



# 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.: B/3003248

Building Address: 8840 Greenwood Pl  
 City: Savage State: MD Zip Code: 20763  
 Suite/Apt. #: B SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: 0000  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: C3  
 Tax Map: 47 Parcel: 0957 Grid: 18  
 Zoning: M-2 Map Coordinates: \_\_\_\_\_ Lot Size: 9.14ac

Existing Use: Manufacturing  
 Proposed Use: Manufacturing  
 Estimated Construction Cost: \$15,000  
 Description of Work: Install Plant Bath

Occupant or Tenant: T W Perry  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: Paul Goodhall  
 Address: 8840 Greenwood Place Suite B  
 City: Savage State: MD Zip Code: 20763  
 Phone: 240-372-9071 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: Greenwood Inj. Assoc.  
 Address: 60 State St Suite 1200  
 City: Baltimore State: MD Zip Code: 21209  
 Phone: 410-740-5496 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (if other than stated herein)  
 Applicant's Name: Robert Gorman  
 Address: 8820 Old Hartford Rd Suite B  
 City: Baltimore State: MD Zip Code: 21234  
 Phone: 410-882-7281 Fax: \_\_\_\_\_  
 Email: bobgorman@gormanarchitects.net

Contractor Company: Electrical Connections, Inc  
 Contact Person: Alfred Redgett  
 Address: P.O. Box 1067  
 City: Fredrick State: MD Zip Code: 21072  
 License No.: ES 03204  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Engineer/Architect Company: Gorman Architects  
 Responsible Design Prof.: Robert Gorman  
 Address: 8820 Old Hartford Rd Suite B  
 City: Baltimore State: MD Zip Code: 21234  
 Phone: 410-882-7281 Fax: \_\_\_\_\_  
 Email: bobgorman@gormanarchitects.net

Commercial Building Characteristics	Residential Building Characteristics	
Height: <u>30'</u>	<input type="checkbox"/> SF Dwelling	<input type="checkbox"/> SF Townhouse
No. of stories: <u>1</u>	<b>Depth Width</b>	
Gross area, sq. ft./floor: <u>170,071</u>	1 <sup>st</sup> floor:	
Area of construction (sq. ft.): <u>364</u>	2 <sup>nd</sup> floor:	
Use group: <u>F-1</u>	Basement:	
<b>Construction type:</b>	<input type="checkbox"/> Finished Basement	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement	
<input checked="" type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space	
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Wood Frame	No. of Bedrooms:	
<input type="checkbox"/> State Certified Modular	<b>Multi-family Dwelling</b>	
	No. of efficiency units:	
	No. of 1 BR units:	
	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 type="checkbox"/> No	Roof:	
<b>Roadside Tree Project Permit #</b>	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

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

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.

Applicant's Signature: Bob Gorman  
 Email Address: bobgorman@gormanarchitects.net  
 Title/Company: President/Gorman Architects

Print Name: Robert Gorman  
 Date: 8/21/13  
**RECEIVED**  
 AUG 21 2013  
 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>[Signature]</u>

Is Sediment Control approval required for this project?  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>200.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check #	<u>317</u>



## Bureau of Environmental Health

7178 Columbia Gateway Drive, Columbia, MD 21046-2147

Main: 410-313-2640 | Fax: 410-313-2648

TDD 410-313-2323 | Toll Free 1-866-313-6300

[www.hchealth.org](http://www.hchealth.org)

Facebook: [www.facebook.com/hocohealth](http://www.facebook.com/hocohealth)

Twitter: HowardCoHealthDep

**Maura J. Rossman, M.D., Health Officer**

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September 6, 2013

Robert Gorman  
8820 Old Hartford Rd  
Baltimore, MD 21234

*Sent via email to: [bobgorman@gormanarchitects.net](mailto:bobgorman@gormanarchitects.net)*

**RE: B13003248  
8840 Greenwood Pl  
Savage, MD 20763**

Mr. Gorman:

This letter is in response to building permit B13003248. The building permit application and plans indicate that the proposed work includes equipment that will be used for paint spraying and will need to be reviewed and permitted with Maryland Department of the Environment (MDE), Air Quality Program, Air and Radiation Management Administration. If you have any questions you can contact the Air Quality Permits Program at (410) 537-3230.

Building permit approval is being withheld until a permit has been issued by MDE or a copy of the payment invoice indicating that the review has been completed has been forwarded to the Health Department. I may be reached at 410 313-4261 if you would like to discuss the project in more detail.

Respectfully,

A handwritten signature in black ink, appearing to read 'Jeff Williams', is written over a horizontal line.

Jeff Williams  
Program Manager, Well & Septic Program  
Bureau of Environmental Health



027-0640  
**MARYLAND DEPARTMENT OF THE ENVIRONMENT**  
1800 Washington Boulevard • Baltimore MD 21230  
410-537-3000 • 1-800-633-6101 • www.mde.state.md.us

Martin J. O'Malley  
Governor

Robert M. Summers, Ph.D.  
Secretary

Anthony G. Brown  
Lt. Governor

October 2, 2013

Mr. Ben Messner  
General Manager  
TW Perry  
8840 Greenwood Place #C  
Savage, MD 20763

Dear Mr. Messner:

The Department has received your completed Request for Coverage form and fee for an Air Quality General Permit to Construct for Vehicle Refinishing (Autobody) Equipment for the following location:

Source Name:	TW Perry
Street Address:	8840 Greenwood Place #C Savage, MD 20763
County:	Howard
I.D. No.:	027-0640-6-0452      ECONO Model #AD 26-15-9

The permit is effective as stated in Part IV(B) of the General Permit. The cancelled check or other receipt, a copy of the Request for Coverage, the permit document, this letter, and any other supporting documents should be retained on site.

If you have any questions, please call Nolan Penney at 410-537-3230.

Sincerely,

Karen Irons, P.E., Administrator  
Air Quality Permits Program  
Air and Radiation Management Administration

KI/dpm