

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE BELLEFONTAINE CITY, MD 21041 PERMITS (410) 313-2400 INSPECTING (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		<b>HOWARD COUNTY</b> <b>PERMIT APPLICATION</b>		<b>PERMIT NUMBER</b> B07003300	
Building Address <u>12329 Fox Meadow Ln</u> <u>West Friendship, MD 21794</u>			Property Owner's Name <u>Dongming Zhang</u> Address <u>12329 Fox Meadow Lane</u>		
Suites/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision <u>Fox Creek</u> Section _____ Area _____ Lot <u>6</u> Tax Map _____ Parcel _____ Grid _____ Zoning _____ Map Coordinates _____ Lot size _____			City <u>West Friendship</u> State <u>MD</u> Zip Code <u>21794</u> Home Phone <u>(410) 489-5507</u> Work Phone <u>(410) 303-4087</u> Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____		
Existing Use <u>SFD</u> Proposed Use <u>SFD add Deck</u> Estimated Construction Cost \$ _____ Description of Work <u>Build up a regular deck at the back of house with stairway and dry ceiling.</u>			Contractor Company <u>owner</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ License No. _____ Phone _____ Fax _____		
Occupant or Tenant <u>owner</u> Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____			Engineer or Architect Company <u>owner</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____		

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
<b>Building Characteristics</b> Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	<b>Utilities</b> Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____	<b>Building Characteristics</b> SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> <u>Depth</u> <u>Width</u> 1st floor: _____ 2nd floor: _____ Basement: _____ <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u> Height: <u>9'</u> 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 Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	<b>Utilities</b> Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> 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 UPON THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Dongming Zhang                      DOUGMING ZHANG  
 Applicant's Signature                      Print Name  
 \_\_\_\_\_                      8/7/07  
 Title/Company                      Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*

AGENCY		DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION		PROPERTY ID#
Land Development DPZ				Front	Filing fee	\$
State Highways				Rear	Permit fee	\$
Building Official				Side	Excise fee	\$
Dev. Engineering DPZ				Side St.	Add'l per. fee	\$
Health	<u>8/7/07</u>	<u>[Signature]</u>		All minimum setbacks met?	TOTAL FEES	\$
Fire Protection				YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid	\$
Is Sediment Control approval required prior to instance?				Is Entrance Permit required?	Balance due	\$
YES <input type="checkbox"/> NO <input type="checkbox"/>				YES <input type="checkbox"/> NO <input type="checkbox"/>	Check	\$
CONTINGENCY CONSTRUCTION START				Historic District?	Validation	\$
ONE STOP SHOP				YES <input type="checkbox"/> NO <input type="checkbox"/>		
Distribution of Copies	Yellow: Building Official	Green: LDD, DPZ	Yellow: DED, DPZ	Pink: Health	Gold: SHA	Accepted by _____

