



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: 14195 Clarksville Pike
 City: Highland State: MD Zip Code: 20777
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Barbara Solomon
 Address: 14195 Clarksville Pike
 City: Highland State: MD Zip Code: 20777
 Phone: 301 854-9171 Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Joseph E Gunkel
 Address: 7998 Brown Bridge Road
 City: Highland State: MD Zip Code: 20777
 Phone: 443 864 8309
 Email: JosephGunkel@yahoo.com

Contractor Company: Gunkel Home Improvements
 Contact Person: Joe Gunkel
 Address: 7998 Brown Bridge Road
 City: Highland State: MD Zip Code: 20777
 License No.: MHIC 81127
 Phone: 443 864 8309 Fax: 3
 Email: JosephGunkel@yahoo.com

Engineer/Architect Company: Gunkel
 Responsible Design Prof.: _____
 Address: ''
 City: '' State: '' Zip Code: ''
 Phone: 443-864-8309 Fax: _____
 Email: _____

Existing Use: Deck
 Proposed Use: Deck 12x15'4 17'8x8'
 Estimated Construction Cost: \$ \$26,000.00
 Description of Work: Remove Existing Deck
AND REINSTALL NEW DECK SAME
SIZE - 12X15'4 + 17'8X8 TRVEY
SHAPED
 Occupant or Tenant: W/Steps
 Was tenant space previously occupied? Yes No
 Contact Name: Barbara Solomon
 Address: 14195 Clarksville Pike
 City: Highland State: MD Zip Code: 20777
 Phone: 301 854-9171 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:
Use group:	<input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl Space
Construction type:	<input type="checkbox"/> Slab on Grade
<input checked="" type="checkbox"/> Reinforced Concrete	No. of Bedrooms: _____
<input type="checkbox"/> Structural Steel	Multi-family Dwelling
<input type="checkbox"/> Masonry	No. of efficiency units: _____
<input checked="" 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: Joseph E Gunkel Print Name: Joseph E Gunkel
 Email Address: JosephGunkel@yahoo.com Date: 11-7-13
 Title/Company: OWNER

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>11/7/13</u>	<u>idina S. Gatt</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? Yes No
 Is Entrance Permit Required? Yes No
 Historic District? Yes 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	\$ <u>100.00</u>
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check #	<u>5244</u>

