



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: _____

Permit No.: 113003154

Building Address: 17267 Hardy Rd
 City: Woodbine State: MD Zip Code: 21797
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Spring Hollow
 Section: _____ Area: _____ Lot: 29
 Tax Map: 67 Parcel: 528 Grid: 08
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Cumberland Development
 Address: 16391 A.E. Mullins Rd
 City: Woodbine State: MD Zip Code: 21797
 Phone: 301-252-1122 Fax: 301-854-6325
 Email: Cumberlanddev@gmail.com

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Existing Use: Vacant Lot
 Proposed Use: New SFD
 Estimated Construction Cost: \$ 300K
 Description of Work: New 2 story, 4 bedroom, 2.5 bath unfinished basement, two car garage

Contractor Company: Cumberland Dev Corp
 Contact Person: Curtis Cumberland
 Address: 16391 A.E. Mullins Rd
 City: Woodbine State: MD Zip Code: 21797
 License No.: 2002
 Phone: 301-854-6838 Fax: 301-854-6325
 Email: Cumberlanddev@gmail.com

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Engineer/Architect Company: Charles R. Groen Assoc.
 Responsible Design Prof.: _____
 Address: 902 Lec Ave.
 City: Sixesville State: MD Zip Code: 21157
 Phone: 410-549-2708 Fax: 410-549-9063
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor: <u>41'</u>	<u>53'</u>
	2 nd floor: <u>41'</u>	<u>53'</u>
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input checked="" type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Craw Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>4</u>	
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
<input type="checkbox"/> Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
<u>Water Supply</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<u>Sewage Disposal</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Heating System</u>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<u>Sprinkler System:</u>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>613000273</u>	
Building Shell Permit Number: _____	

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 PURPOSES OF INSPECTING THE WORK PERMITTED BY THIS PERMIT.

Applicant's Signature: Curtis Cumberland Print Name: Curtis Cumberland
 Email Address: Cumberland Dev. @Gmail.com Date: 8-16-13
 Title/Company: President AUG 19 2013

RECEIVED

LICENSES & PERMITS DIVISION

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY
FOR OFFICE USE ONLY

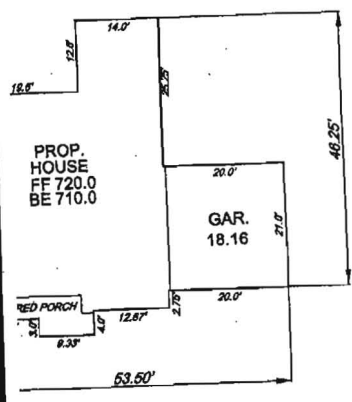
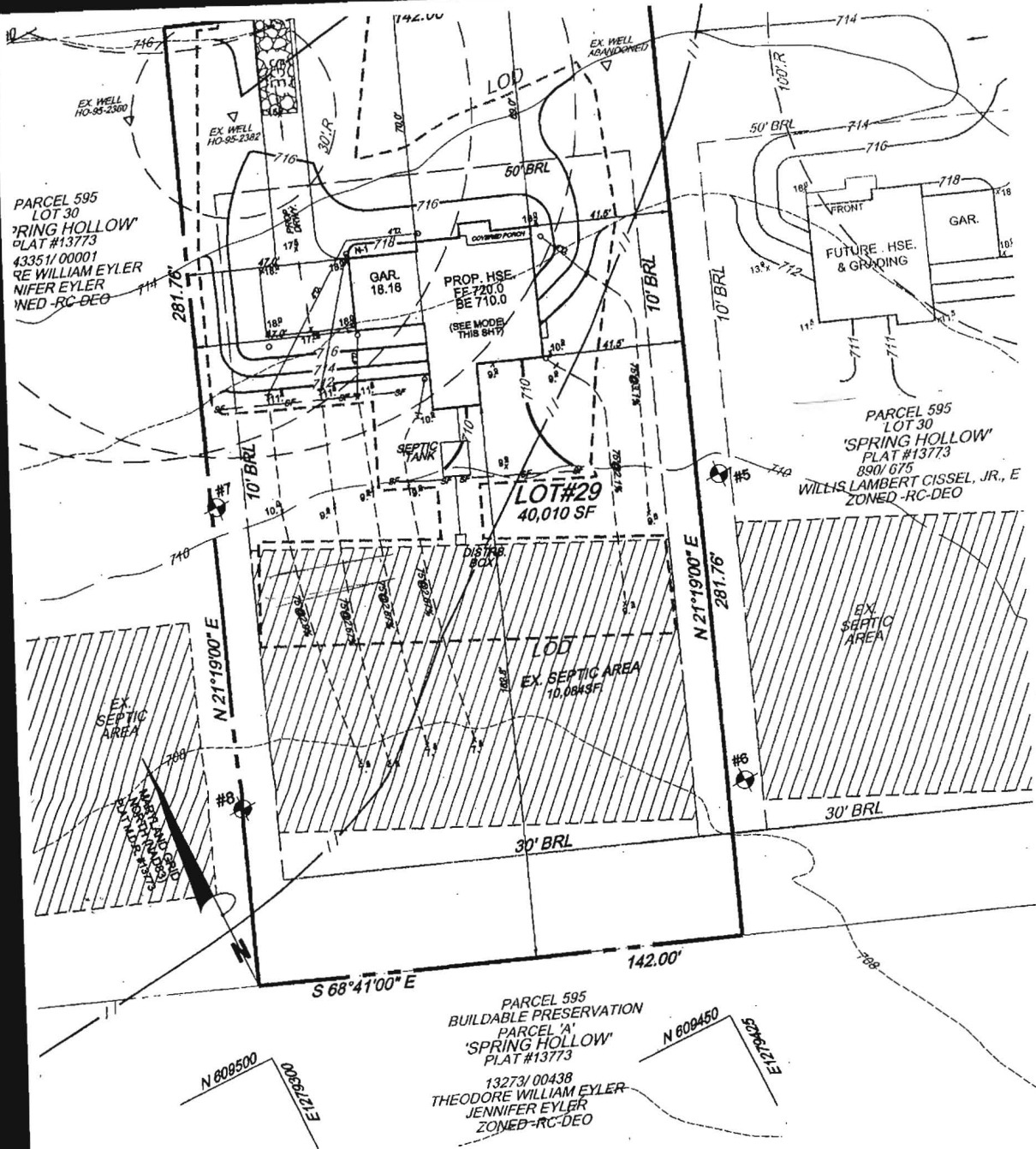
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		<u>9.23.13 Bernard</u>

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

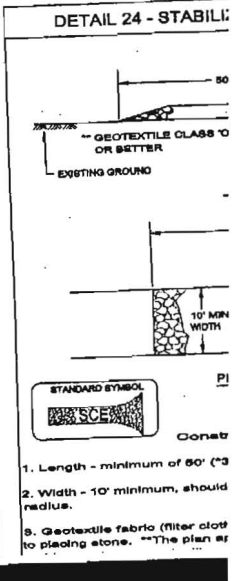
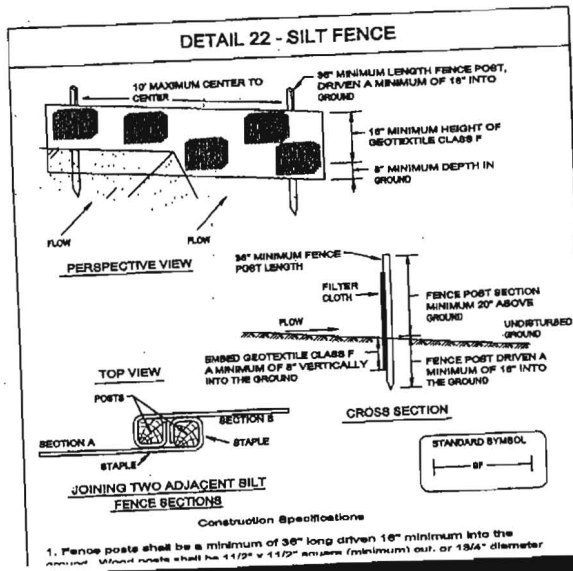
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$	<u>150.00</u>
Permit Fee	\$	
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	
Guaranty Fund	\$	
Add'l per Fee	\$	
Total Fees	\$	
Sub-Total Paid	\$	
Balance Due	\$	<u>2443</u>
Check	#	

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA



HOUSE MODEL
SCALE: 1"=20'



1. Length - minimum of 50' (±3)
2. Width - 10' minimum, should radiuse.
3. Geotextile fabric (filter cloth) to piling stone. **The plan of



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Permit No.: B13003917

Building Address: 17267 Hardy Rd
City: mt Airy State: md Zip Code: 21771
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: Spring Hollow
Section: _____ Area: _____ Lot: 29
Tax Map: 7 Parcel: 528 Grid: 8
Zoning: _____ Map Coordinates: _____ Lot Size: 40,010

Property Owner's Name: Micah Ananda Lewis
Address: 17267 Hardy Rd
City: mt Airy State: md Zip Code: 21771
Phone: _____ Fax: _____
Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: Jerome Clancy
Address: PO Box 1253
City: Eldersburg State: md Zip Code: 21784
Phone: 413-362-1229 Fax: _____
Email: Jerome @ Applied And Approved

Existing Use: SFD
Proposed Use: SFD w/ propane tank
Estimated Construction Cost: \$ 8000
Description of Work:
Install 1000 gallon in-ground propane tank
Occupant or Tenant: _____
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: owner
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: Valley National Gas
Contact Person: William Greenig
Address: 7201 Montevideo Rd
City: Jessup State: md Zip Code: 20794
License No.: 67793
Phone: 410-999-1114 Fax: _____
Email: _____

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: Contractor
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
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Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
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Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
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Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

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Applicant's Signature: Jerome Clancy Print Name: Jerome Clancy
Email Address: Jerome @ Applied And Approved.com Date: 10/17/13
Title/Company: permits

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
PLEASE WRITE NEATLY & LEGIBLY
FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		<u>10/17/13 Dana Howard</u>

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$ <u>110</u>
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check #	<u>3226</u>

Harley Road

S 68°41'00" E

142.00'

70.0'

50' BRL

281.76'

PROG. DRWY.

17.5'

47.0'

18.0'

N-1

GAR. 18.16

COVERED PORCH

PROP. HSE
FF 720.0
BE 710.0

(SEE MODEL
THIS SHT)

10' BRL

41.5'

10.0'

SEPTIC TANK

LOT#29
40,010 SF

DISTRB. BOX

N 21°19'00" E

281.76'

N 21°19'00" E

75@2.9%

75@2.67%

75@2.67%

75@2.67%

162.8'

75@2.1%

75@3.7%

#5

Scale 1"=30'

17267 Harley Rd
Mount Airy MD 21771

Approved Septic System Plan
Howard County Health Department

Dana Beard - H-7-13
Signature Date

B13003917

30' BRL

MARYLAND GRID
(NAD83)

#8

#6

1000 Gal LP

SF

SF

SF

SF

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