



# Building Permit Application

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Permits: 410-313-2455  
[www.howardcountymd.gov](http://www.howardcountymd.gov)

Date Received: 12/11/13

Permit No.: B13004504

Building Address: 3617 Cameron Ct  
 City: Ellicott City State: MD Zip Code: 21042  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: Cameron Tract RSB  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 13  
 Tax Map: 23 Parcel: 124 Grid: 9  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: SF  
 Proposed Use: sam  
 Estimated Construction Cost: \$ 100,000.00  
 Description of Work: Build 2-story addition off side of home (1st floor & basement) irregular shape  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: Jedd & Dara Canty  
 Address: 3617 Cameron Ct  
 City: Ellicott City State: MD Zip Code: 21042  
 Phone: 954-234-1500 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: Starcom Design Build Corp  
 Contact Person: Betty Weickgenant  
 Address: 8835M Columbia 100 Pkwy  
 City: Columbia State: MD Zip Code: 21045  
 License No.: 24247-01  
 Phone: 410 997-7700 Fax: 410 997-7338  
 Email: bob@starcomdesignbuild.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: _____	Depth <u>904</u> Width _____
Gross area, sq. ft./floor: _____	1 <sup>st</sup> floor: _____
Area of construction (sq. ft.): _____	2 <sup>nd</sup> floor: _____
Use group: _____	Basement: <u>430</u>
	<input type="checkbox"/> Finished Basement
	<input checked="" type="checkbox"/> Unfinished Basement
	<input type="checkbox"/> Craw Space
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: _____
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>
<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	Roof: _____
Roadside Tree Project Permit #:	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Utilities	
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Heating System</b>	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<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: Bob Starcom Print Name: Betty L Weickgenant  
 Email Address: bob@starcomdesignbuild.com Date: 12-11-13  
 Title/Company: Starcom Design Build Corp

**RECEIVED**  
 DEC 11 2013  
 LICENSES & PERMITS DIVISION

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>4/17/14</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?  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	\$ 25.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>33986</u>

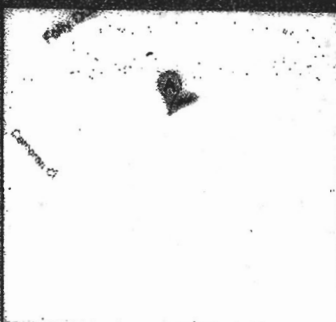
Prepared By

# EXACTA

MARYLAND SURVEYORS

www.exactaMD.com

Toll Free: 866-735-1916 Fax: 866-744-2882



PROPERTY ADDRESS: 3617 CAMERON COURT

ELLICOTT CITY, Maryland 21042

SURVEY NUMBER: MD1211.1266

FIELD WORK DATE: 11/16/2012

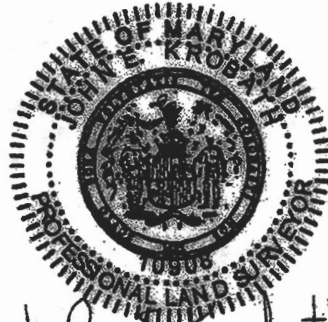
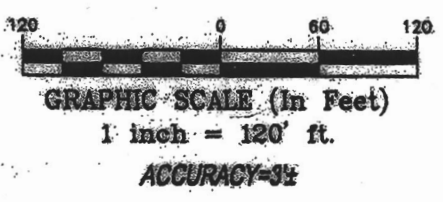
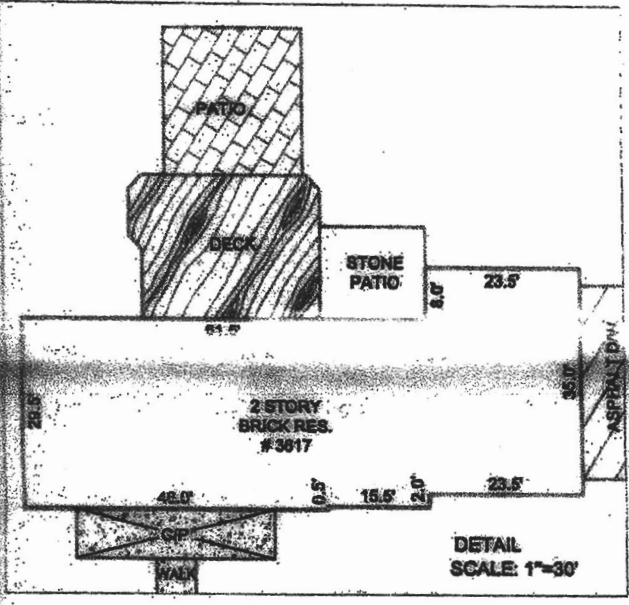
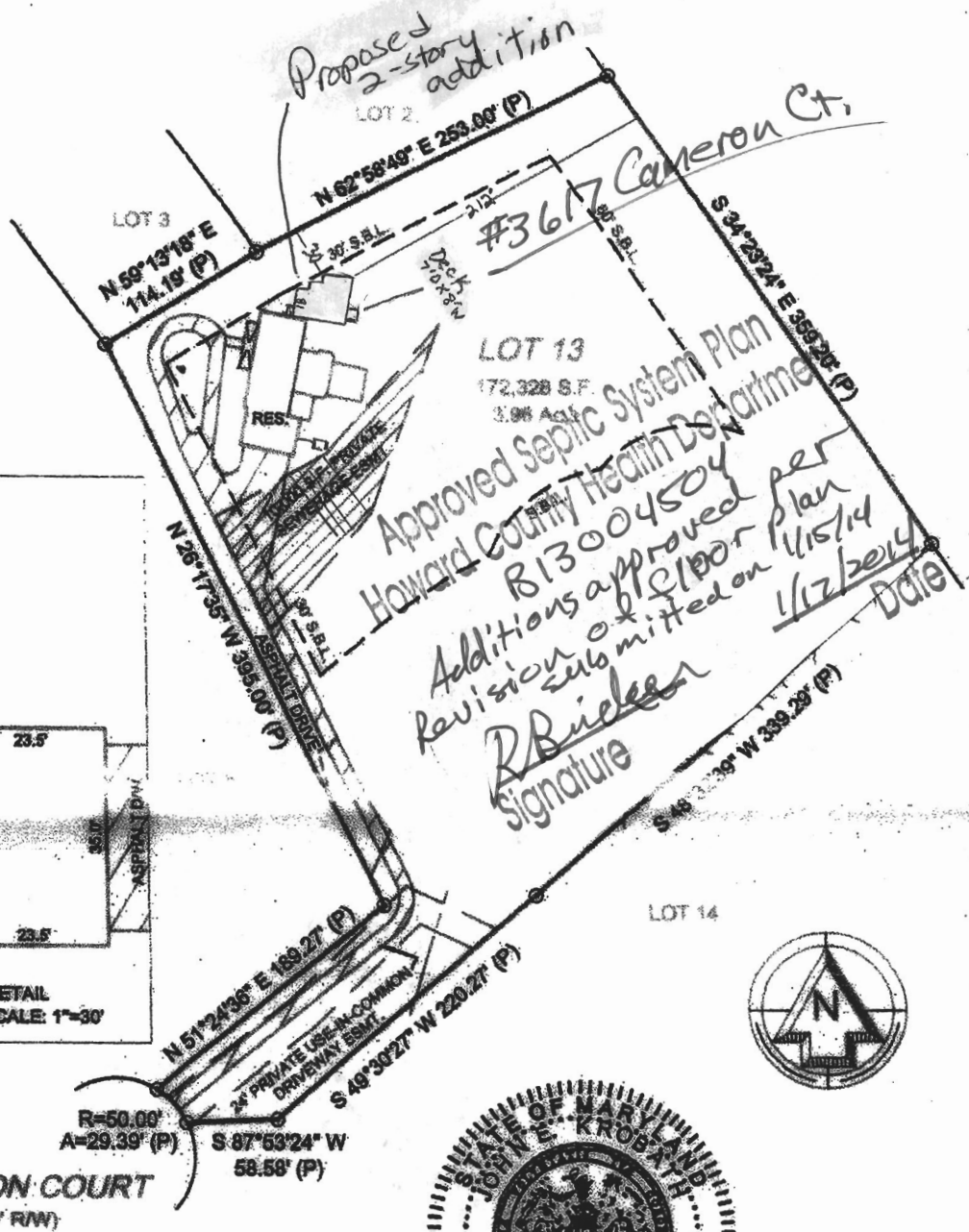
REVISION HISTORY: (rev.0 11/19/2012)

MD1211.1266

LOCATION DRAWING

LOT 13

CAMERON TRACT  
HOWARD COUNTY, MARYLAND  
11-16-2012 SCALE 1"=120'



John E. Kroboth

EXPIRES 5-26-2014

POINTS OF INTEREST:  
THE DRIVEWAY APPEARS TO CROSS THE SEWERAGE EASEMENT.

CLIENT NUMBER: 120265

DATE: 11/19/2012

BUYER: JEDD CANTY

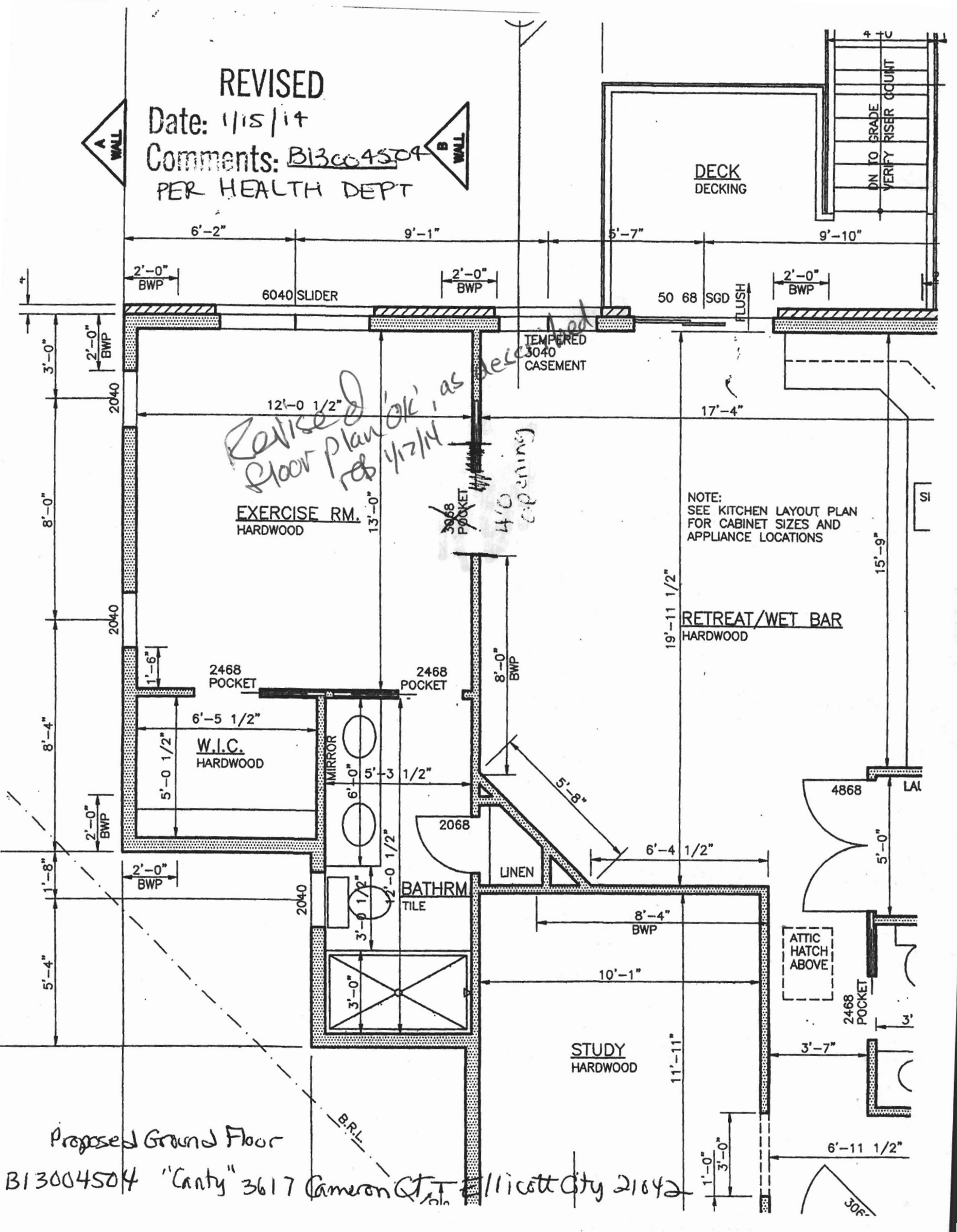
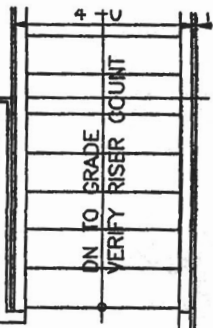


REVISED

Date: 1/15/14

Comments: B13004504

PER HEALTH DEPT



*Revised floor plan 'OK' as per Health Dept 1/17/14*

*3068 POCKET 4'0" opening*

NOTE: SEE KITCHEN LAYOUT PLAN FOR CABINET SIZES AND APPLIANCE LOCATIONS

Proposed Ground Floor

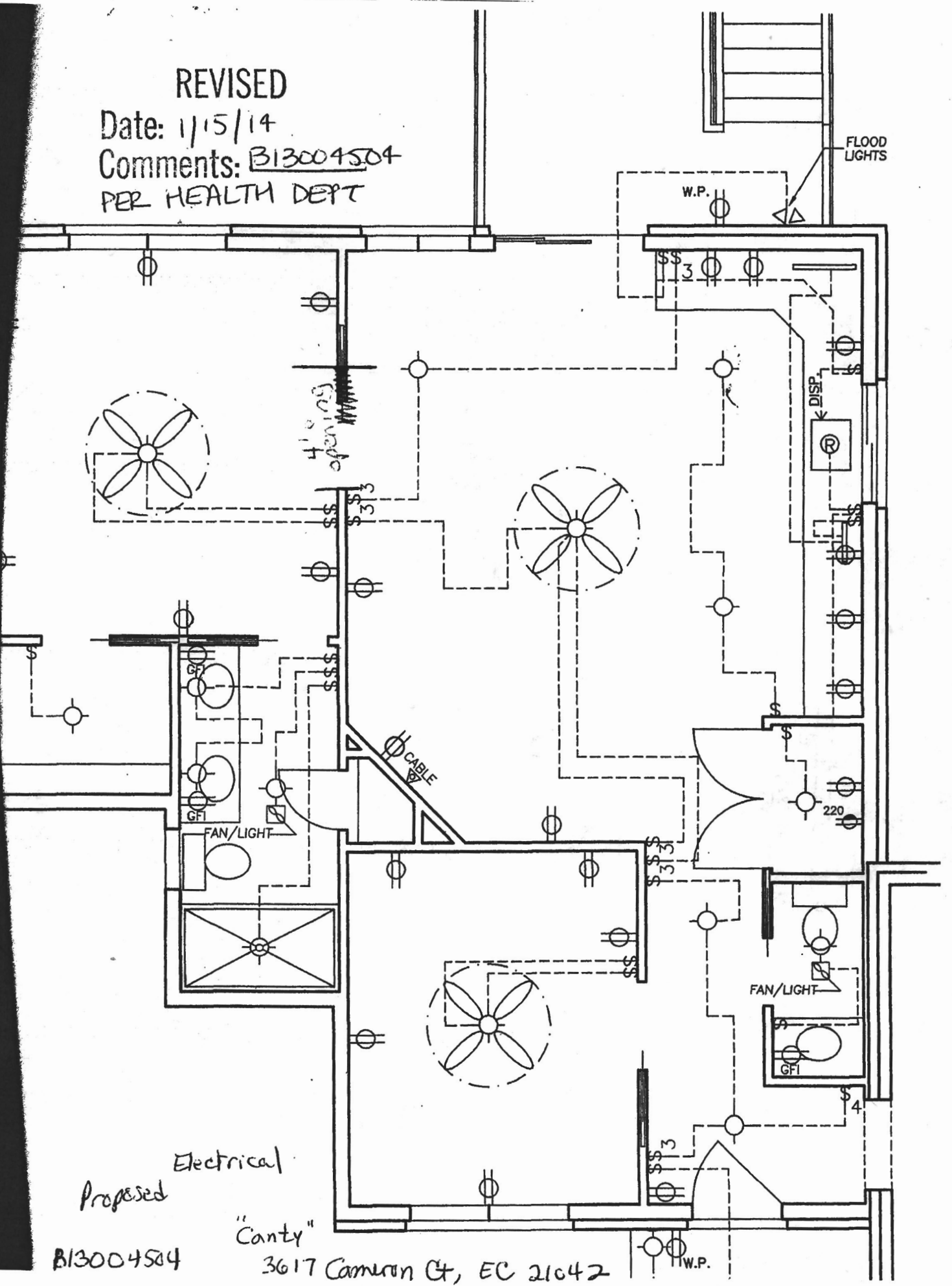
B13004504 "Canty" 3617 Cameron Ct, Hillcote City 21042



REVISED

Date: 1/15/14

Comments: B13004504  
PER HEALTH DEPT



Proposed Electrical

B13004504

"Canty"  
3617 Cameron Ct, EC 21042

