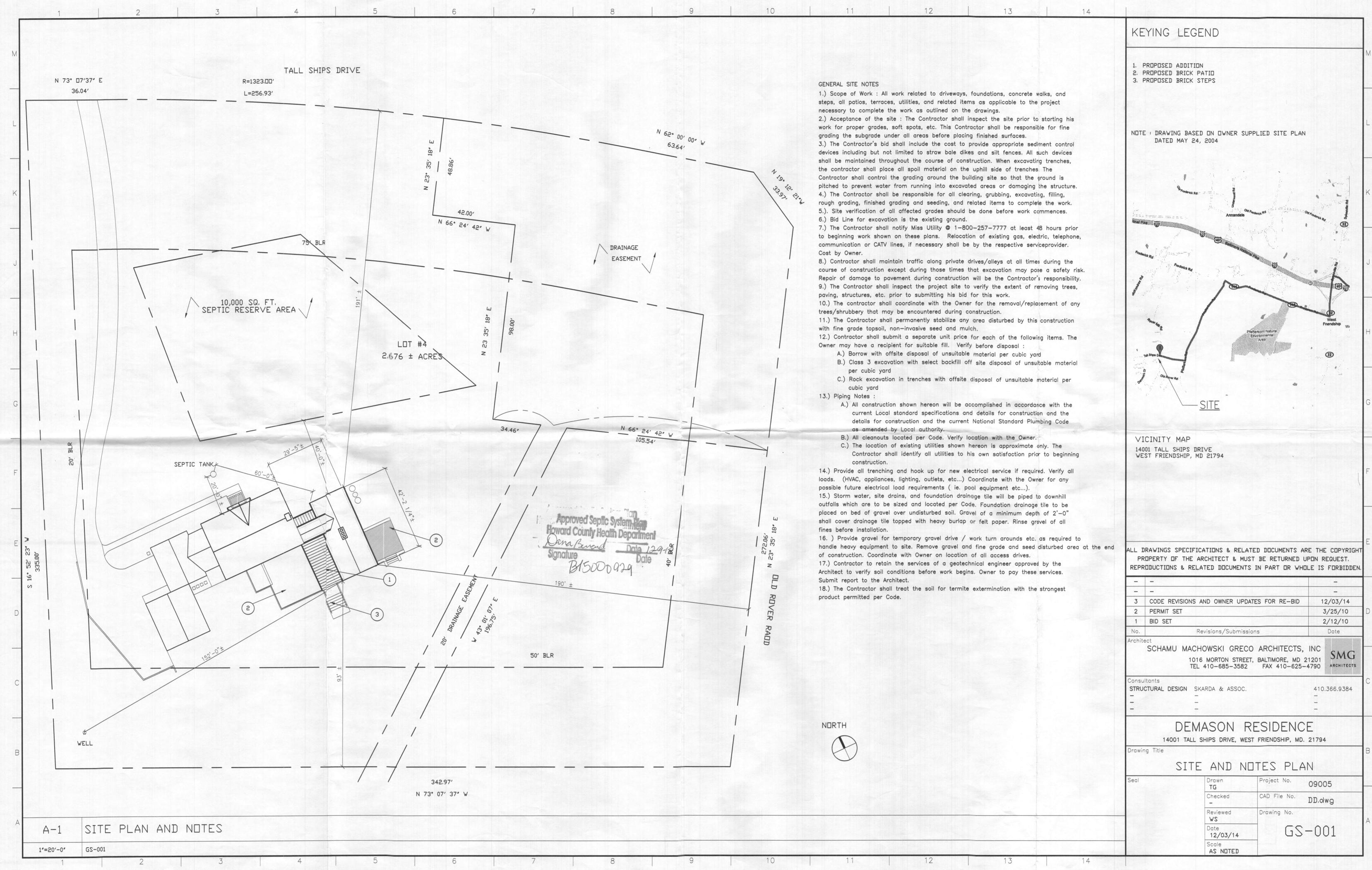


Building Permit Application
Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: 3

111801-	- 11 61- 3					
Building Address: 4001 Tall Ships Drive City: West Friendshipstate: MD zip Code: 21794			Property Owner's Name: Mr. + Mrs De masun Address: 14001 Ta U 5 hips Dr City: Nest-Friendshipstate: MD Zip Code: 21094 Phone:			
Suite/Apt. #SDP/WP/BA #:			City: West-Friendshuftate: M.D. Zip Code: 21794			
Census Tract: Subdivision:			Phone: Fax: Email:			
		//				
Section: Area: Lot:			Applicant's Name & Mailing Address, (If other than stated herein)			
Tax Map: Parcel: Grid:			Address: 15 West Aulisburg Rd # 400			
Zoning: Map Coordinates: Lot Size: 2.676			Applicant's Name & Mailing Address, (If other than stated herein) Applicant's Name: Melinda Aspel meler Address: IS West Aules bury Rd # 40 City: Timon I um State: MD Zip Code: 21093 Phone: 4 109775913 Fax: Email: maspel meler & poehulders. Con			
Existing Use: Single Fai	nily Home		Email: maspe me	iera	obebuila	ers. Lun
Proposed Use: 57ngle family hame			Contractor Company: DOVID L BUCKLEY			
Estimated Construction Cost: \$	00,000,		Contact Person: Melin	da A	spelm	eacr
Description of Work: 3 Story addition			Contact Person: Melinda Aspelme Oct Address: 676 STOOPS Rd City St Happung State: PA Zip Code: 17325 License No. 87879 Phone: 410 977 5963 Fax:			
Dismt theater + family rom 15t Floor der - family + 3rd						
	43 Des	Пис	1			
Was tenant space previously occupied? Ses ONO Contact Name: MY + MYS Demason			Engineer/Architect Company: SM 6 Archi Tect5			
Address: 14001 Tall Ships Drive			Responsible Design Prof.: Walter Schamu Address: 1016 Morton St			
						21
city: West Friendshy		21 197	City: Bacto State	2: 1(1)	Zip Code:	WILL CA
Phone:Fax:			City: <u>Batto</u> state: <u>Mb</u> zip Code: 2, 201 Phone: <u>410 685 3582</u> 2 410 625 4790			
Email:			Email:			
Commercial Building Characteristics			Utilities			(2 max 10)
Height: No. of stories:	Depth	wnhouse Width	Water Supply			40.11
Gross area, sq. ft./floor:	1st floor: 29 15"	42'2"	Public			
	1st floor: 24 5 The Basement: 215 The Basement:	12'0'	Derivate Well		· .	
Area of construction (sq. ft.):	Basement: 215"	42'2	Sewage Disposal ☐ Public			5 5 1 5 July 2
Use group:	Unfinished Basement		Private Septic			
	☐ Crawl Space		0 CD 1 C	No		
Construction type: ☐ Reinforced Concrete	□ Slab on Grade No. of Bedrooms: +		Gas: ☐ Yes ☐	No	13/2 - 1	1 1 1 1 1 1 1
☐ Structural Steel	Multi-family Dw		Heating System		service - de-	A Maria A Contractor
☐ Masonry	No. of efficiency units:		Electric ,□ Oil		r .	
☐ Wood Frame	No. of 1 BR units:		☐ Natural Gas ☐ Propane	Gas		· 7 95
☐ State Certified Modular	No. of 2 BR units: No. of 3 BR units:		☐ Other: Sprinkler System: ☐ Yes No			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Other Structure:					27/20
	Dimensions:					1 - 3
➤ Roadside Tree Project/Permit ☐Yes ☐No			Grading Pern	nit Number:		4,7,24
□ Yes No Roof: Roadside Tree Project Permit # □ State Certified Modu □ Manufactured Home		lar	Growing (crit			
			Building Shell Permit Number			
THE UNDERSIGNED HEREBY CERTIFIES AND AG WITH ALL REGULATIONS OF HOWARD COUNTY THIS APPLICATION; PATHAT HE/SHE GBANTS OF Applicant's Signature MAS DEL MULLY Email Address	WHICH ARE APPLICABLE THERETO,	; (4) THAT HE/SHE WI	LL PERFORM NO WORK ON THE ABOVE R	EFERENCED PRO	PERTY NOT SPECIFICA	ILLY DESCRIBED IN OTICES.
Title/Company		PLEASE WRITE NEA		LICEN	SES & PERM	
		-FOR OFFICE	PD 104 No Prior 1		substant th	
AGENCY DATE	SIGNATURE OF APPROVAL	DPZ SETBACK INFORMATION Front:		Filing Fee \$ 25.00		
State Highways		Rear:	1	Tech Fee	\$	
Building Officials	-	Side:		Excise Tax PSFS	\$	
PSZA (Zoning)			All minimum setbacks met? Yes No		und \$	
PSZA (Engineering)		Is Entrance Permit Required? ☐ Yes ☐ No				
Health 13-9-1 Description		Is Entrance Pe	rmit Required? 🗆 Yes 🗆 No	Add'I per F	ee \$	
Health 13-9-1	Beurer	Is Entrance Pe Historic Distri	rmit Required? 🗆 Yes 🗆 No		ee \$	



ROJECT: DEMASON RESIDENCE

