

DEPT. OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLCOTT CITY, MD 21043
PERMITS (410) 313-2455
INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800
HOWARD COUNTY
PERMIT APPLICATION
B09002307
PERMIT NUMBER
Building Address 12530 TRIADELPHIA ROAD
ELLICOTT CITY, MD 21042
Property Owner's Name Debbie HARRY
Address
City ELLICOTT CITY State MD Zip Code 21042
Home Phone Work Phone
Applicant's Name & Mailing Address, (if other than stated herein):
Suite/Apt. #: SDP/WP/Petition #:
Census Tract Subdivision TRIADELPHIA WOODS
Section Area Lot 11
Tax Map 22 Parcel Grid
Zoning Map Coordinates Lot Size
Existing Use
Proposed Use STORAGE SHED 220 SF
Estimated Construction Cost \$ -0-
Description of Work PLACE A 11x20 SHED ON LOT AT PROPOSED LOCATION.
Occupant or Tenant TERRY WILLIAMS
Contact Name TERRY WILLIAMS
Address 12530 TRIADELPHIA ROAD
City ELLICOTT CITY State MD Zip Code 21042
Phone 410-531-6586 Fax
Contractor Company Maryland Home Repair & Renovations
Contact Person TERRY WILLIAMS
Address 12530 TRIADELPHIA ROAD
City ELLICOTT CITY State MD Zip Code 21042
License No. 515331
Phone 443-463-3761 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 4
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:
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
NFA #13D
NFA #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 [Signature] Terry E. Williams
Print Name
Date 8/16/09
Title/Company Owner

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 Officials
Dev. Engineering, DPZ
Health 9/2/09 [Signature]
Fire Protection
Is Sediment Control approval required prior to issuance?
YES NO
CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:
Distribution of Copies White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA
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
Accepted by
PROPERTY ID #
Filing fee \$
Permit fee \$
Excise tax \$
Add'l per fee \$
TOTAL FEES \$
Sub-total paid \$
Balance due \$
Check #
Validation #

Building Address 12530
TRIADephia Road E.C., MD 21042

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

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot Size _____

Existing Use SINGLE FAMILY

Proposed Use DECK REPLACEMENT

Estimated Construction Cost \$ 1,500

Description of Work REMOVE EXISTING DECK
AND REPLACE W/ NEW. SAME SIZE
AND FOOT PRINT. W/ STEPS TO GRADE
16x16.

Occupant or Tenant TERRY WILLIAMS

Contact Name TERRY WILLIAMS

Address SAME.

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Property Owner's Name Debbie HASTY

Address 12530 TRIADephia Road

City EC State MD Zip Code 21042

Home Phone _____ Work Phone _____

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

Phone _____ Fax _____

Contractor Company MARYLAND HOME REPAIR & REN.

Contact Person TERRY WILLIAMS

Address 12530 TRIADephia Road

City EC State MD Zip Code 21042

License No. 51535

Phone 443 463 3761 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 _____

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: _____

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
Terry Williams
Title/Company
OWNER

Print Name
TERRY E. WILLIAMS
Date
10/1/09

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
PLEASE WRITE NEATLY AND LEGIBLY.
FOR OFFICE USE ONLY -

AGENCY
Land Development, DPZ

DATE
10/1/2009

SIGNATURE APPROVAL
R. Buckner

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 # _____

Validation # _____

Accepted by _____

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

CONTINGENCY CONSTRUCTION START: ☐

ONE STOP SHOP: ☐

Distribution of Copies -

White: Building Officials

Green: LDD, DPZ

Yellow: DED, DPZ

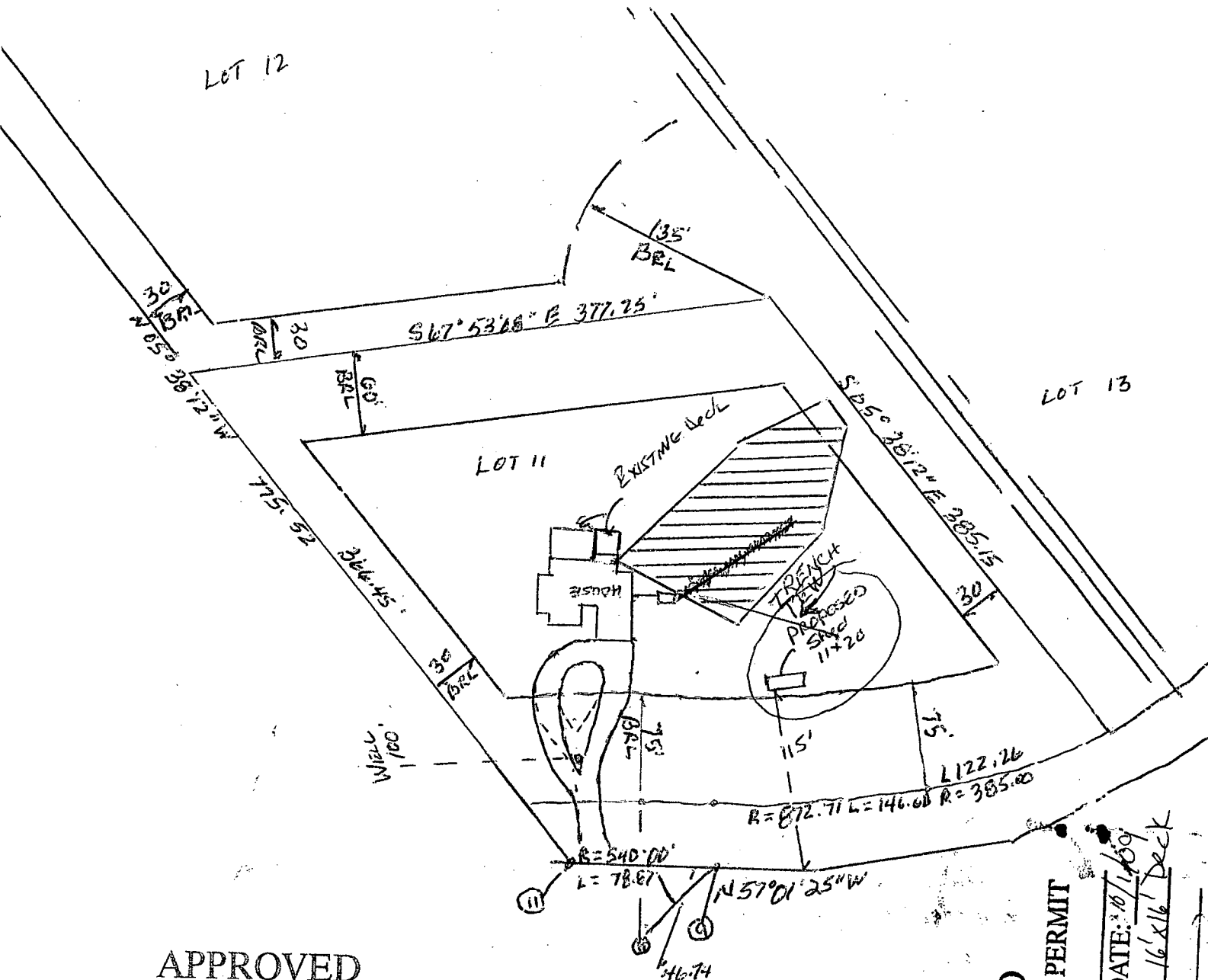
Pink: Health

Gold: SHA

T:\Operations\Updated forms

LOT 12

LOT 13



APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# 32446
APP. SAN SS DATE: 9/2/09

DESC. OF WORK: _____
11x20' Shed.

SCALE = 1" = 100'

TERMY E. Williams.
12530 TRIADELPHIA Road
ELLICOTT City, MD 21042
LOT 11
PLOT PLAN.

APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____
APP. SAN F. Buckner DATE: 10/1/09
DESC. OF WORK: Replace 16x16' Deck