DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3000

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B08001977

Building Address 13354 TRIADELPHIA ROAD ELLICOTT CITY MD 21042

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates 9K9 Lot size _____

Property Owner's Name JOE ANDERSON

Address 13354 TRIADELPHIA ROAD

City ELLICOTT CITY State MD Zip Code 21042

Phone (410)531-1198 Phone _____

Applicant's Name & Mailing Address (if other than stated hereon):
STEVE BOWERS 7 HAYMARKET CRT BALT 21236

Phone (410) 793-0600 Fax

Existing Use SFD

Proposed Use SFD W/DECK

Estimated Construction Cost $ 19900.-

Description of Work 27'X24' IRREGULAR SHAPED OPEN WOOD DECK W/ STEPS

Contractor Company Lark Fence Co

Contact Person STEVE BOWERS

Address 1114 RT 3 NORTH

City CROFTON State MD Zip Code 21114

License No. 9015.01

Phone (410) 793.0600 Fax

Occupant or Tenant OWNER

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:
_____ Reinforced Concrete
_____ Structural Steel
_____ Masonry
_____ Wood Frame

_____ State Certified Modular

Utilities

Water Supply:
____ Public
____ Private

Sewage Disposal:
____ Public
____ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
____ Full
____ Partial
____ Other Suppression
____ # of Heads

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics

SF Dwelling ☒ SF Townhouse ☐

	Depth	Width
1st floor:		
2nd floor:		
Basement:		

Finished Basement ☐ Unfinished Basement ☐
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms _____
Height: _____
Multi-family dwellings:
No. of efficiency units: _____
No. of 1 BR units: _____
No. of 2 BR units: _____
No. of 3 BR units: _____

Other Structure: _____
Dimensions: _____
Footings: _____
Roof Height: _____

_____ State Certified Modular
_____ Manufactured Home

Utilities

Water Supply:
____ Public
☒ Private

Sewage Disposal:
____ Public
☒ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
____ NFPA #13D
____ NFPA #13R
____ Other:

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

R. Steven Bowers

Print Name

AGENT

Title/Company

7/2/2008

Date

Checks payable to: ***DIRECTOR OF FINANCE OF HOWARD COUNTY***
** PLEASE WRITE NEATLY AND LEGIBLY. **

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	7/2/08	
Fire Protection		

Is Sediment Control approval required prior to issuance? YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐
ONE STOP 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 NewTown Zone _____
SDP/Red-line approval date _____

PROPERTY ID#:	
Filing fee	$
Permit fee	$
Excise tax	$
Add'l per. fee	$
TOTAL FEES	$
Sub-total paid	$
Balance due	$
Check	#
Validation	#

Accepted by _____

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

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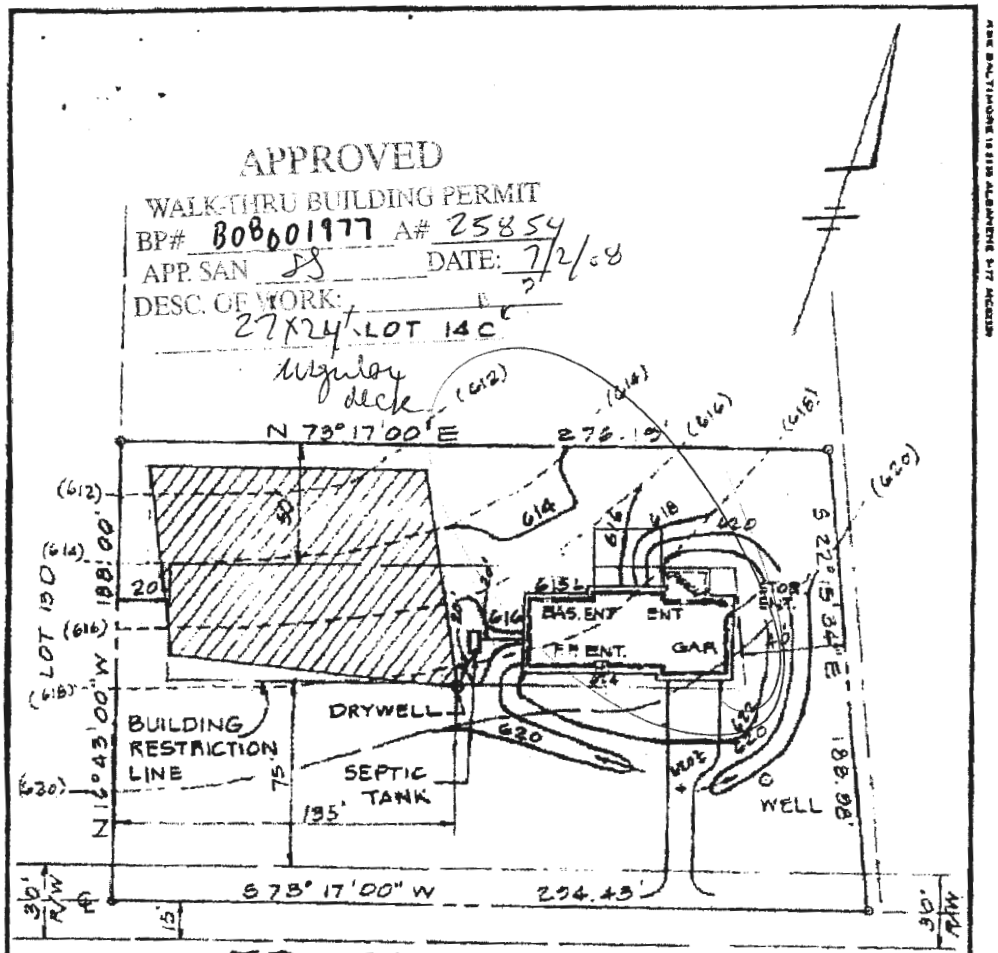
APPROVED
WALK-THRU BUILDING PERMIT
BP# B08001977 A# 25854
APP. SAN SS DATE: 7/2/08
DESC. OF WORK:
27X24' LOT 14C
injury deck



TRIADELPHIA ROAD

HOUSE:	SEPTIC TANK:	DRYWELL:	WELL:
F.P.: 624.6	EX.GR: 617.5	EX.GR: 618.5	EX.GR: 620.2
BAS: 615.6	FIN.GR: 617.0	FIN.GR: 618.5	FIN.GR: 620.2
GAR: 624.43	INV. IN: 613.2	INV. IN: 612.5	
PORCH: 624.43	INV. OUT: 612.0		
INV. OUT: 613.6			

TITLE: GRADING STUDY

PROJECT: TRIADELPHIA FARMS - SECTION II LOT 14A

LOCATION: THIRD ELECTION DISTRICT, HOWARD COUNTY, MD.

DATE	DESIGN BY	DRAWN BY	CHECKED BY
AUG. 3, 1977	W.H.N.	W.H.N.	D.R.
SCALE: 1" = 50'	JOB NO.: 77180	DRAWING NO.: 1 OF 1	

boender associates
engineers
surveyors
planners
BALTIMORE 301-465-7777 • SALISBURY 301-749-1266

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1910
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B07002018

Building Address 13354 Triadelphia Rd Ellicott City, MD 21042

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning Map Coordinates Lot size

Property Owner's Name Joseph + Linda Anderson

Address 13354 Triadelphia Rd

City Ellicott City State MD Zip Code 21042

Home Phone 443-546-3066 Work Phone 443-691-5944

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

Phone Fax

Existing Use SFD

Proposed Use Same w/ Deck

Estimated Construction Cost $ 2600.00

Description of Work Above ground pool 21' Diameter, 4' Deep - Filled by truck, Fence to code

Contractor Company C+D Installations

Contact Person

Address

City _____ State _____ Zip Code _____

License No. _____

Phone Fax

Occupant or Tenant Joseph + Linda Anderson

Contact Name Linda Anderson

Address 13354 Triadelphia Rd

City Ellicott City State MD Zip Code 21042

Phone 443-546-3066 Fax 240-269-0835

Engineer or Architect Company _____

Contact Person

Address

City _____ State _____ Zip Code _____

Phone Fax

BUILDING DESCRIPTION - *COMMERCIAL*

Building Characteristics

Height:

No. of stories:

Gross area, sq. ft. per floor:

Use group:

Construction type:
_____ Reinforced Concrete
_____ Structural Steel
_____ Masonry
_____ Wood Frame

_____ State Certified Modular

Utilities

Water Supply:
____ Public
____ Private
Sewage Disposal:
____ Public
____ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
____ Full
____ Partial
____ Other Suppression
____ # of Heads

BUILDING DESCRIPTION - *RESIDENTIAL*

Building Characteristics

SF Dwelling ☒ SF Townhouse ☐

	Depth	Width
1st floor:		
2nd floor:		
Basement:		

Finished Basement ☐ Unfinished Basement ☐
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms _____
Height: _____
Multi-family dwellings:
No. of efficiency units: _____
No. of 1 BR units: _____
No. of 2 BR units: _____
No. of 3 BR units: _____

Other Structure: _____
Dimensions: _____
Footings: _____
Roof Height: _____

_____ State Certified Modular
_____ Manufactured Home

Utilities

Water Supply:
____ Public
✓ Private
Sewage Disposal:
____ Public
✓ Private

Electric Yes ☐ No ☐
Gas Yes ☐ No ☐

Heating System:
Electric ☐ Oil ☐
Natural Gas ☐
Propane Gas ☐

Sprinkler system: N/A ☐
_____ NFPA #13D
_____ NFPA #13R
_____ Other:

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Linda Anderson
Applicant's Signature

Linda Anderson
Print Name

Title/Company

5/24/07
Date

Checks payable to: ***DIRECTOR OF FINANCE OF HOWARD COUNTY***

** PLEASE WRITE NEATLY AND LEGIBLY. **

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	5/24/07	R Bachman
Fire Protection		

Is Sediment Control approval required prior to issuance?
YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START: ☐
ONE STOP 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 _____

PROPERTY ID#:	
Filing fee	$ _____
Permit fee	$ _____
Excise tax	$ _____
Add'l per. fee	$ _____
TOTAL FEES	$ _____
Sub-total paid	$ _____
Balance due	$ _____
Check	# 2399
Validation	# _____

Accepted by _____

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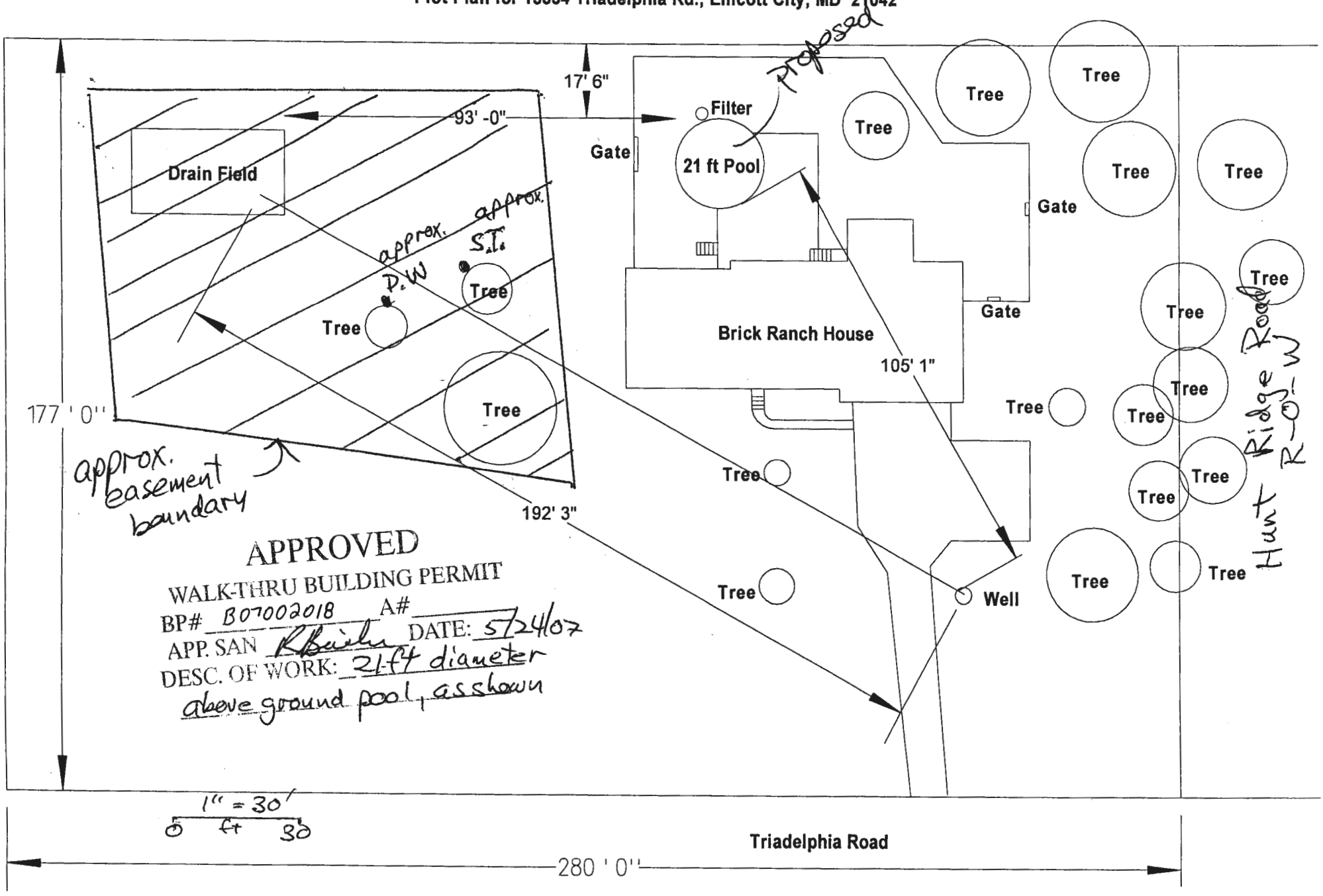
Rev. 11/4/04

Plot Plan for 13354 Triadelphia Rd., Ellicott City, MD 21042



APPROVED

WALK-THRU BUILDING PERMIT

BP# B07002018 A#

APP. SAN RBuilder DATE: 5/24/07

DESC. OF WORK: 21-ft diameter above ground pool, as shown