DOA6000012

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.: B1600050413

Building Address: 12014 Triadelphia Rd
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: _____
Estimated Construction Cost: $ _____
Description of Work: _____

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

Property Owner's Name: MARTIN SIEGEL
Address: 12014 TRIADELPHIA RD
City: ELLICOTT CITY State: _____ Zip Code: 21042
Phone: 410 905 5228 Fax: 443-535-2387
Email: _____

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

Contractor Company: Paul Davis Restoration
Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: _____
License No.: 39055
Phone: _____ Fax: _____
Email: Chris@PDRHOWA.com

Engineer/Architect Company: _____
Responsible Design Prof.: _____
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:	1st floor:
	2nd floor:
Area of construction (sq. ft.):	Basement:
	☐ Finished Basement
Use group:	☐ Unfinished Basement
	☐ Crawl Space
Construction type:	☐ Slab on Grade
☐ Reinforced Concrete	No. of Bedrooms:
☐ Structural Steel	**Multi-family Dwelling**
☐ Masonry	No. of efficiency units:
☐ Wood Frame	No. of 1 BR units:
☐ State Certified Modular	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

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:	

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 _____ *Print Name* _____

Email Address TSKLM@yahoo.com *Date* 12/13

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	12/19/16	R Burke

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

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:	

Filing Fee	$
Permit Fee	$
Tech Fee	$
Excise Tax	$
PSFS	$
Guaranty Fund	$
Add'l per Fee	$
Total Fees	$
Sub- Total Paid	$
Balance Due	$
Check	# 194

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

* For Truss Replacement Health did not review.

DDA16000012

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: _____

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Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFD
Proposed Use: SFD
Estimated Construction Cost: $ 120,000
Description of Work: REPLACE 7 DAMAGED TRUSSES ROOF SHEATHING / ROOF, REPAIR MASONRY VENEER (NON-STRUCTURAL), REPLACE INSULATION DRYWALL / FLOORING (AS-BUILT / PER CODE)
Occupant/Tenant Name: _____
Was tenant space previously occupied? ☐Yes ☐No
Contact Name: Apx 980 Sq. ft. to original condition
Address: _____
City: * no incident report created * State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: MARTIN SIEGEL
Address: 12014 TRIADELPHIA RD
City: ELLICOTT CITY State: MD Zip Code: 21042
Phone: 410 905 5228 Fax: _____
Email: _____

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

Contractor Company: PAUL DAVIS RESTORATION
Contact Person: CHRIS LAMBROS
Address: 4785 Suite 103 DORSEY HALL DR
City ELLICOTT CITY State: MD Zip Code: 21042
License No.: 39055
Phone: 443 875 5099 Fax: 410 730 6160
Email: CHRIS@PDRHOWA.COM

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

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☐Yes ☑No	Roof:
Roadside Tree Project Permit #	☐ State Certified Modular
	☐ Manufactured Home

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
NOV 21 2016
LICENSES & PERMITS DIVISION

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Applicant's Signature — Print Name: Chris Lambros
Email Address: CHRIS@PDRHOWA.COM — Date: 11/21/16
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		

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Side St.:	
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Is Entrance Permit Required?	☐ Yes ☐No
Historic District?	☐ Yes ☐No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	$ 135.00
Permit Fee	$
Tech Fee	$
Excise Tax	$
PSFS	$
Guaranty Fund	$
Add'l per Fee	$
Total Fees	$
Sub- Total Paid	$
Balance Due	$
Check	# 2055

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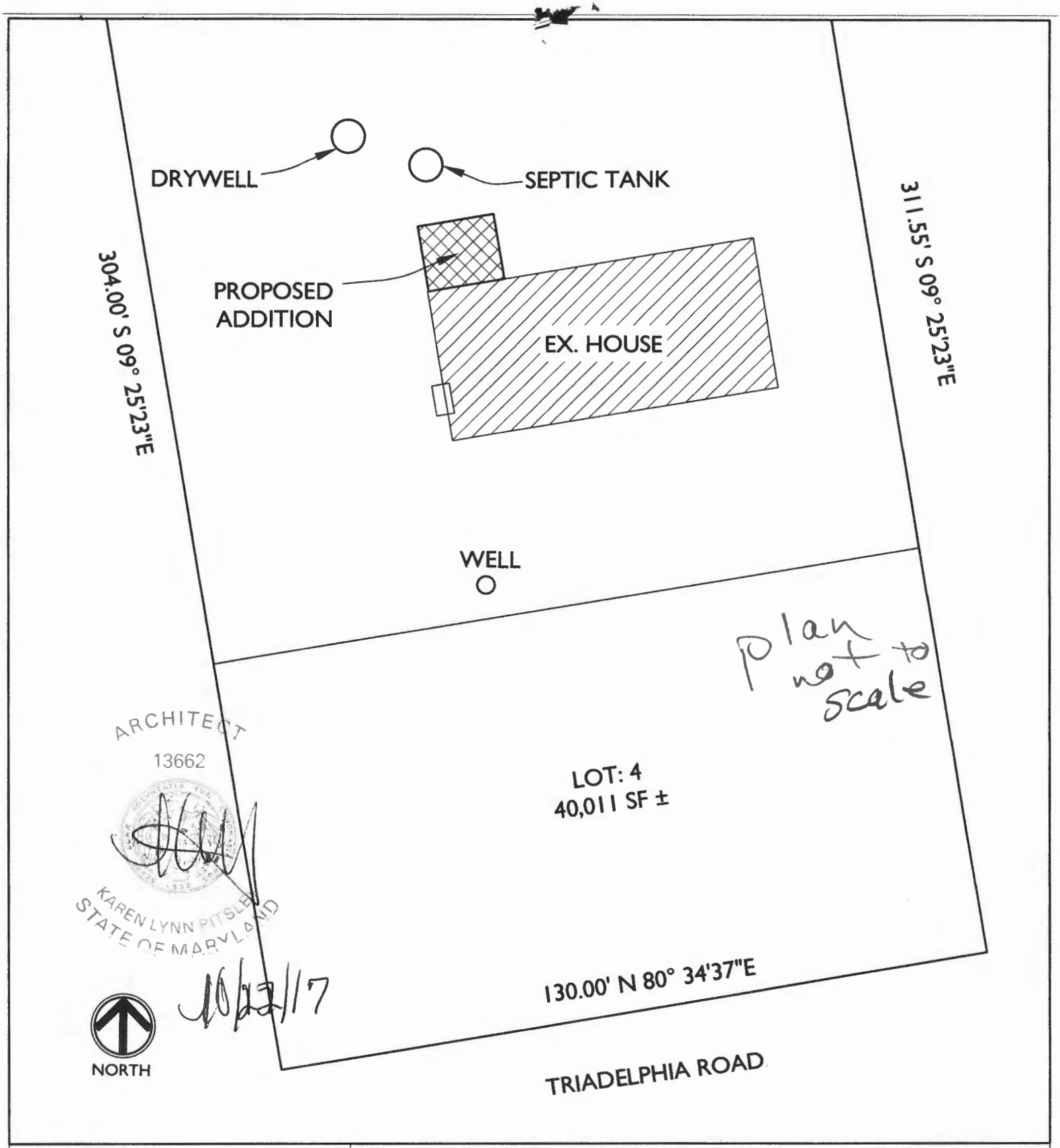

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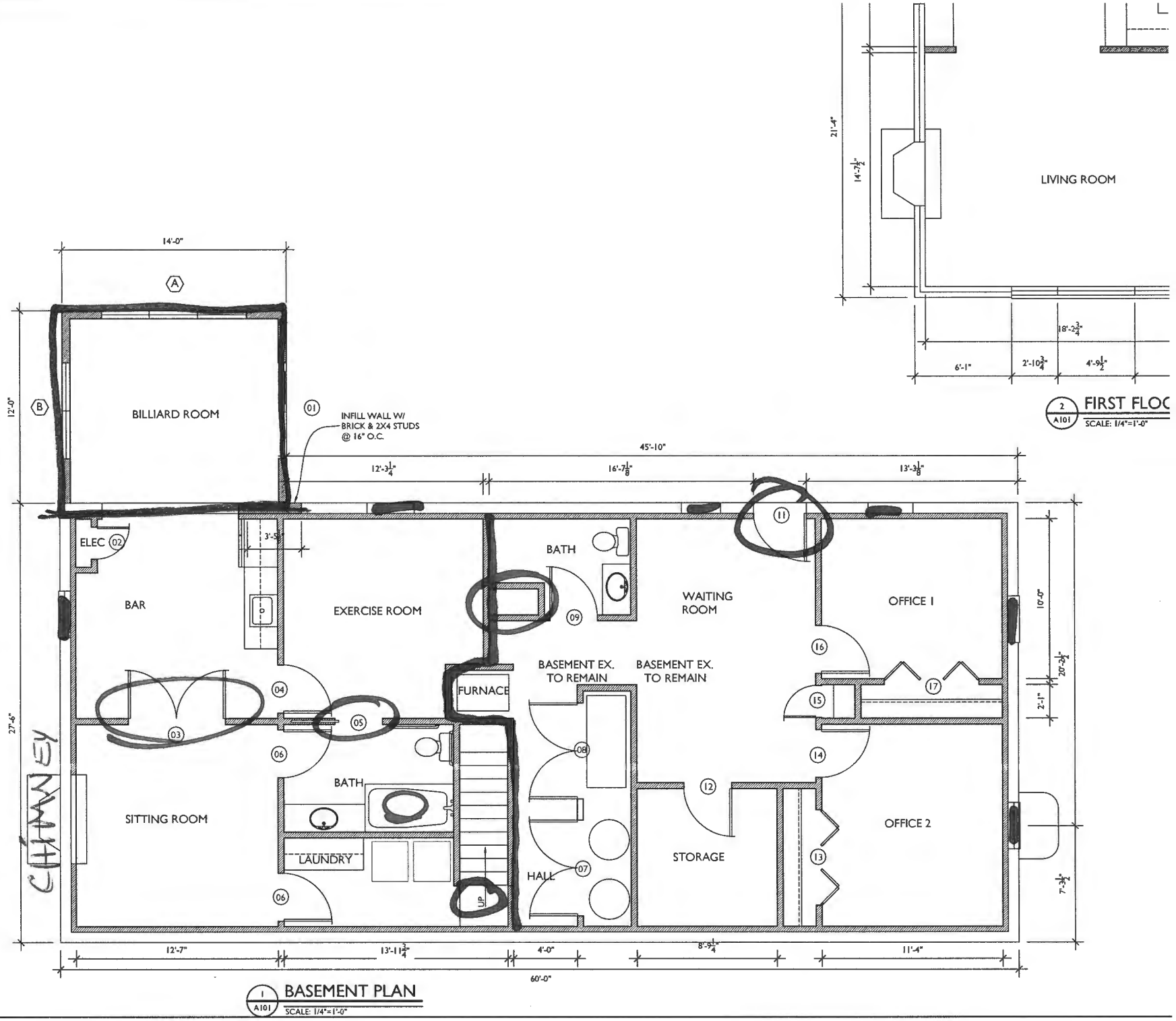
Highland, MD 20777
301-776-2666
301-776-2886 fax
1-877-828-7267
info@TransformingArchitecture.com
www.TransformingArchitecture.com

MARTIN-SIEGEL

12014 TRIADELPHIA RD, ELLICOTT CITY MD 21042

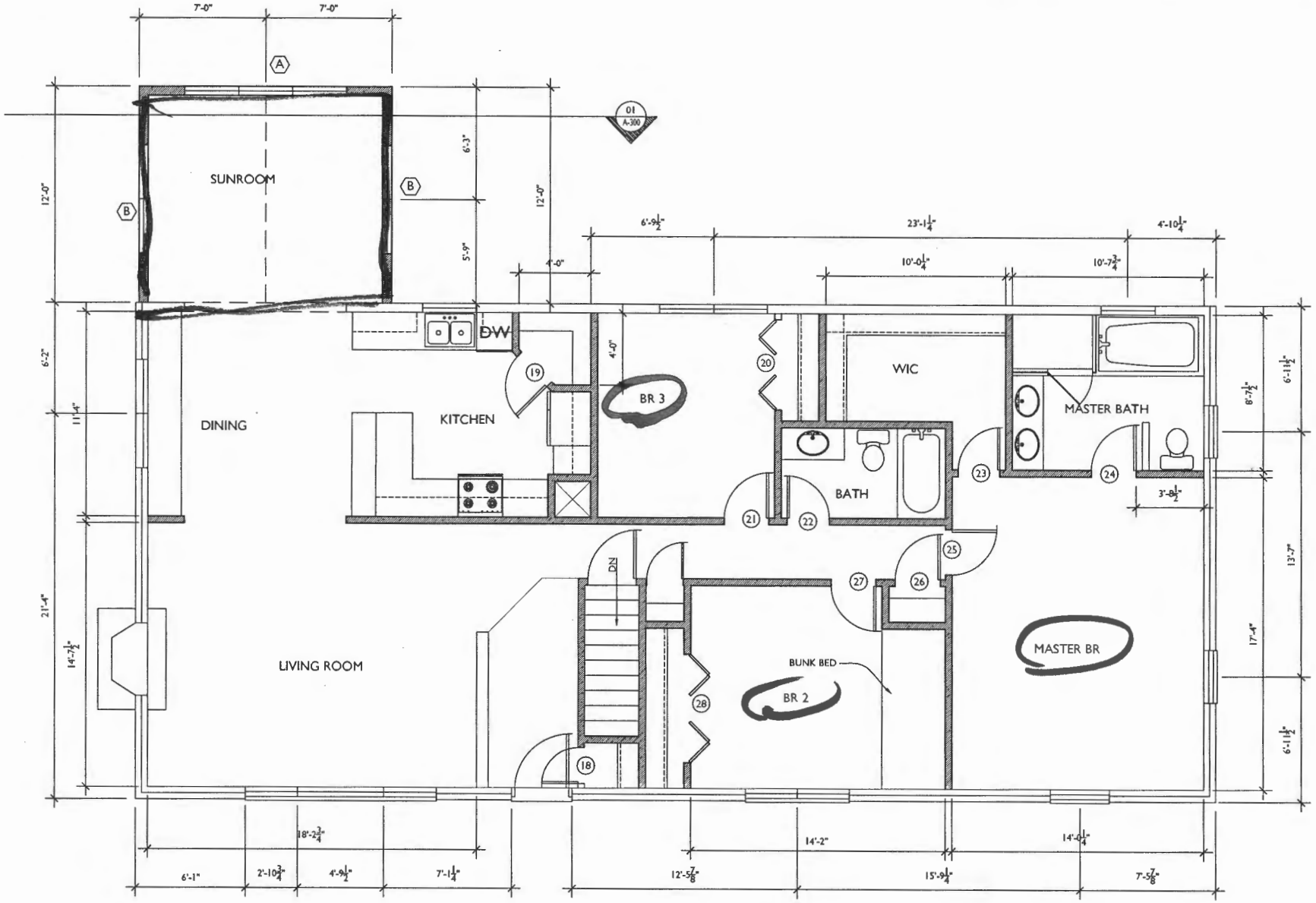
Site Plan

SCALE : 1" = 30'	DATE: 11/22/2016	PROJECT No: 16-289



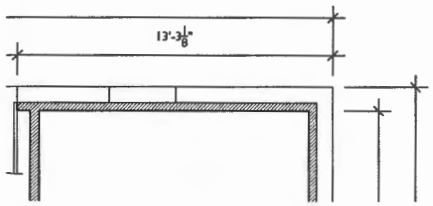
2 / A101 FIRST FLOOR
SCALE: 1/4"=1'-0"

1 / A101 BASEMENT PLAN
SCALE: 1/4"=1'-0"



2 A101 **FIRST FLOOR PLAN**

SCALE: 1/4"=1'-0"



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