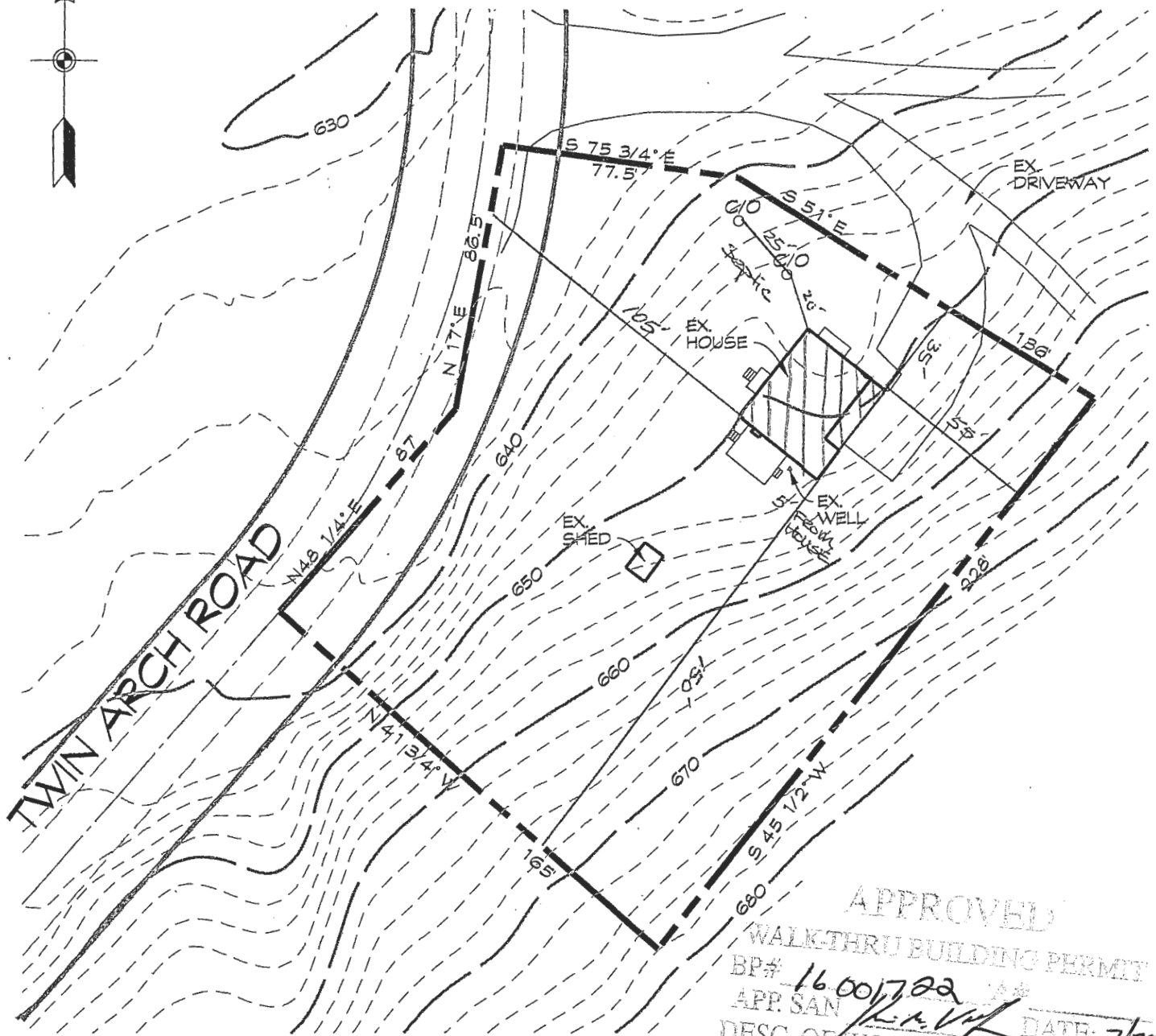
Distribution of Copies: White: Building Officials

Green: PSZA,Zoning

Yellow: PSZA,Engineering

Pink: Health

Gold: SHA



APPROVED

WALKTHRU BUILDING PERMIT

BP# 16001722

APP. SAN

DESC. OF WORK:

DATE: 7/21/16

Removals as shown  
\* See attached Floor plans

LOCATION PLAN

429 TWIN ARCH ROAD

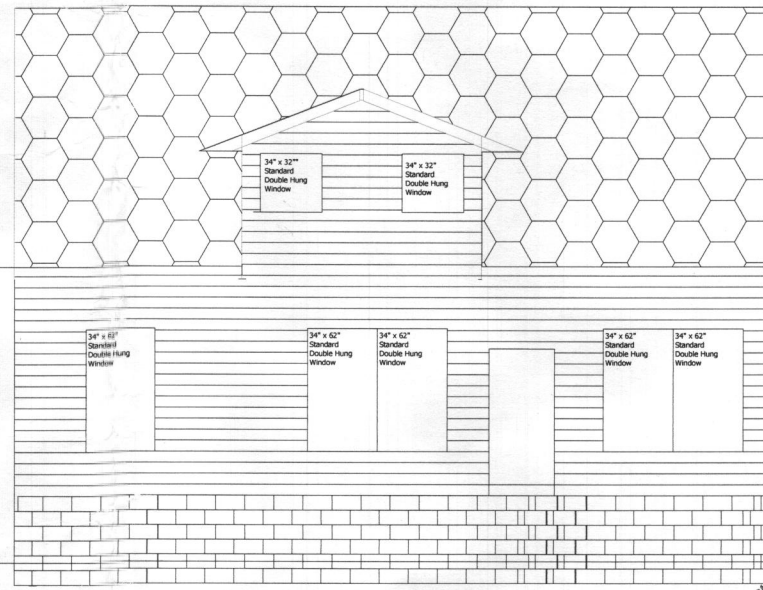
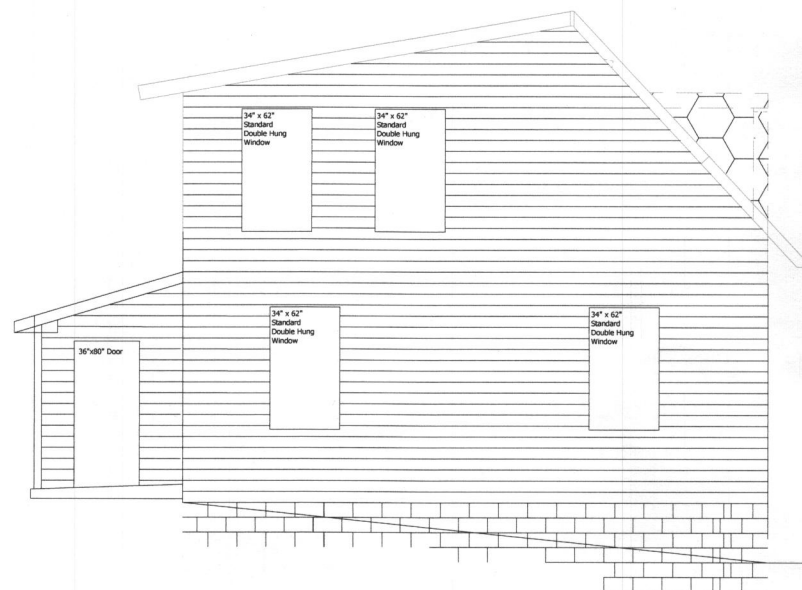
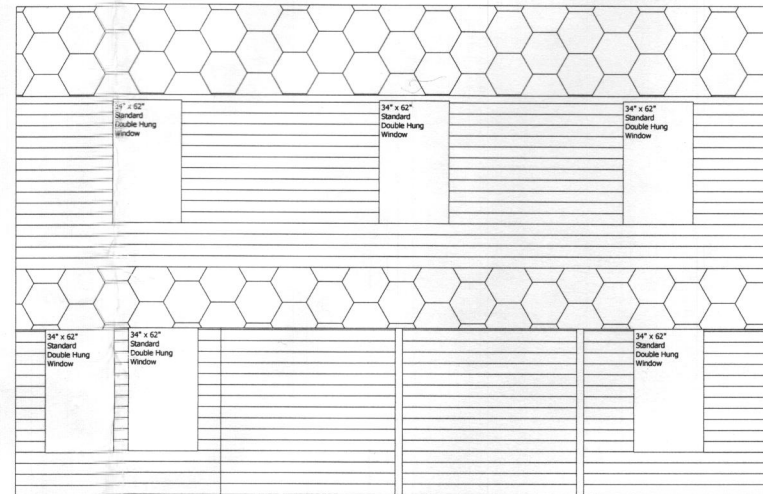
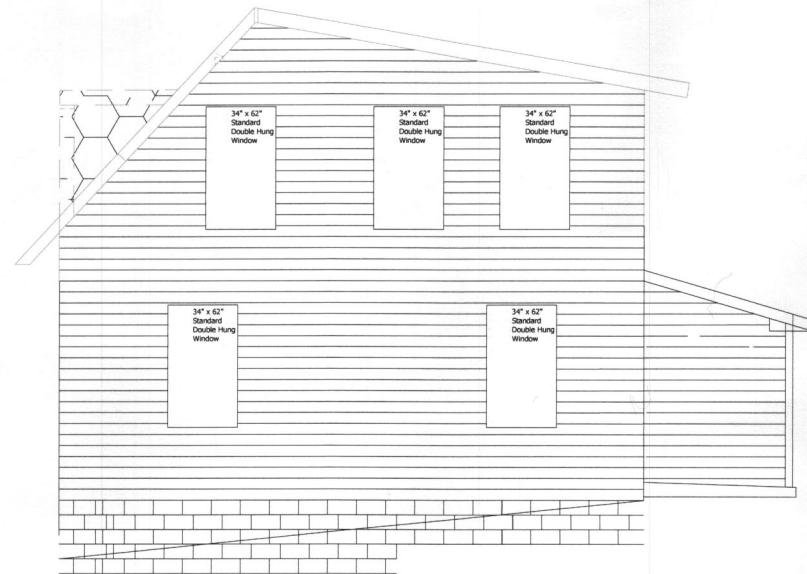
4th ELECTION DISTRICT, HOWARD COUNTY MD  
TAX MAP 1, BLOCK 18, PARCEL 31



FREDERICK OFFICE:  
8445 Progress Drive, Suite BB  
Frederick, MD 21701-4879  
(301) 662-1799  
FAX (301) 662-8004

WESTMINSTER OFFICE:  
439 East Main Street  
Westminster, MD 21157-5535  
(410) 848-1790  
FAX (410) 848-1791

DRAWN BY:	VP
DESIGN BY:	
REVIEW BY:	
DATE:	APRIL, 2016
SCALE:	1" = 50'
JOB NO:	2016056
SHEET:	1 OF 1

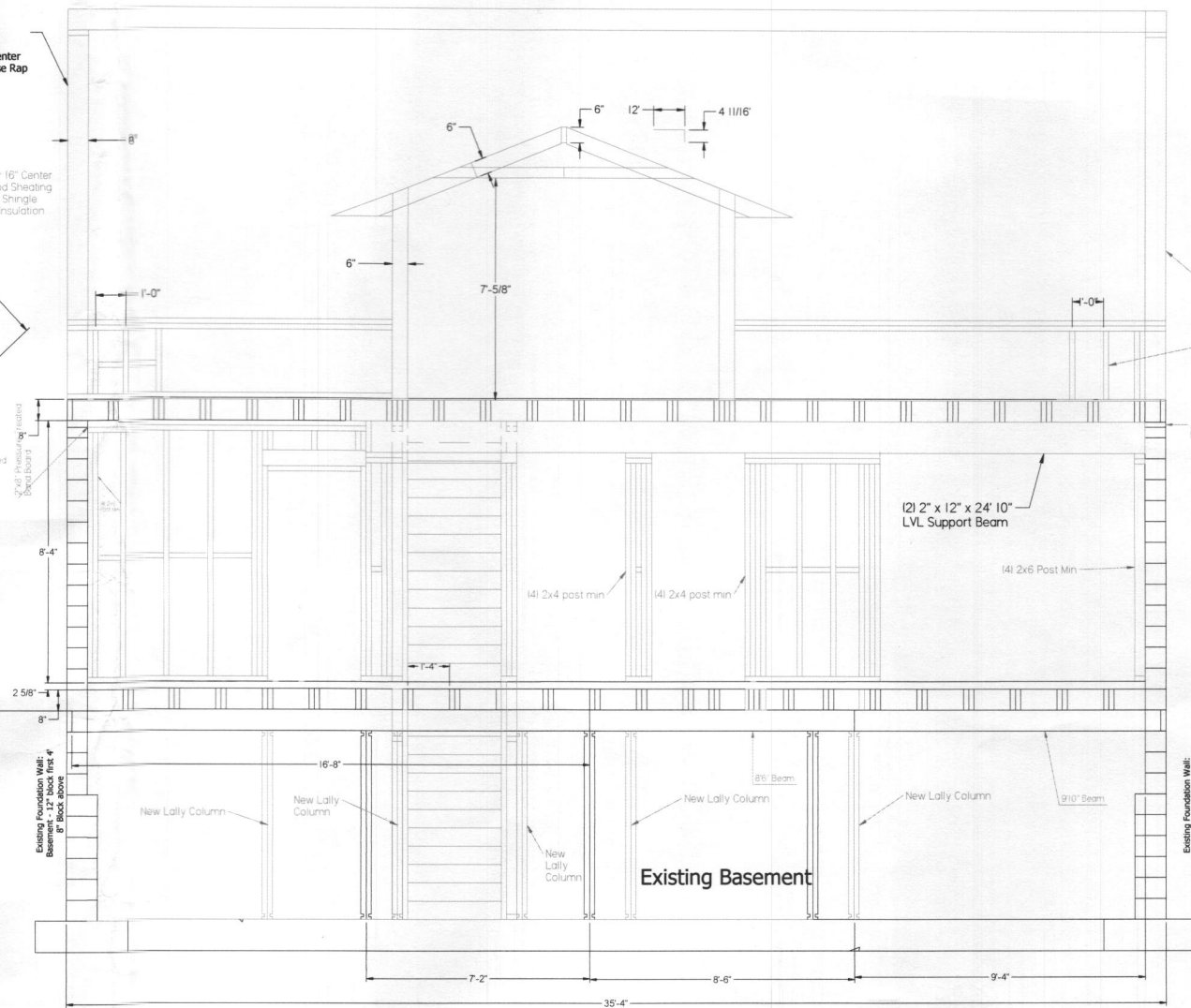
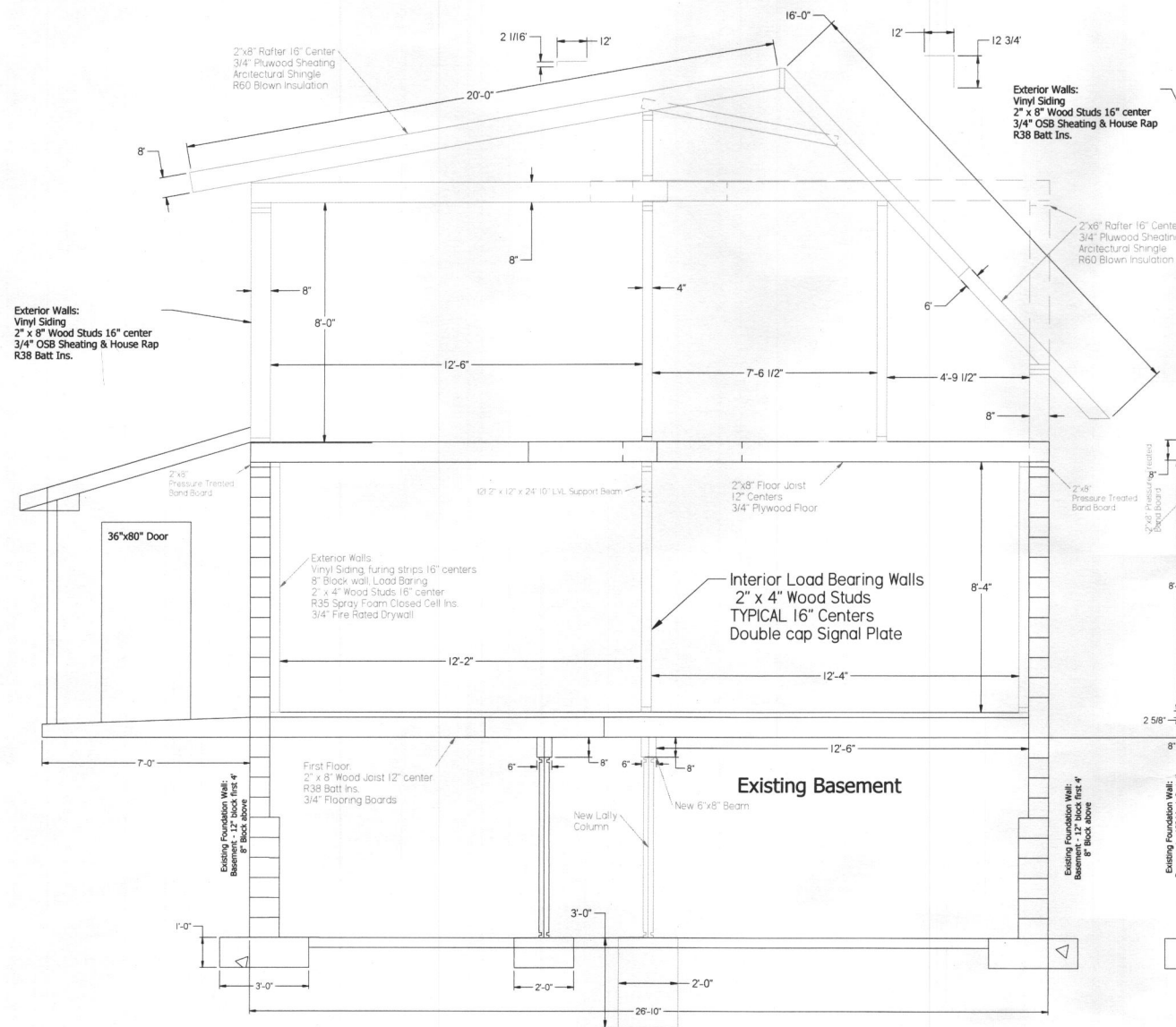


APPROVED  
WALK-THRU BUILDING PERMIT  
BP# 16001722 A#  
APP. SAN Mike Way DATE: 7/21/16  
DESC. OF WORK: Interior  
Renovating as shown.

MPO Systems, LLC  
16606 Dubbs Rd, Sparks, MD 21152  
429 Twin Arch Rd, Mt Airy, MD 21771  
Side View  
Sheet 1 of 1  
Submitted 4/22/2016

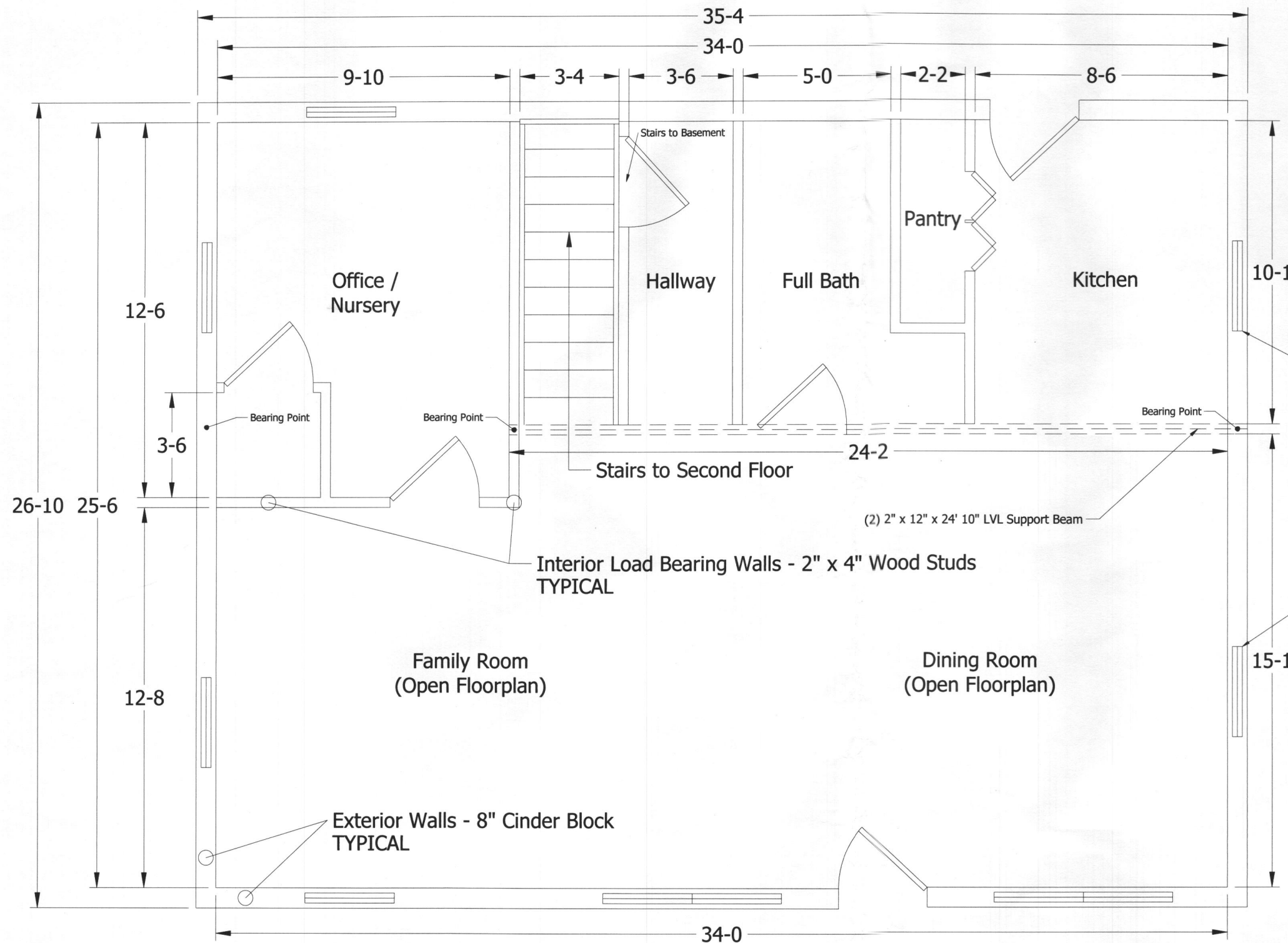
TREVIS TYREE  
410-984-7486

TREVIS TYREE @ LIVE.com



**MPO Systems, LLC**  
16606 Dubbs Rd, Sparks, MD 21152  
429 Twin Arch Rd, Mt Airy, MD 21771  
*2018*  
Load Bearing View





34" x 62"  
Standard  
Double Hung  
Windows  
TYPICAL

## MPO Systems, LLC

16606 Dubbs Rd, Sparks, MD 21152

429 Twin Arch Rd, Mt Airy, MD 21771

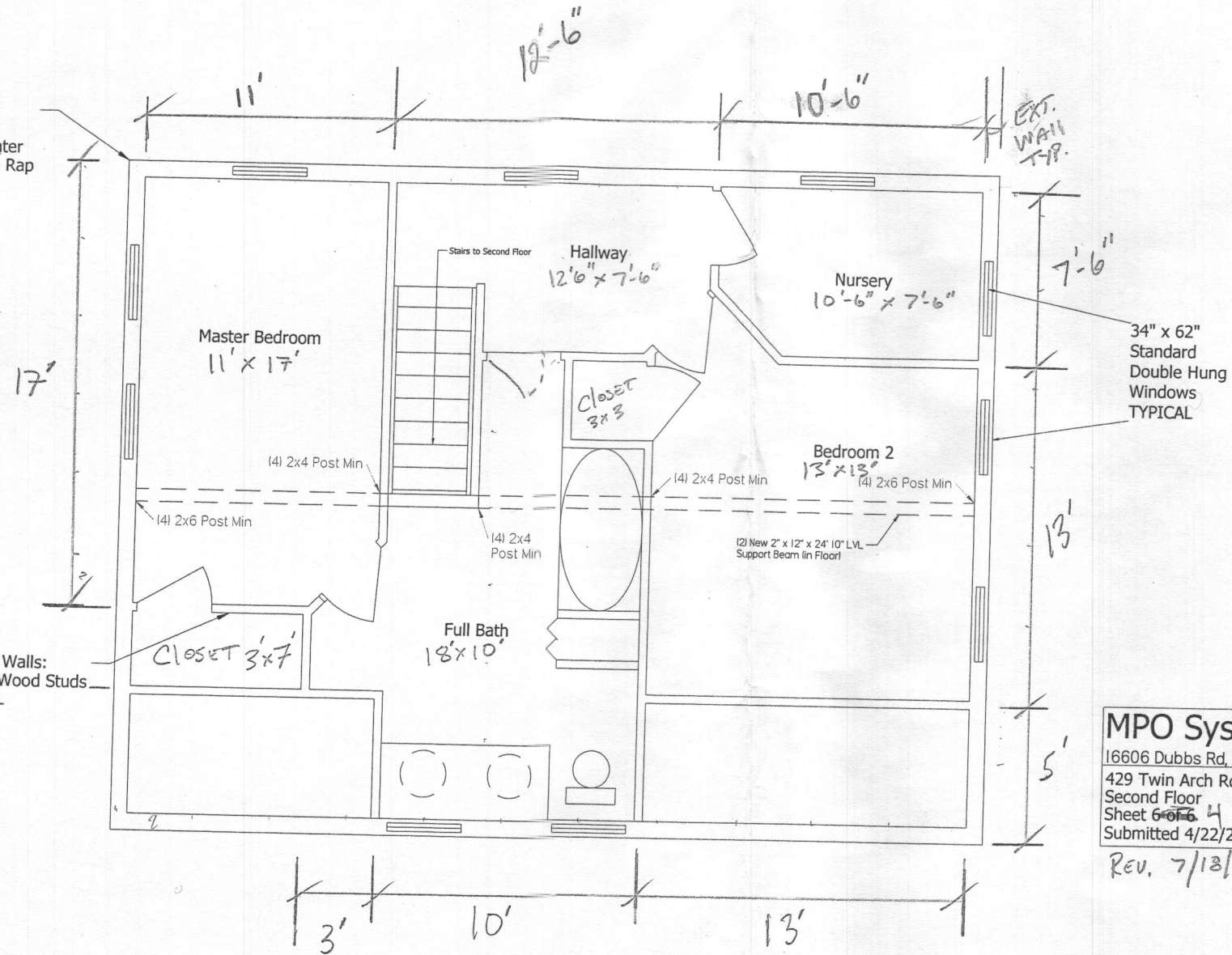
First Floor

Sheet 3 of 8

Submitted 4/22/2016

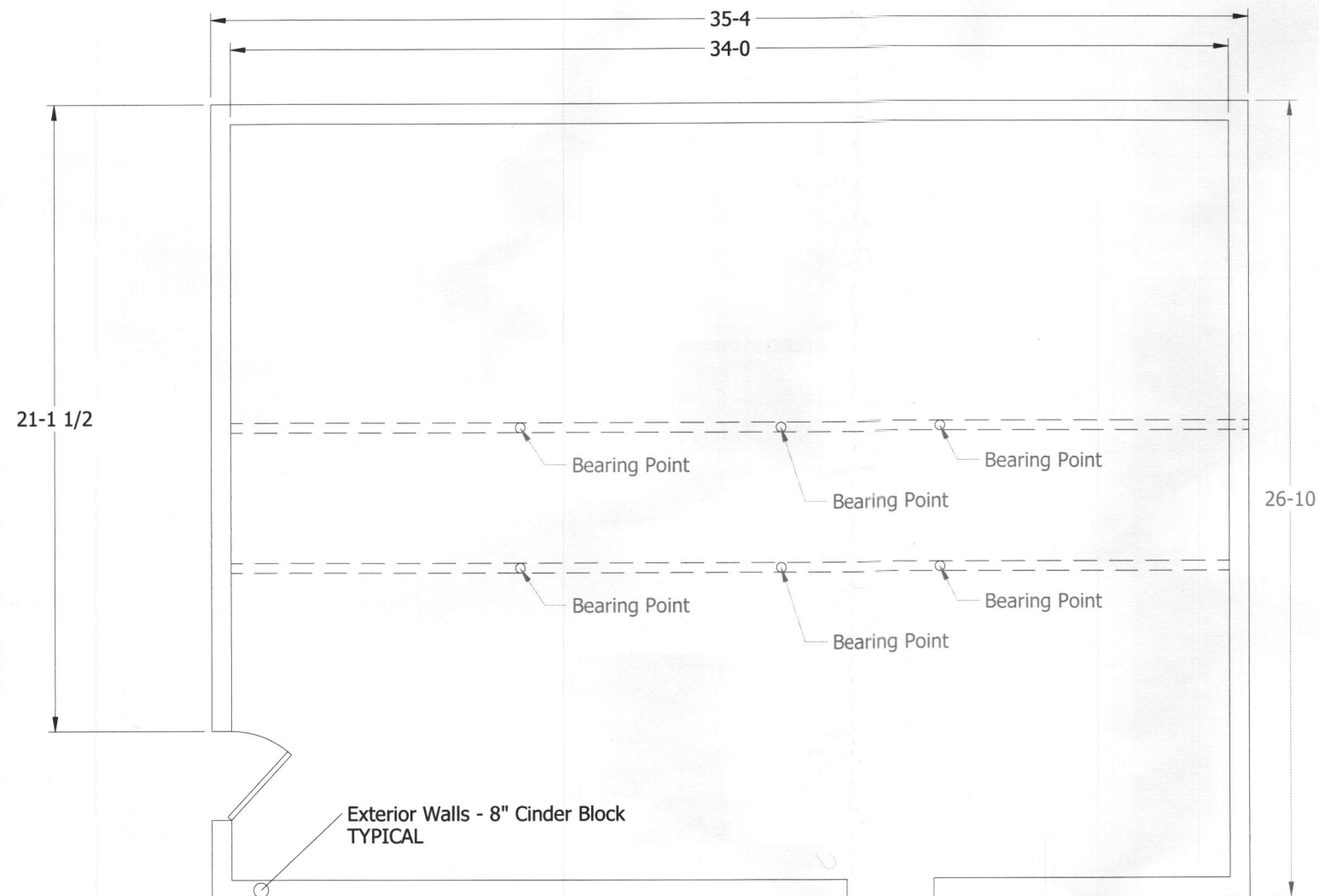
Exterior Walls:  
 Vinyl Siding  
 2" x 8" Wood Studs 16" center  
 3/4" OSB Sheating & House Rap  
 R38 Batt Ins.

Interior Walls:  
 2" x 4" Wood Studs  
 TYPICAL



**MPO Systems, LLC**  
 16606 Dubbs Rd, Sparks, MD 21152  
 429 Twin Arch Rd, Mt Airy, MD 21771  
 Second Floor  
 Sheet 6 of 8  
 Submitted 4/22/2016

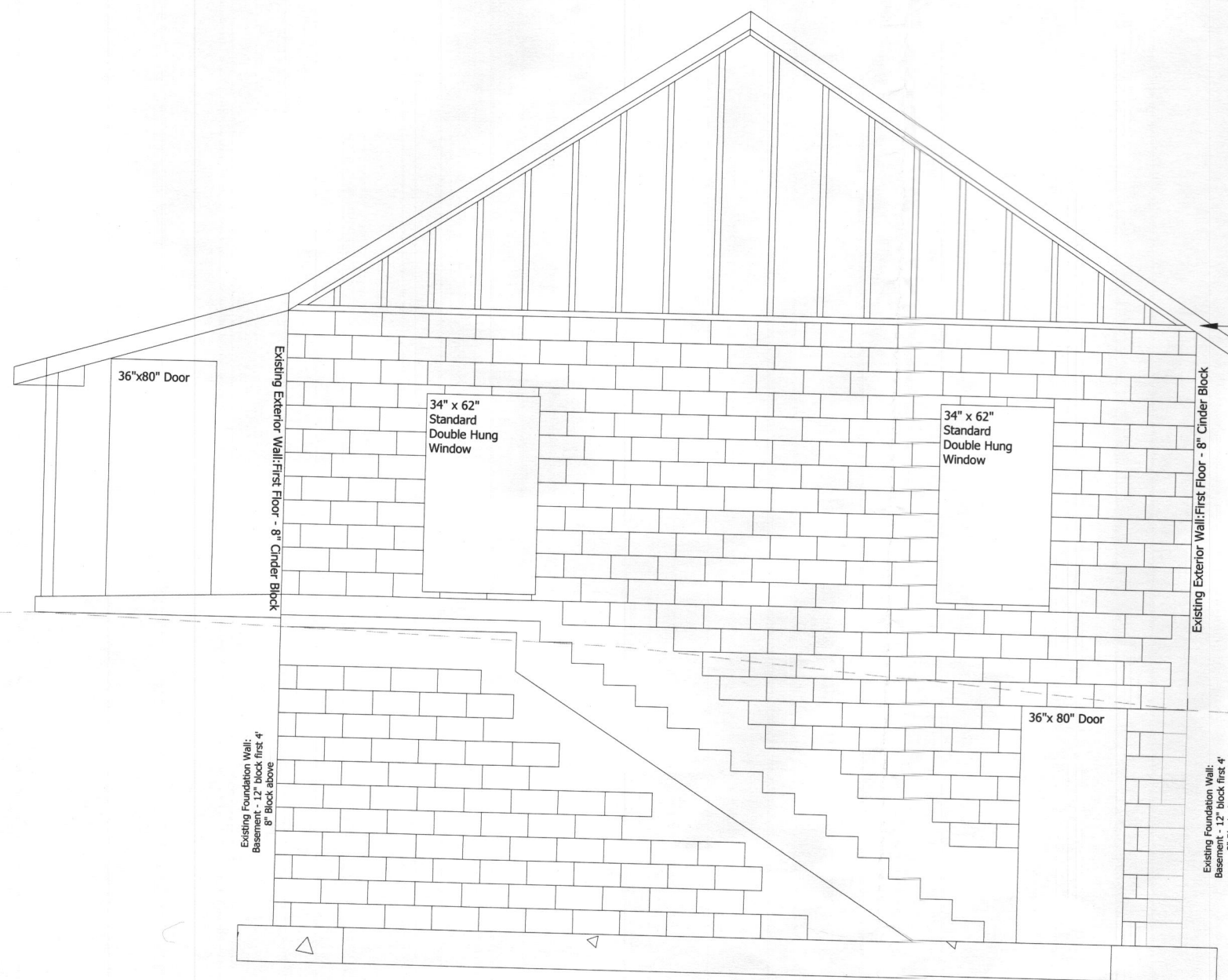
REV. 7/13/16 - TT



**MPO Systems, LLC**  
16606 Dubbs Rd, Sparks, MD 21152  
429 Twin Arch Rd, Mt Airy, MD 21771  
Basement  
Submitted 5/10/2016







Existing Roof  
2" x 8" Stick Built

Ground Level

**MPO Systems, LLC**  
16606 Dubbs Rd, Sparks, MD 21152  
429 Twin Arch Rd, Mt Airy, MD 21771  
Side View  
Sheet 10 of 16  
Submitted 4/22/2016

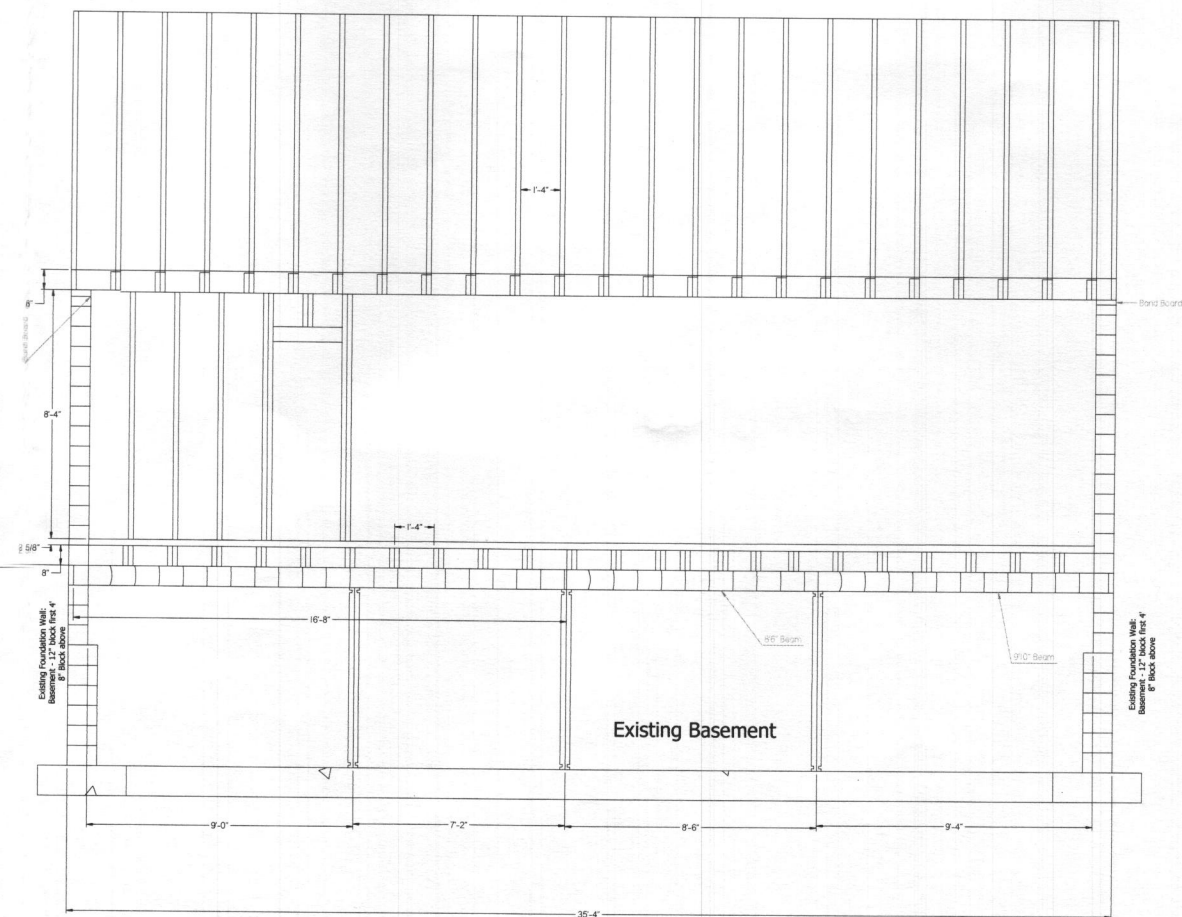
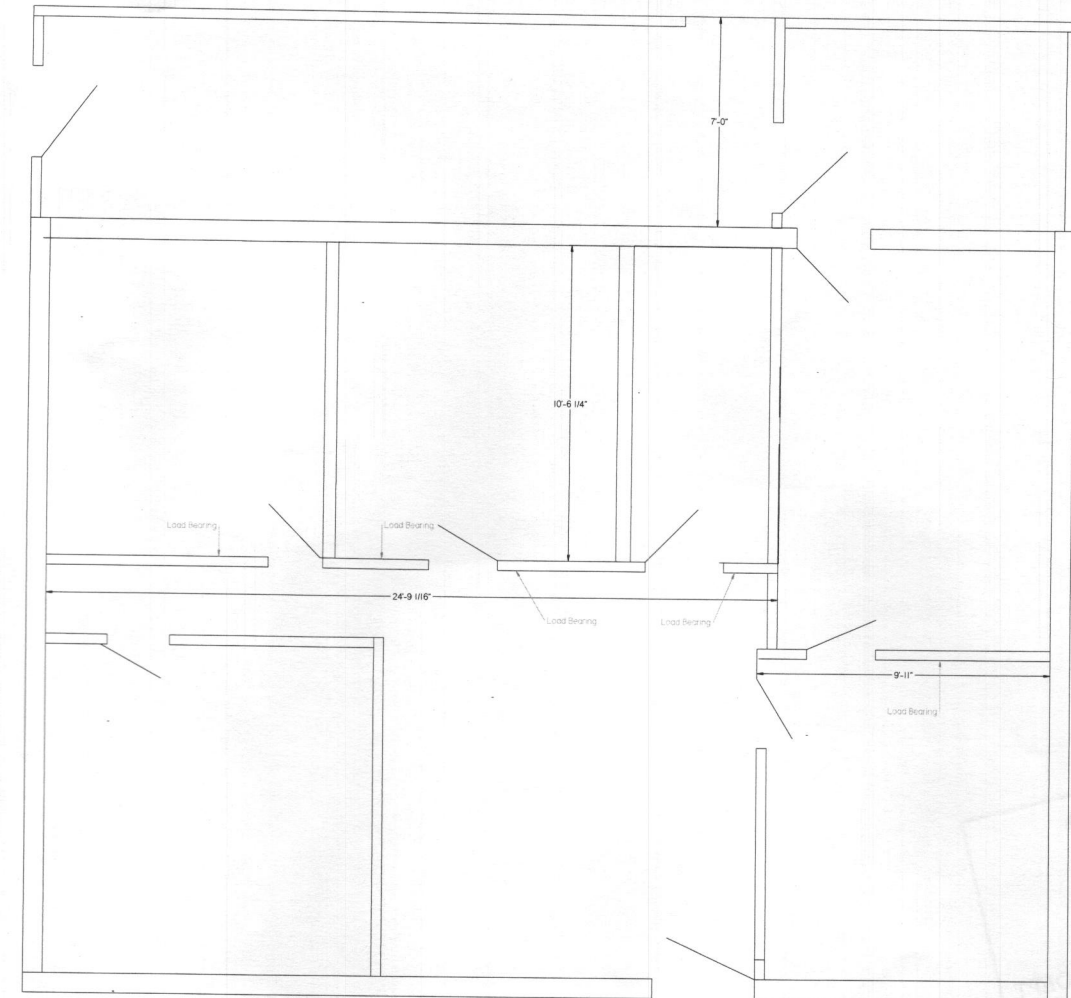
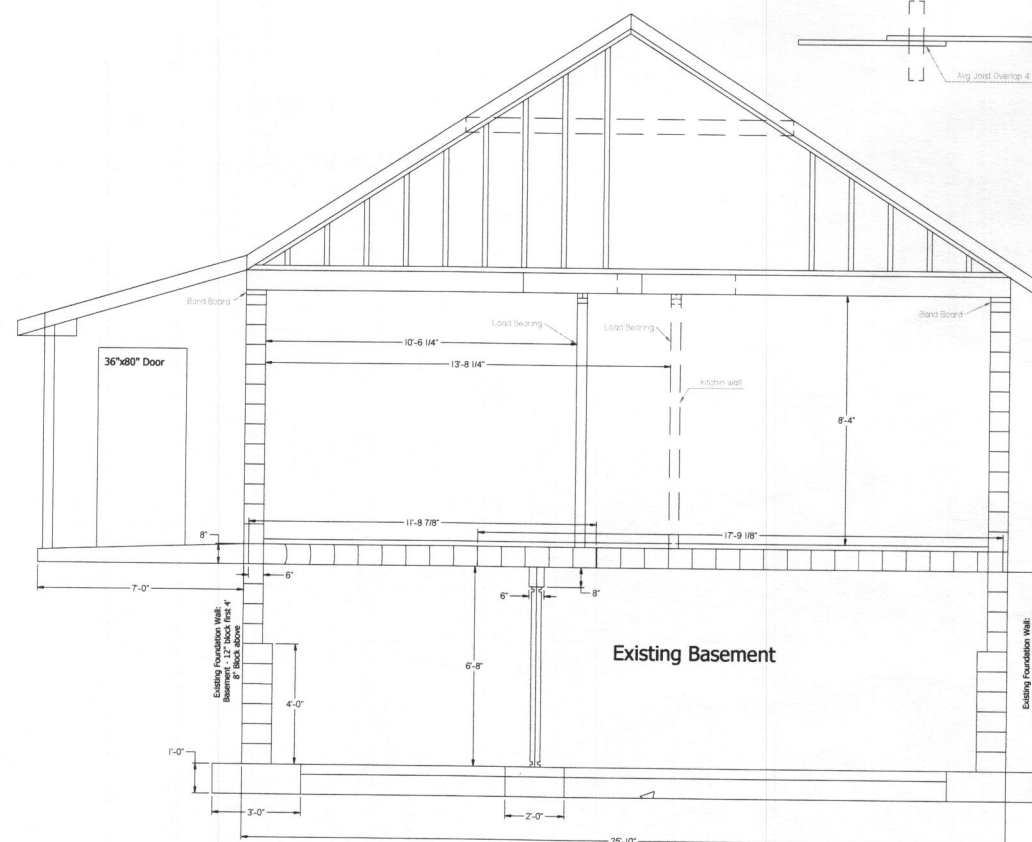


**MPO Systems, LLC**

16606 Dubbs Rd, Sparks, MD 21152

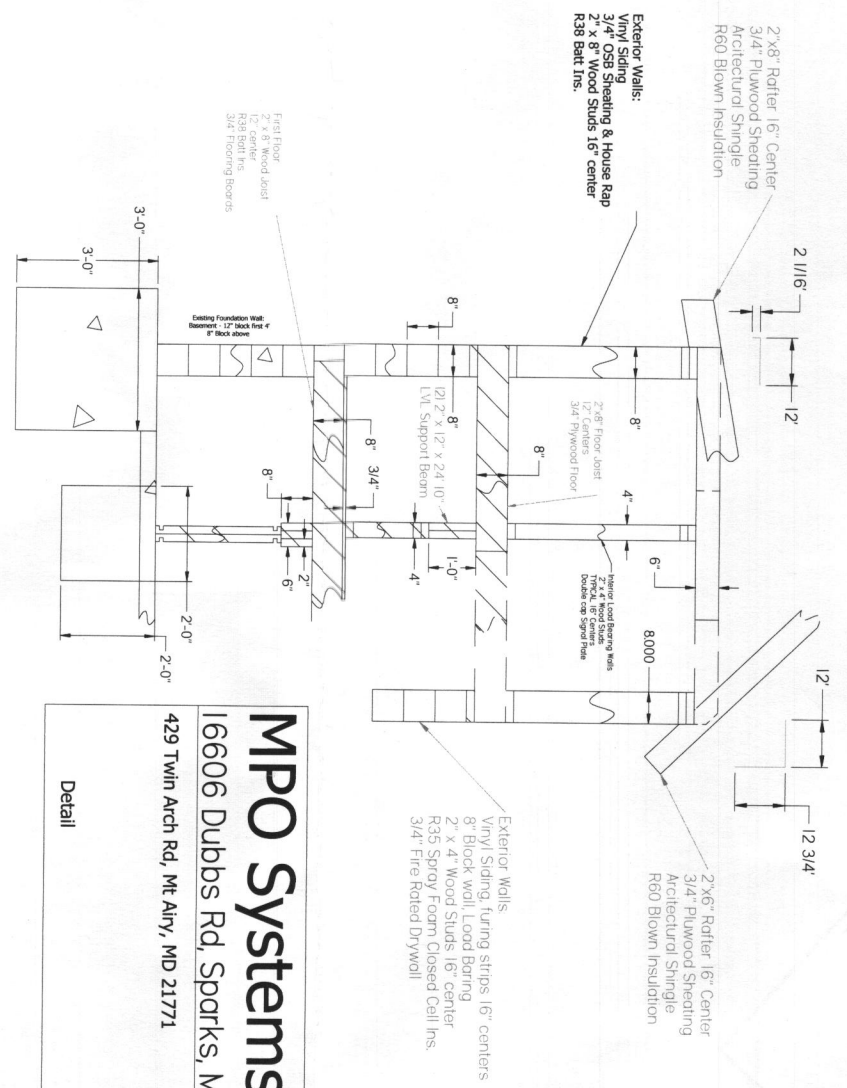
429 Twin Arch Rd, Mt Airy, MD 21771

Load Bearing View



7 of 8

8 OF 8



**MPO Systems, LLC**  
16606 Dubbs Rd, Sparks, MD 21152  
429 Twin Arch Rd, Mt Airy, MD 21771  
Detail