DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE ORINE ELLICOTT CITY, MO 21043 PERMITS (410) 313-2455 ASPECTIONS (410) 313-1810 ALTOMATEO JAY ORINA TONIA 101 313-2800

HOWARD COUNTY PERMIT APPLICATION

	PERMIT NUMBER	2
K	1811 1796	

Building Address <u>C957</u> W	estro H Place	Property Owner's Name Tom	Pat ?	
clarksuille,	MD 21029	Address 6953 Westrot		
Suite/Apt. #: SDP/WP/Pe	tition #:		1	
Census Tract Subdivision		city Ellicott City State		
SectionArea		Home Phore 301) \$54 2199 Work Phore 943 288 \$200 Applicant's Name & Mailing Address, (if other than stated hereon):		
Tax Map Parcel		Phone Fax		
Zoning Map Coordinates Existing Use Single Fam	Lot size	Contractor Company RY OWNER	4	
Proposed Use SINTLE FAM	. I Residence	Contact Person		
Estimated Construction Cost \$60,		Tom Patz		
Description of Work Adel ZO'X 2	Basement	Address 8953 Westcott Place		
7-00N - 0 Val N	14327-401	City Clarks will State D Zip Code 21029 License No. # 14		
		Phon(301)254-2199 Fax	A	
Occupant or Tenant Tom	Jatz	Engineer or Architect Company		
Contact Name From Dick	30N	Contact Person		
Address 3899 A State State	MET College Ave	Address		
Jane 2		CityState	Zip Code	
Phoney 10) 707- ONY Fax		Phone Fax		
BUILDING DESCRIPTION	N - <u>COMMERCIAL</u>	BUILDING DESCRIPTION - RESIDENTIAL		
Building Characteristics	<u>Utilities</u>	Building Characteristics	Utilities	
Height:	Water Supply: Public	SF Dwelling SF Townhouse Depth Width	Water Supply: Public	
No. of stories:	Private Sewage Disposal:	1st floor:	Private Sewage Disposal:	
Gross area, sq. ft. per floor:	Public Private	Basement:	Public Private	
}	Electric Yes 🗆 No 🗆	Finished Basement ☐ Unfinished Basement☐ Crawl space ☐ Slab on Grade ☐	Electric Yes No 🗆	
Use group.	Gas Yes□ No □	No. of Bedrooms Height: Multi-family dwellings:	Gas Yes ♥ No □	
Construction type:	Heating System:	No, of efficiency units; No. of 1 BR units;	Heating System: Electric □ Oil □	
Reinforced Concrete Structural Steel	Natural Gas □ Propane Gas □	No. of 2 BR units: No. of 3 BR units:	Natural Gas ☐	
Masonry Wood Frame		Other Structure:	Sprinkler system: N/A 🏻	
VVOOG Frame	Sprinkler system: N/A Full	Dimensions: Footings: Roof Height:	NFPA #13D NFPA #13R	
1				
State Certified Modular	Partial Other Suppression # of Heads	State Certified Modular	Other:	
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE	Other Suppression # of Heads (1) That he/she is authorized to make this apply she will perform no work on the above reference.	Manufactured Home LICATION; (2)THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE RENCED PROPERTY NOT SPECIFICALLY DESCRIBED BY THIS ARRIVED.		
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