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: 13639 GILBRIDE LANE
City: CLARKSVILLE State: MD Zip Code: 21029
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: HEDGEROW
Section: 1 Area: _____ Lot: 19
Tax Map: 28 & 34 Parcel: 05-411807 Grid: _____
Zoning: R Map Coordinates: _____ Lot Size: 3.242 A

Existing Use: RESIDENCE
Proposed Use: SAME
Estimated Construction Cost: $ 70,000.00
Description of Work: FINISH EXISTING BASEMENT 1 BAPROOM, KITCHEN, GYM (STANDARD) WORK ROOM, 2
Occupant or Tenant: OWNERS
Was tenant space previously occupied? ☑ Yes ☐ No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: DOUGLAS & LIDWINA ASHBY
Address: 13639 GILBRIDE LANE
City: CLARKSVILLE State: MD Zip Code: 21029
Phone: 443-535-0139 Fax: _____
Email: lrdashby@peoplepc.com

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

Contractor Company: HOMEOWNER = GEN. CONTRACTOR
Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: _____
License No. : _____
Phone: _____ Fax: _____
Email: _____

Engineer/Architect Company: TRANSFORMING ARCHITECTURE
Responsible Design Prof.: KAREN PITSCEY
Address: 7612 BROWNS BRIDGE RD.
City: HIGHLAND State: MD Zip Code: 20777
Phone: 301-776-7666 Fax: _____
Email: info@TransformingArchitecture.com

Commercial Building Characteristics	*Residential Building Characteristics*
Height:	☐ SF Dwelling ☐ SF Townhouse
No. of stories:	**Depth** **Width**
Gross area, sq. ft./floor:	1st floor:
	2nd floor:
Area of construction (sq. ft.):	Basement:
	☐ Finished Basement
Use group:	☐ Unfinished Basement
	☐ Crawl Space
Construction type:	☐ Slab on Grade
☐ Reinforced Concrete	No. of Bedrooms:
☐ Structural Steel	***Multi-family Dwelling***
☐ Masonry	No. of efficiency units:
☐ Wood Frame	No. of 1 BR units:
☐ State Certified Modular	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
➢ **Roadside Tree Project Permit**	Footings:
☐Yes ☐No	Roof:
Roadside Tree Project Permit #	☐ State Certified Modular
	☐ Manufactured Home

Utilities	
Water Supply	
☐ Public	
☑ Private	
Sewage Disposal	
☐ Public	
☑ Private	
Electric: ☑ Yes ☐ No	
Gas: ☑ Yes ☐ No	
Heating System	
☐ Electric ☐ Oil	
☑ Natural Gas ☐ Propane Gas	
☐ Other:	
Sprinkler System:	
☐ Yes ☑ 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 _____ *Print Name* Douglas Ashby
Email Address lrdashby@peoplepc.com *Date* 19 Aug 2013
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	8/19/13	Wendi Scott

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	$
Total Fees	$
Sub- Total Paid	$
Balance Due	$
Check	#

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

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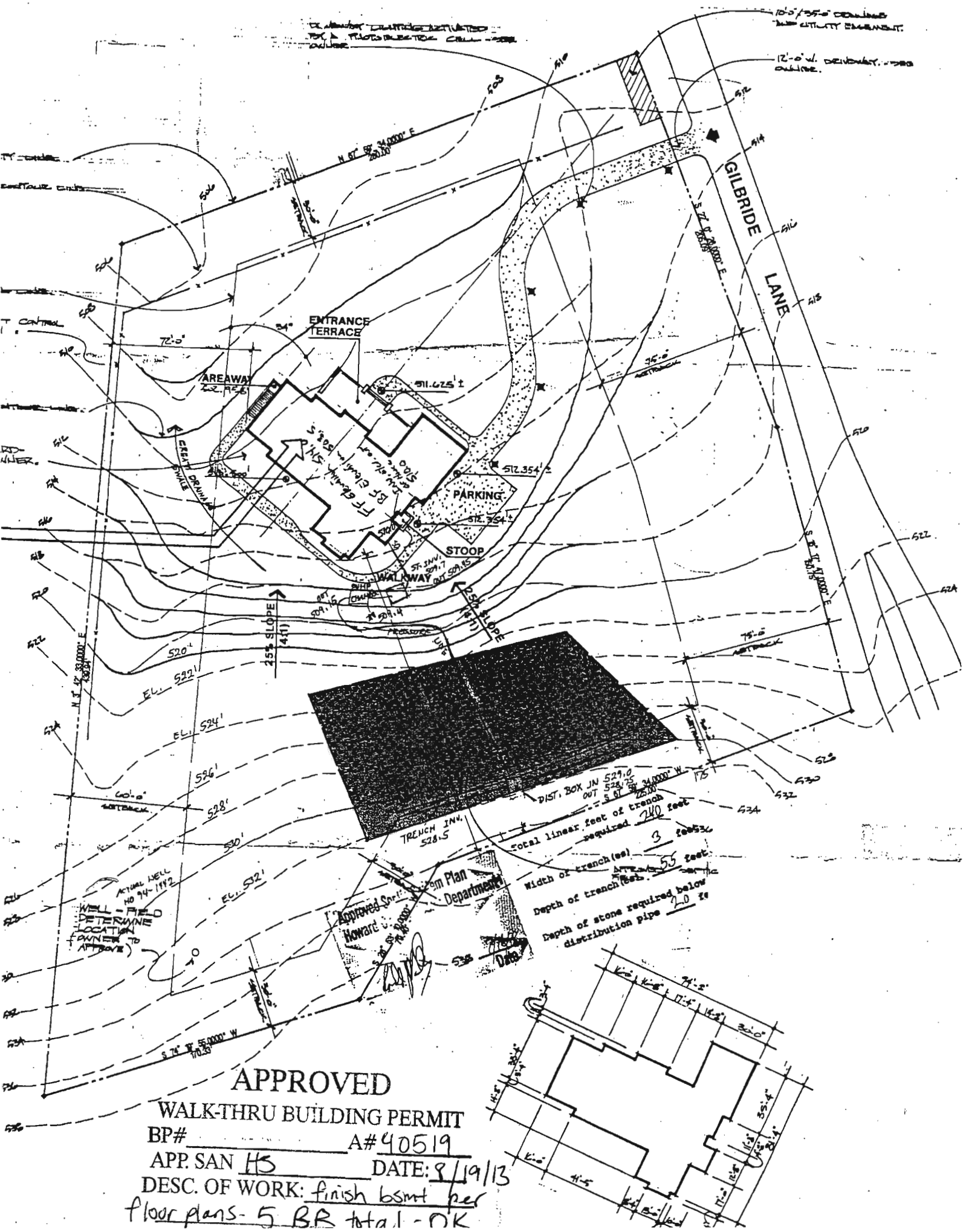
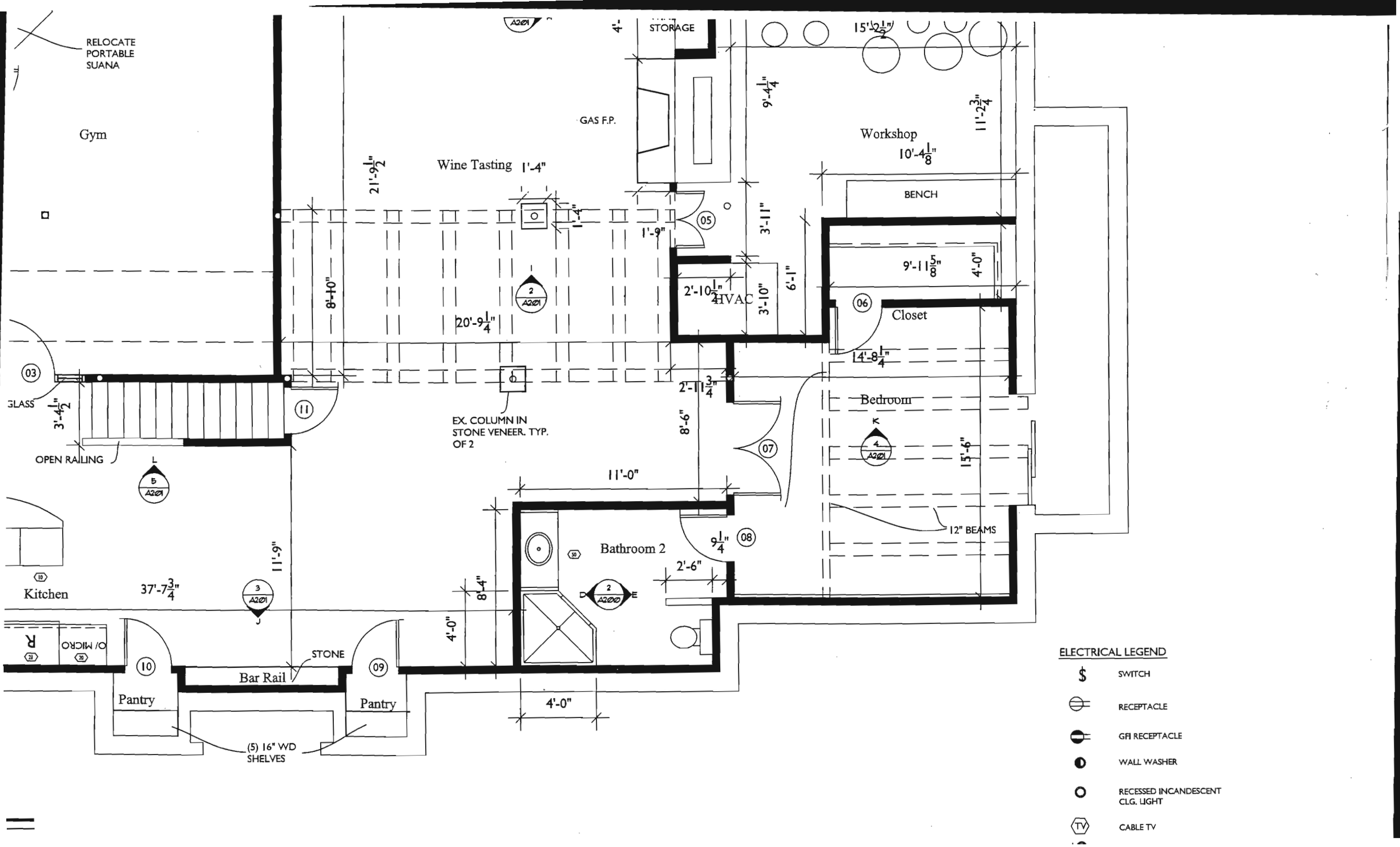
A#405 19


GILBRIDE LANE
ENTRANCE TERRACE
AREAWAY
PARKING
STOOP
WALKWAY
25% SLOPE
DIST. BOX IN 529.0
OUT 528.75
TRENCH INV. 528.5
total linear feet of trench required 240 feet
Width of trench(es) 3 feet
Depth of trench(es) 55 feet
Depth of stone required below distribution pipe 2.0 ft
WELL - FIELD DETERMINE LOCATION (OWNER TO APPROVE)
Approved Sanitary System Plan
Howard County Department of Health
Date
APPROVED
WALK-THRU BUILDING PERMIT
BP#
A# 40519
APP. SAN HS
DATE: 8/19/13
DESC. OF WORK: finish bsmt per floor plans - 5 BR total - OK


RELOCATE PORTABLE SUANA
Gym
Wine Tasting
1'-4"
21'-9 1/2"
8'-10"
20'-9 1/4"
1'-4"
1'-9"
GAS F.P.
STORAGE
4'-
9'-4 1/4"
3'-11"
6'-1"
2'-10 1/4"
HVAC
3'-10"
15'-2 1/2"
Workshop
10'-4 1/8"
11'-2 3/4"
BENCH
9'-11 5/8"
4'-0"
Closet
14'-8 1/4"
Bedroom
15'-6"
12" BEAMS
2'-11 3/4"
8'-6"
11'-0"
9 1/4"
Bathroom 2
2'-6"
8'-4"
4'-0"
4'-0"
GLASS
3'-4 1/2"
OPEN RAILING
11'-9"
Kitchen
37'-7 3/4"
O/ MICRO
R
Pantry
Bar Rail
STONE
Pantry
(5) 16" WD SHELVES
EX. COLUMN IN STONE VENEER. TYP. OF 2
03
05
06
07
08
09
10
11
A201
ELECTRICAL LEGEND
SWITCH
RECEPTACLE
GFI RECEPTACLE
WALL WASHER
RECESSED INCANDESCENT CLG. LIGHT
CABLE TV