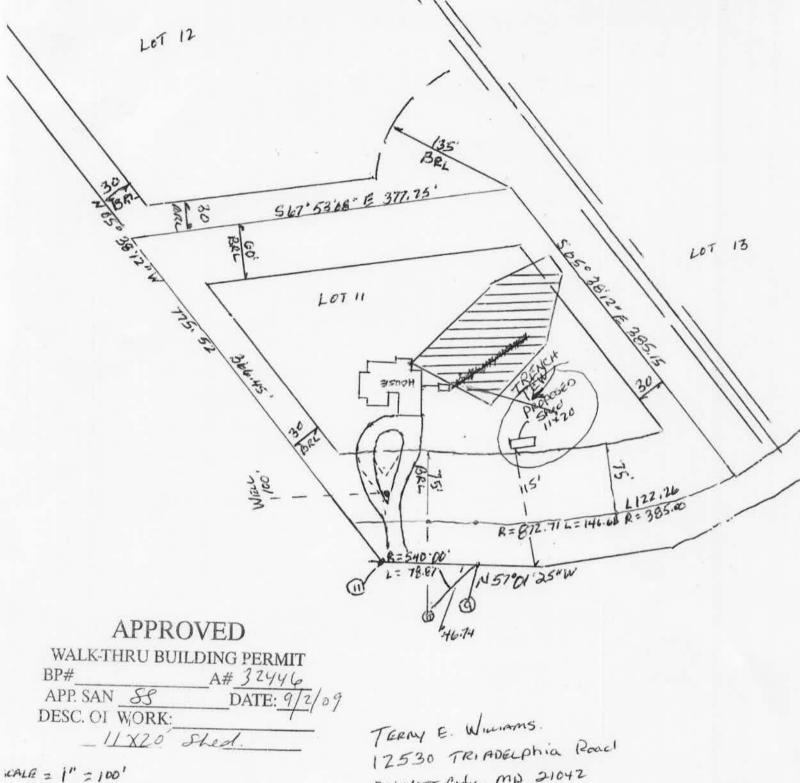
PERMITS (410) 313-245 DISPECTIONS (410) 313-245 DISPECTIONS (410) 313-1 AUTOMATED INFORMATION (410)	5 #10 0) 313-3800	HOWARD COUNT		CATION	TION PERMIT NUMBER		7 IMBER
Building Address 125	30 TR	1ADEL Phia	Road		s Name Debb.	HARTY	
ELLICOTI City, 1	114 510	76		Address	A. L. State 6	10	Zin Code 21AUZ
Suite/Apt. #:SDP/WP/Petition #:				City Euclor City State MO Zip Code 310 42 Home Phone Work Phone Applicant's Name & Mailing Address, (if other than stated herein):			
Census Tract	Subdivis	ion TRADEUP	hia ux	kz/5	e & Mailing Addre	ess, (if other	than stated herein):
Section	Area	Lot					
Tax Map 2 2 Parcel Grid				Phone	Fax		
Zoning Map Coor	rdinates	Lot Size					A . 1 A
Existing Use Proposed Use STERAGE SHED. 220 SF Estimated Construction Cost \$ -0-			_	Contractor Company Many Author Repair & Renewal Contact Person Therey Williams Address 12530 TRIPURE Phoce Reach			
				Address 125	To JEINTUE	2pnice	Roace
Description of Work Plp	CE a 11	x20 Shed	- 1	City EUICETT CL State MO Zip Code 3104Z			
ON LOT AT PROPOSED LOCATION.			_	Phone 443-463-376/			
ccupant or TenantTkf	iny Will	iams		Engineer or Arch			
Contact Name TERRY WILLIAMS				Contact Person			
Address 12530 TRIADELPHIE Road				Address			
City Ellicott Cty State MO Zip Code 21047				City State Zip Code			
Phone 410-531-6586 Fax				Phone Fax			
BUILDING DESC		COMMERCIAL		4,2,4,4,4	ING DESCRIPT	ION PEG	IDENTIAL
Building Characteristics		Utilities		Building Ch	naracteristics	ION - KES	Utilities Utilities
eight:	Water Supply Public			SF Dwelling SF T Depth Width	ownhouse 🗆	Water Supp	dy:
o. of stories:	Private	Will die		1st floor:		Public Private	
oss area, sq. ft. per floor:	Sewage Dispo	sat		2 nd floor: Basement:		Sewage Dis	posal:
	Private					Public	e
se group:	Electric Y	es 🗆 No 🗆		Finished Basement Unf Space Slai	inished Basement Crawl		
onstruction type: Reinforced Concrete		ns 🗆 No 🖂		No. of Bedrooms	4		Yes (I No (I
Structural Steel	Heating System	m:		Multi-family dwelling		Heating Sys	
Masonry Wood Frame	Electric Natural Gas	Oil 🗆		No. of efficiency units No. of 1 BR units:		Electric E	Oil 🗆
	Propane Gas			No. of 2 BR units:		Natural Gas Propane Gas	
State Certified Modular	Sprinkler syste	m N/A =		No. of 3 BR units:			
	Full	III. N/A II		Other Structure:		Sprinkler sy: NFPA	stem: N/A_G-
	Partial Other Su	KANADOTAN '		Dimensions: Footings:		NFPA	#13R
	# of Hea	ppression ds		Roof:		Other:	
				State Certified M Manufactured Ho	ime		
E UNDERSIGNED HEREBY CERT REFELLA THAT HE/SHE WILL C THE ABOVE REFERENCED PROF IS PROPERTY FOR THE PURPOSE	PROTE NAT CREAT	ENGLISH TO THE TOTAL	WAKD COO	HE IS AUTHORIZED TO NTY WHICH ARE APPL		ATION; (2) THE THAT HE/SHE	AT THE INFORMATION IS WILL PERFORM NO WORK
IN PROPERTY FOR GUE PURPOSE	OF INSPECTING	THE WORK PERMITTED	AND POSTIN	io norices.	- /		HE RIGHT TO ENTER ONTO
plicant's Signature		`		IKAN	4 E. Win 4/09	inns	
A. Osmanic				Print Name	1 -		
Property M.				8/1	4/09		
tle/Company				Date	/		
tle/Company		eks navable to: DIRECT	TOR OF F	NANCE OF HOWA	RD COUNTY		
Cloper V	Che	**PLEASE W		LY AND LEGIBLY.			
		PLEASE WI	OR OFFIC	CE USE ONLY -			
ENCY DATE		**PLEASE WI	OR OFFIC	E USE ONLY - ETBACK INFORMA	ATION	Filing fee	PROPERTY ID #
ENCY DATE and Development, DPZ.		PLEASE WI	OR OFFIC	E USE ONLY - SETBACK INFORMA t:	ATION	Filing fee Permit fee	PROPERTY ID # 5
EENCY DATE and Development, DPZ te Highways		PLEASE WI	OR OFFIC DPZ S Fron	E USE ONLY - SETBACK INFORMA t:	ATION		PROPERTY ID # S S S
EENCY DATE and Development, DPZ te Highways		PLEASE WI	OR OFFIC DPZ S Fron Rear:	E USE ONLY - ETBACK INFORM/ t:		Permit fee	\$ 100 10
DATE and Development, DPZ te Highways Idding Officials v. Engineering, DPZ		PLEASE WI	POR OFFIC DPZ S Fron Rear: Side: Side S	E USE ONLY - ETBACK INFORM/ t:		Permit fee Excise tax	\$ \$ \$
TENCY DATE and Development, DPZ te Highways ilding Officials y. Engineering, DPZ alth 9/2/09	SIGNATUR	E APPROVAL	POR OFFICE DPZ S From Rear: Side: Side: All min	E USE ONLY- SETBACK INFORMA t:		Permit fee Excise tax Add'l per fee	\$ \$ \$ \$ \$
ate Highways filding Officials v. Engineering, DPZ alth e Protection Sediment Control approval requ	SIGNATUR	E APPROVAL	Pron Price Side: Side: Side S All min YES	E USE ONLY- ETBACK INFORM/ t: nimum setbacks met? NO rance Permit Requires	37	Permit fee Excise tax Add'l per fee FOTAL FEES Sub-total paid Balance due	\$ \$ \$ \$ \$
TENCY DATE and Development, DPZ ste Highways ilding Officials v. Engineering, DPZ alth 9/2/09	SIGNATUR	E APPROVAL	Fron Rear: Side: Side S All min YES	St.: mimum setbacks met? NO auce Permit Required	37	Permit fee Excise tax Add'l per fee FOTAL FEES Sub-total paid Balance due Check	\$
DATE and Development, DPZ ate Highways sidding Officials v. Engineering, DPZ aith PZ/09 atth Sediment Control approval requ	SIGNATUR J.C. Ired prior to issue	E APPROVAL	Property of the control of the contr	E USE ONLY- ETBACK INFORM/ t: nimum setbacks met? NO rance Permit Requires	37	Permit fee Excise tax Add'l per fee FOTAL FEES Sub-total paid Balance due	\$ \$ \$ \$ \$ \$



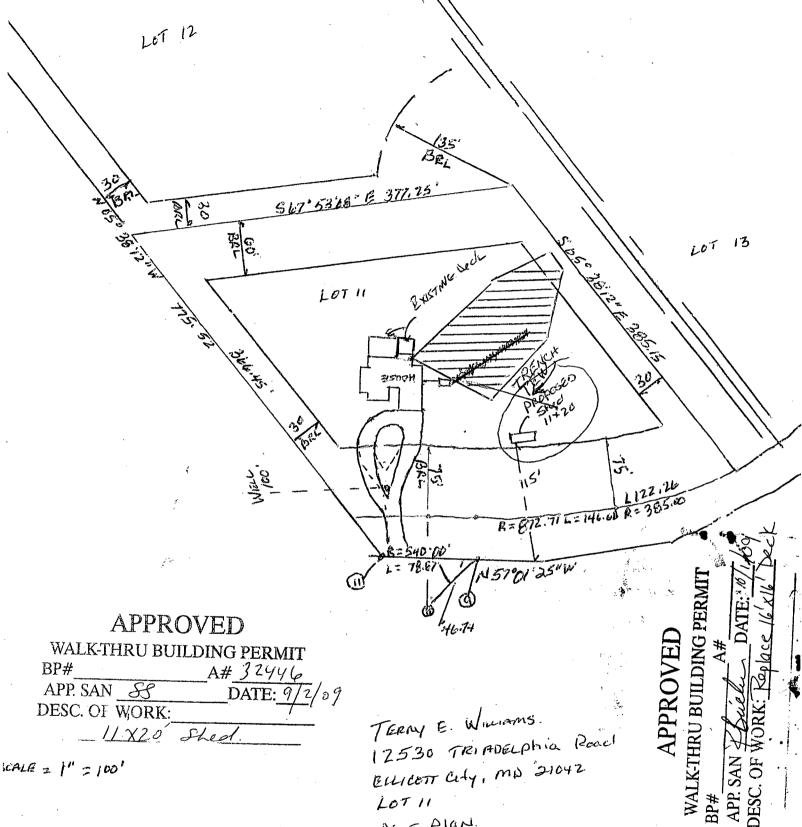
TERMY E. WILLIAMS.
12530 TRIADELPHIA ROAL
ELLICETT CLY, MD 21042
LOT 11
PLOT PLAN.

3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21043
PERMITS (410) 313-2455
INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B09002610

Building Address 125	30	Property Owner's Name Debbie	HAST-1		
TerADECPhia R.	oad EC, MB 21042	Address 12520 TRIADELPhia Recel City RC State MD Zip Code 31047			
Suite/Apt. #:SD	PP/WP/Petition #:	Home Phone Work Phone Applicant's Name & Mailing Address, (if other than stated herein):			
Census Tract	Subdivision				
SectionA	AreaLot				
Tax Map Parce	l Grid	DI -			
Zoning Map Coord	inates Lot Size	Phone Fax			
Existing Use Swele	pamily	Contractor Company MARY IAND Home Repaire Re			
Proposed Use Deck	- REPLACEMENT	Contact Person Tieney Williams			
Estimated Construction Cost	1,500	Contact Person Tierry Williams Address 12530 TRIADEE Phie Poace			
Description of Work Per	TOVE EXISTING DEEL	License No. 5/535			
AND FOOT PEINT	WEN. SAME SIZE W/ STEPS TO GRADE	Phone 443-463-374 Fax			
Occupant or Tenant TRA	eny Wurams	Engineer or Architect Company_	Engineer or Architect Company		
Contact Name Trady					
Address Same.		Contact Person			
	zZip Code	Address City State Zip Code			
	21p Code	,			
	RIPTION – <u>COMMERCIAL</u>	Phone	Fax		
Building Characteristics	Utilities	BUILDING DESCRIPTI			
Height:	Water Supply:	Building Characteristics SF Dwelling SF Townhouse	Water Supply:		
No. of stories:	Public Public	Depth Width	Public Public		
No. of stories:	Private Sewage Disposal:	1 st floor: 2 nd floor:	Private		
Gross area, sq. ft. per floor:	Public	Basement:	Sewage Disposal: Public		
Line groups	Private		Private		
Use group:	Electric Yes 🗆 No 🗅	Finished Basement Unfinished Basement Crawl space Slab on Grade	minania va -		
Construction type:	Gas Yes \square No \square	No. of Bedrooms	Electric Yes ☑ No □ Gas Yes □ No □		
Reinforced Concrete		Multi-family dwellings:	100 2 100 2		
Structural Steel Masonry	Heating System: Electric □ Oil □	No. of efficiency units:	Heating System:		
Wood Frame	Natural Gas	No. of 1 BR units:	Electric		
Stote Cont. Cod Madulou	Propane Gas □	No. of 2 BR units: No. of 3 BR units:	Propane Gas □		
State Certified Modular	Sprinkler system: N/A □	No. of 5 BR units.	Special description and Automatical States		
	Full	Other Structure:	Sprinkler system: N/A □ NFPA #13D		
	Partial	Dimensions: Footings:	NFPA #13R		
	Other Suppression # of Heads	Roof:	Other:		
		State Certified Modular			
		Manufactured Home	•		
ON THE ABOVE REFERENCED PROP	TIFIES AND AGREES AS FOLLOWS: (1) THAT HE OMPLY WITH ALL REGULATIONS OF HOWARD COERTY NOT SPECIFICALLY DESCRIBED IN THIS APOF INSPECTING THE WORK PERMITTED AND POS	PLICATION; (5) THAT HE/SHE GRANTS COUNTY TING NOTICES	OFFICIALS THE RIGHT TO ENTER ONTO		
- Kungl		TERRY E- W.	e um 5		
Applicant's Signature		TEMY E- W.2 Print Name 10/1/09			
Outhren		10/1/20			
Title/Company		Date			
		FINANCE OF HOWARD COUNTY			
AGENCY	FOR OF	ATLY AND LEGIBLY.** FICE USE ONLY = Z SETBACK INFORMATION			
Land Development, DPZ			PROPERTY ID #		
State Highways	D.		Permit fee \$		
The South Street Committee of the South Street Committee of the Street Committ	**************************************	The property and the second of the second of the second	a commerce of the desired by the second		
Building Officials	Sid	e:	Excise tax		
Dev. Engineering, DPZ	Sid	le St.:	Add'l per fee \$		
Health 10/1/2009	WK - 1				
	All	minimum setbacks met?	FOTAL FÉES \$		
Fire Protection	YI	S □= NO □	Sub-total paid \$		
Is Sediment Control approval requ	ired prior to issuance?	ntrance Permit Required?			
YES 🗇 NO 🗗	YES	TO NO DE	Balance due # \$ Check #		
	1110	toric District?	Validation #		
CONTINGENCY	YES	S 🗆 NO 🗅 Coverage for New Town Zone			
ONE STOP S	HOP:	/Red-line approval date	Accepted by		



PLOT PIAN.