



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: 1283 Cross Foot Rd
 City: Marysville State: MD Zip Code: 21104
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: Pat No: 8953 Subdivision: 0000
 Section: _____ Area: _____ Lot: 50
 Tax Map: 0010 Parcel: 0312 Grid: 0007
 Zoning: _____ Map Coordinates: _____ Lnt Size: _____

Property Owner's Name: Nicholas Yancich
 Address: 1283 Cross Foot Rd
 City: Marysville State: MD Zip Code: 21104
 Phone: 443-546-6908 Fax: _____
 Email: n.yancich@comcast.net
 Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Existing Use: Residential
 Proposed Use: N/A
 Estimated Construction Cost: \$ 10,290
 Description of Work: Installation of 13'x8' composite deck
 Occupant or Tenant: Nicholas Yancich
 Was tenant space previously occupied? Yes No
 Contact Name: 1283 Cross Foot Rd
 Address: 1283 Cross Foot Rd
 City: Marysville State: MD Zip Code: 21104
 Phone: 443-546-6908 Fax: _____
 Email: n.yancich@comcast.net

Contractor Company: Rhine Landscaping LLC
 Contact Person: James Zeller 443-745-3903
 Address: _____
 City: _____ State: MD Zip Code: _____
 License No.: _____
 Phone: 410-443-2745 Fax: 410-489-4312
 Email: James@RhineLandscaping.com

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

Commercial Building Characteristics	Residential Building Characteristics
Height: _____	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: <u>1.5</u>	Depth _____ Width _____
Gross area, sq. ft./floor: _____	1 st floor: <u>3915 SF</u>
<u>3915</u>	2 nd floor: _____
Area of construction (sq. ft.): _____	Basement: _____
Use group: _____	<input type="checkbox"/> Finished Basement
<u>Construction type:</u>	<input checked="" type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Masonry	No. of Bedrooms: _____
<input type="checkbox"/> Wood Frame	<u>Multi-family Dwelling</u>
<input type="checkbox"/> State Certified Modular	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	
<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 checked="" type="checkbox"/> No	
Grading Permit Number: <u>N/A</u>	
Building Shell Permit Number: <u>N/A</u>	

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: James E Rhine Landscaping
 Email Address: _____
 Acct. Rep / Rhine Landscaping LLC
 Title/Company: _____

Print Name: James Zeller
 Date: 09/27/2013

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>9/26/13</u>	<u>Idredi 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	#

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

