

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B06004863

Building Address 12055 Windsor mass
Ellicott City, MD 21042
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract 603000 Subdivision Ellicott Meadows
 Section _____ Area _____ Lot 015
 Tax Map 16 Parcel _____ Grid 16-22
RC-Deo
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name NV Home
 Address 6085 Marshake Dr. #130
 City Elkridge State MD Zip Code 21075
 Home Phone _____ Work Phone 410-339-5956
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use SFD
 Proposed Use 11 w/Deck
 Estimated Construction Cost \$ 10,000
 Description of Work 10x14 deck
no steps

Contractor Company Edward Pacylowski
**PRO-BUILT
 CONSTRUCTION, INC.**
 13453 Long Days Court
 Highland, MD 20777-9757
 Address _____
 City _____ State _____ Zip Code _____
 License No. 20247
 Phone 301-859-0821 Fax 301-859-9632

Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Engineer or Architect Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____
<input type="checkbox"/> State Certified Modular	

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:
No. of Bedrooms _____	
Height: _____	
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
Other Structure: <u>Deck</u>	
Dimensions: _____	
Footings: <u>cast pier</u>	
Roof Height: _____	
<input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	

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.

[Signature]
 Applicant's Signature
President
 Title/Company

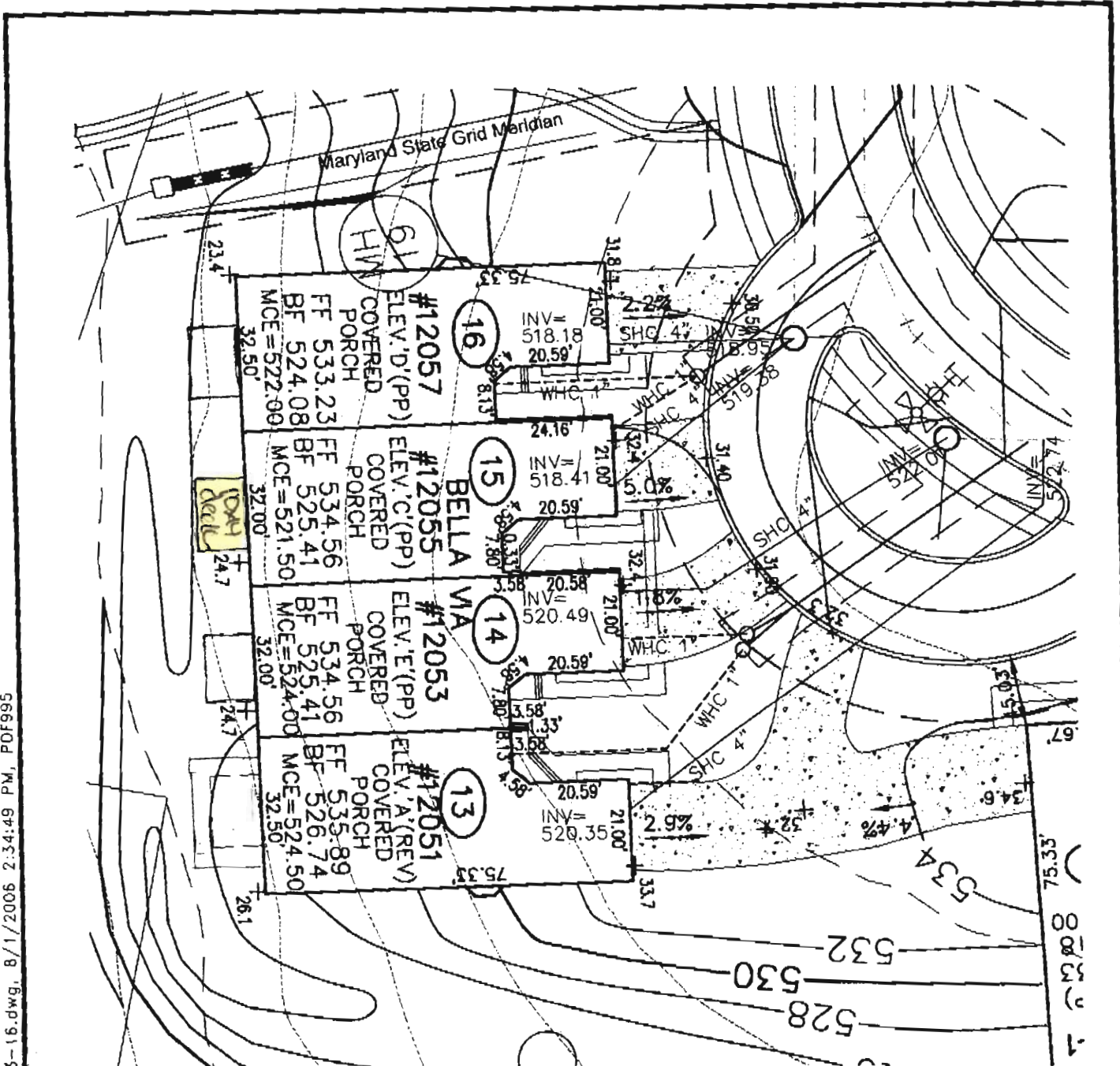
Edward Pacylowski
 Print Name
9/19/06
 Date

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 Official		
Dev. Engineering, DPZ		
Health	<u>9/29/06</u>	<u>[Signature]</u>
Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		
Distribution of Copies: White: Building Official Green: LDD, DPZ		

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$: _____
Rear: _____	Permit fee \$: _____
Side: _____	Excise tax \$: _____
Side St.: _____	Adm'l per. fee \$: _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES: \$: _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$: _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$: _____
Lot Coverage for New/Town Zone _____	Check # _____
SDP/Red-line approval date _____	Validation # _____
Accepted by _____	



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ROBERT H. VOGEL ENGINEERING, INC.
 ENGINEERS • SURVEYORS • PLANNERS
 8407 MAIN STREET TEL: 410.461.7666
 ELLICOTT CITY, MD 21043 FAX: 410.461.8961

SCALE	1"=30'
DRAWN BY	MY
CHECKED BY	RHV
DATE	FEB. 2006
W. O. #	04-87.00
SHEET#	1 OF 1

**NV HOMES
 ELLICOTT MEADOWS
 UNITS 13-16**

HOMELAND SDP-03-30
 TAX MAP 16
 3RD ELECTION DISTRICT

PARCEL 53,96,165&204
 HOWARD COUNTY, MARYLAND



DEPARTMENT OF INSPECTIONS, LICENSES & PERMITS

J. Michael Evans, Director

DECK ATTACHMENT AFFIDAVIT OF COMPLIANCE

Building Permit Serial Number: _____

To: The Building Official of Howard County, Maryland

I, Edward Pacylawski, the undersigned, am the owner, builder, deck contractor, or owner's agent of the dwelling located at: 12055 Windsor Moss, Ellicott City Md. 21042

I understand and accept the responsibility for compliance with the Howard County Deck Attachment Guide procedure related to the construction and attachment of decks to existing dwellings.

FOR ALL NEW DECK CONSTRUCTION ONE OF THE FOLLOWING MUST BE CHECKED:

- YES ___ The dwelling has a conventional, solid sawn 2x__ lumber floor framing system...
NO X See attached detail The dwelling does not have a conventional, solid sawn 2x__ lumber floor framing system...
NO ___ I do not know whether the dwelling has a conventional, solid sawn 2x__ lumber floor framing system...

I solemnly affirm under the penalties of perjury and upon personal knowledge that the contents of the foregoing paper are true.

Signature: [Signature] Date: 9/12/06

Print Name: Edward Pacylawski Address: _____

White: Department

Yellow: Inspector

PRO-BUILT CONSTRUCTION, INC. 13453 Long Days Court Ellicott City, MD 20777-9757

T:\Operations\WP\deck attachment affidavit of compliance.wpd - May 2001