



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: 10-14-13

Permit No.: _____

Building Address: 2340 McKendree Road
City: West Friendship State: Md Zip Code: 21794
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Single Family Dwelling
Proposed Use: Coverage
Estimated Construction Cost: \$ 4000.00 - ~~10000.00~~
Description of Work: Porch roof over porch
48'2" x 10'3"

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

Property Owner's Name: Jeffrey Jacqueline Maisel
Address: 2340 McKendree Road
City: West Friendship State: Md Zip Code: 21794
Phone: 410 489 2798 Fax: SAME
Email: JJL FL @ AOL.COM

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

Contractor Company: SELF
Contact Person: JEFF MAISEL
Address: _____
City: _____ State: _____ Zip Code: _____
License No.: _____
Phone: 443 766 6095 Fax: _____
Email: _____

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

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
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	
<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:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

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: _____	

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: Jeffrey E. Maisel
Email Address: JJL FL @ AOL.COM
Title/Company: _____

Print Name: Jeffrey E. MAISEL
Date: 10-14-13

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

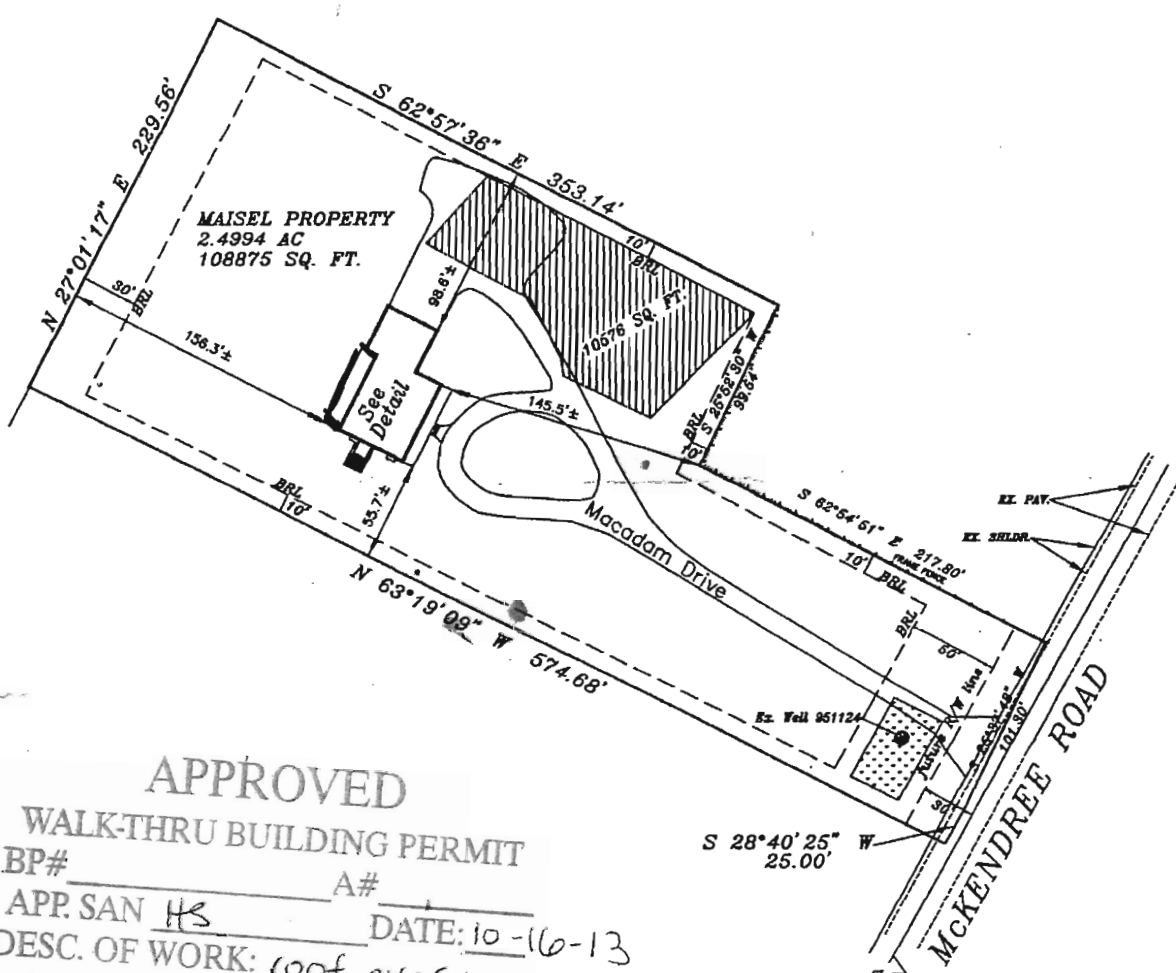
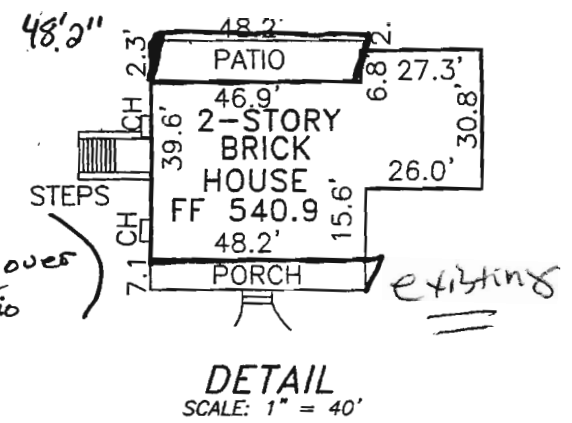
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>10/10/13</u>	<u>Heidi Scott</u>

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	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

1. ACCURACY OF BUILDING MEASUREMENTS: 0.1'
2. ACCURACY OF SETBACK DIMENSIONS: 0.4'
3. ACCURACY OF BUILDING ELEVATIONS: 0.1'
4. THE PROPERTY SHOWN HEREON LIES IN ZONE 'C' AS SHOWN ON FLOOD INSURANCE RATE MAP NO: 240044 0014 B DATED: DEC. 4, 1986



THE INFORMATION SHOWN HAS BEEN ESTABLISHED BY CURRENT ACCEPTABLE SURVEY PROCEDURES AND FROM AVAILABLE RECORD INFORMATION. THIS DRAWING IS TO BE USED FOR TITLE TRANSFER FINANCING OR REFINANCING ONLY AND IS NOT TO BE USED FOR THE ESTABLISHMENT OF PROPERTY LINES, LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING OR FUTURE IMPROVEMENTS. IT DOES NOT PROVIDE ACCURATE IDENTIFICATION OF PROPERTY LINES. SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THIS TRANSACTION.

FINAL LOCATION DRAWING
MAISEL PROPERTY
2340 MCKENDREE ROAD