



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.: _____

Building Address: 1869 MT DENALI DR
City: WOODSTOCK State: MD Zip Code: 21163
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: PRESERVE D WATERWAY GLEN
Section: _____ Area: _____ Lot: 12
Tax Map: 0010 Parcel: 0330 Grid: 0023
Zoning: _____ Map Coordinates: _____ Lot Size: 1 AC

Existing Use: NA
Proposed Use: DECK & SCREEN PORCH
Estimated Construction Cost: \$ 20,000
Description of Work: CONSTRUCT WOOD & COMPOSITE DECK & PORCH W/ STAINS & NO ELECTRIC SOFT = 19X16 = 304 SF

Occupant or Tenant: _____
Was tenant space previously occupied? Yes No
Contact Name: ANDY MENZ
Address: 4511 SUN BERRY DR
City: FINKSBURG State: MD Zip Code: 21048
Phone: 410 781 7500 Fax: _____
Email: AMENZ @ COMCAST.NET

Property Owner's Name: GAGG & LISA RAY
Address: 1869 MT DENALI DR
City: WOODSTOCK State: MD Zip Code: 21163
Phone: 410 241 2983 Fax: _____
Email: _____

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

Contractor Company: FRONTIER DECK BLDGS
Contact Person: ANDREW MENZ
Address: 4511 SUN BERRY DR
City: FINKSBURG State: MD Zip Code: 21048
License No.: 51321
Phone: 410 781 7500 Fax: _____
Email: _____

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

Commercial Building Characteristics	Residential Building Characteristics
Height: <u>8'</u>	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: <u>1</u>	Depth _____ Width _____
Gross area, sq. ft./floor: <u>304</u>	1 st floor: _____
Area of construction (sq. ft.): <u>304</u>	2 nd floor: _____
Use group: _____	Basement: _____
Construction type:	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input checked="" type="checkbox"/> Wood Frame	No. of Bedrooms: _____
<input type="checkbox"/> State Certified Modular	Multi-family Dwelling
	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: _____
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: AMENZ @ COMCAST.NET
Email Address: LADONOR / PDB
Title/Company: _____

Print Name: ANDREW MENZ
Date: 11/20/13

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>11/20/13</u>	<u>R. Buckner</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	#

MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING. THIS PLAT CONTAINS A TOLERANCE OF ACCURACY OF 0.5' MORE OR LESS.

EASTLAND STATE GOV RESIDUAL PLAT

MOUNT DENALI COURT

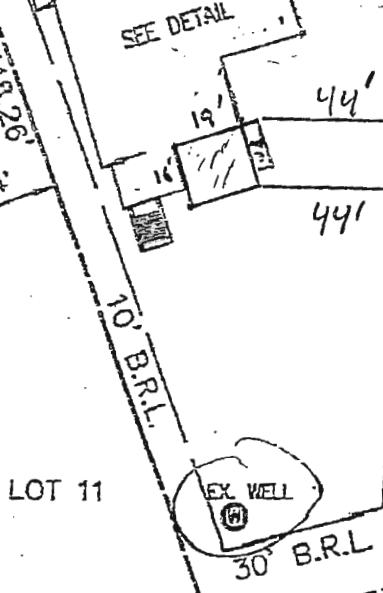
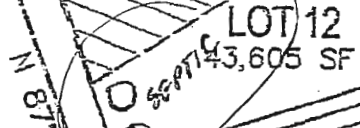
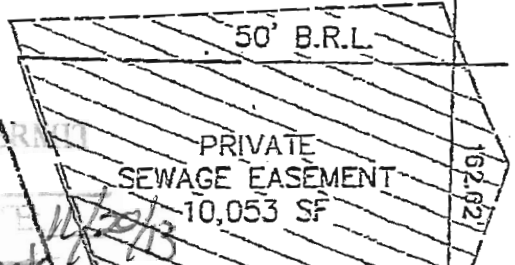
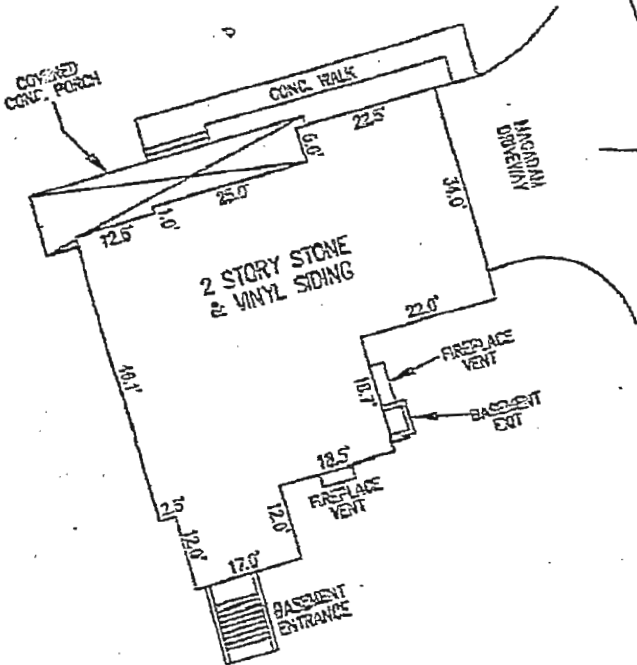
40' RIGHT-OF-WAY
 $R = 220.00'$
 $L = 20.16'$ N 24°02'04"E 161.16'

1869 Mt. Denali

APPROVED
 WALKTHRU BUILDING PERMIT
 BP#
 APP SAN
 DESC. OF WORK

T. Ruck
 16'x19' Deck
 approved as shown
 LOT 10

DETAIL: 1" = 30'



MACADAM DRIVEWAY

S 64°24'27"E 347.73'

LOT 13

S 09°17'21"W 50.38'

50 SCALE

I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN AND THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.