

G-9051

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLCOTT CITY, MD 21043
PERMITS (410) 313-2465 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

BO7002437

4/20/07
* J DPZ

Building Address 11070 FREDERICK RD
Ellicott City, MD
Suite/Apt. #: _____ SDP/VP/PP/PP# 05-70
Census Tract 603000 Subdivision Ellicott Meadows
Section _____ Area _____ Lot _____
Tax Map 16 Parcel 99 Grid 22 273
Zoning TUC Map Coordinates _____ Lot size _____

Property Owner's Name Ryan Monr
Address 6085 Marshalee Dr.
City Ellicott City State MD Zip Code 21075
Home Phone _____ Work Phone 410-946-0980
Applicant's Name & Mailing Address, (if other than stated hereon):
KS Cecil - Permit App Serv
Phone 443-944-9702 Fax 301-858-0433

Existing Use Vacant Lot
Proposed Use Subs Trunks
Estimated Construction Cost \$ 1200,00
Description of Work Subs Trunks
56 x 12

Contractor Company MNR Inc. Ryan Monr
Contact Person Kimberly Cecil
Address 11700 Plaza America Dr.
City Roxton State VT Zip Code _____
License No. 50
Phone 443-944-9702 Fax _____

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: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
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: _____ Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

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

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 THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

[Signature]
Applicant's Signature
Ryan Monr
Title/Company
671 Sec

Ryan Monr
Print Name
6/16/07
Date

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

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE	APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Local Development DPZ	4/20/07	[Signature]	[Signature]	Front: <u>25</u>	Filing fee \$ _____
State Health				Rear: <u>30</u>	Permit fee \$ <u>80</u>
Building Official	4/20/07	[Signature]	[Signature]	Side: <u>10</u>	Discr fee \$ _____
Dev. Engineering DPZ				Side St: <u>P/A</u>	Add'l per. fee \$ <u>5</u>
Health	4/20/07	[Signature]	[Signature]	All minimum setbacks met? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>85</u>
Fire Protection				Is Entrance Permit required? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>				Historic District? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>				Let Coverage for New Town Zone <u>P/A</u>	Check \$ <u>368940</u>
ONE STOP SHOP: <input type="checkbox"/>				SDP/Red-line approval date _____	Validation \$ _____
Distribution of Copies: White: Building Official Green: LDB, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA				Accepted by _____	

CADDOAN
4918/183
4053/420
TAX MAP 16
PARCEL 98
ZONING RC-DEO

N 589800

APPROVED

WALK-THRU BUILDING PERMIT

BP# 807002437 A#

APP. SAN *Revised* DATE: 6/20/07

DESC. OF WORK: *Sewer to be pumped from tractor*

110 VD Frederick Rd.

FREDERICK RD. STA. 5+11
END CURB AND GUTTER
TC. = 455.77 (NOSE DOWN)

ZONE R-ED

ZONE RC-DEO

Parcel 16: G=450.45, F.F.=450.75, B=442.03, MCE=435.91

Parcel 17: G=450.12, F.F.=451.45, B=442.70, MCE=436.35

Parcel 18: G=451.87, F.F.=452.2, B=443.45, MCE=441.76

Parcel 19: G=452.54, F.F.=452.87, B=444.12, MCE=441.89

Parcel 20: G=452.21, F.F.=453.54, B=444.79, MCE=442.17

TEMPORARY STOCK PILE
SALES TRAILER 752.7
52.6
N 589800

CB2 (B)

PARKING

SCE

FOLEY QUARTER ROAD
(MAJOR COLLECTOR-PUBLIC)

PHILIP GARCILL
TAX MAP 23
PARCEL 71
ZONING RC-DEO
EXISTING USE/VACANT

LOD 3+00

LOD 4+00

LOD 3+00

LOD 3+00

110 VD

Frederick Rd.

SPD

344

449

452

452

452x76

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