

301 854 3370

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS  
3430 COURT HOUSE DRIVE  
ELLCOTT CITY, MD 21043  
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810  
AUTOMATED INFORMATION (410) 313-3800

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

BO8000774

Building Address 6838 WULFORD RD  
CLARKSVILLE, MD 21029

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_

Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name BOB COLE

Address 6838 WULFORD RD

City CLARKSVILLE State MD Zip Code 21029

Home Phone 301 854 3441 Work Phone \_\_\_\_\_

Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use SFDWELLING

Proposed Use SAME W/ DECK

Estimated Construction Cost \$ 10K

Description of Work BUILD 27X27 DECK  
OFF HOUSE, W/STAIRS

Contractor Company MARKS MCWHORTER

Contact Person RYAN

Address 6851 REDBERRY RD

City CLARKSVILLE State MD Zip Code 21029

License No. 9807

Phone 301 674 5874 Fax \_\_\_\_\_

Occupant or Tenant \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

### BUILDING DESCRIPTION - COMMERCIAL

### BUILDING DESCRIPTION - RESIDENTIAL

**Building Characteristics**

Height: \_\_\_\_\_

No. of stories: \_\_\_\_\_

Gross area, sq. ft. per floor: \_\_\_\_\_

Use group: \_\_\_\_\_

Construction type:  
 Reinforced Concrete  
 Structural Steel  
 Masonry  
 Wood Frame  
 State Certified Modular

**Utilities**

Water Supply:  
 Public  
 Private

Sewage Disposal:  
 Public  
 Private

Electric Yes  No

Gas Yes  No

Heating System:  
 Electric  Oil   
 Natural Gas   
 Propane Gas

Sprinkler system: N/A

Full  
 Partial  
 Other Suppression  
 # of Heads \_\_\_\_\_

**Building Characteristics**

SF Dwelling  SF Townhouse

Depth \_\_\_\_\_ Width \_\_\_\_\_

1st floor: \_\_\_\_\_

2nd floor: \_\_\_\_\_

Basement:  
 Finished Basement  Unfinished Basement   
 Crawl space  Slab on Grade

No. of Bedrooms \_\_\_\_\_

Height: \_\_\_\_\_

Multi-family dwellings:  
 No. of efficiency units: \_\_\_\_\_  
 No. of 1 BR units: \_\_\_\_\_  
 No. of 2 BR units: \_\_\_\_\_  
 No. of 3 BR units: \_\_\_\_\_

Other Structure: \_\_\_\_\_

Dimensions: \_\_\_\_\_

Footings: \_\_\_\_\_

Roof Height: \_\_\_\_\_

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

Sprinkler system: N/A

NFPA #13D  
 NFPA #13R  
 Other: \_\_\_\_\_

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.

Ryan McWhorter  
 Applicant's Signature  
 Title/Company \_\_\_\_\_

RYAN MCWHORTER  
 Print Name  
3/26/08  
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*

**FOR OFFICE USE ONLY -**

AGENCY	DATE	SIGNATURE	APPROVAL
Land Development, DPZ			
State Highways			
Building Official			
Dev. Engineering, DPZ			
Health	<u>3/26/2008</u>	<u>R. Buckner</u>	
Fire Protection			
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			
ONE STOP SHOP: <input type="checkbox"/>			

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone _____	Check # _____
SDP/Red-line approval date _____	Validation # _____
Accepted by _____	

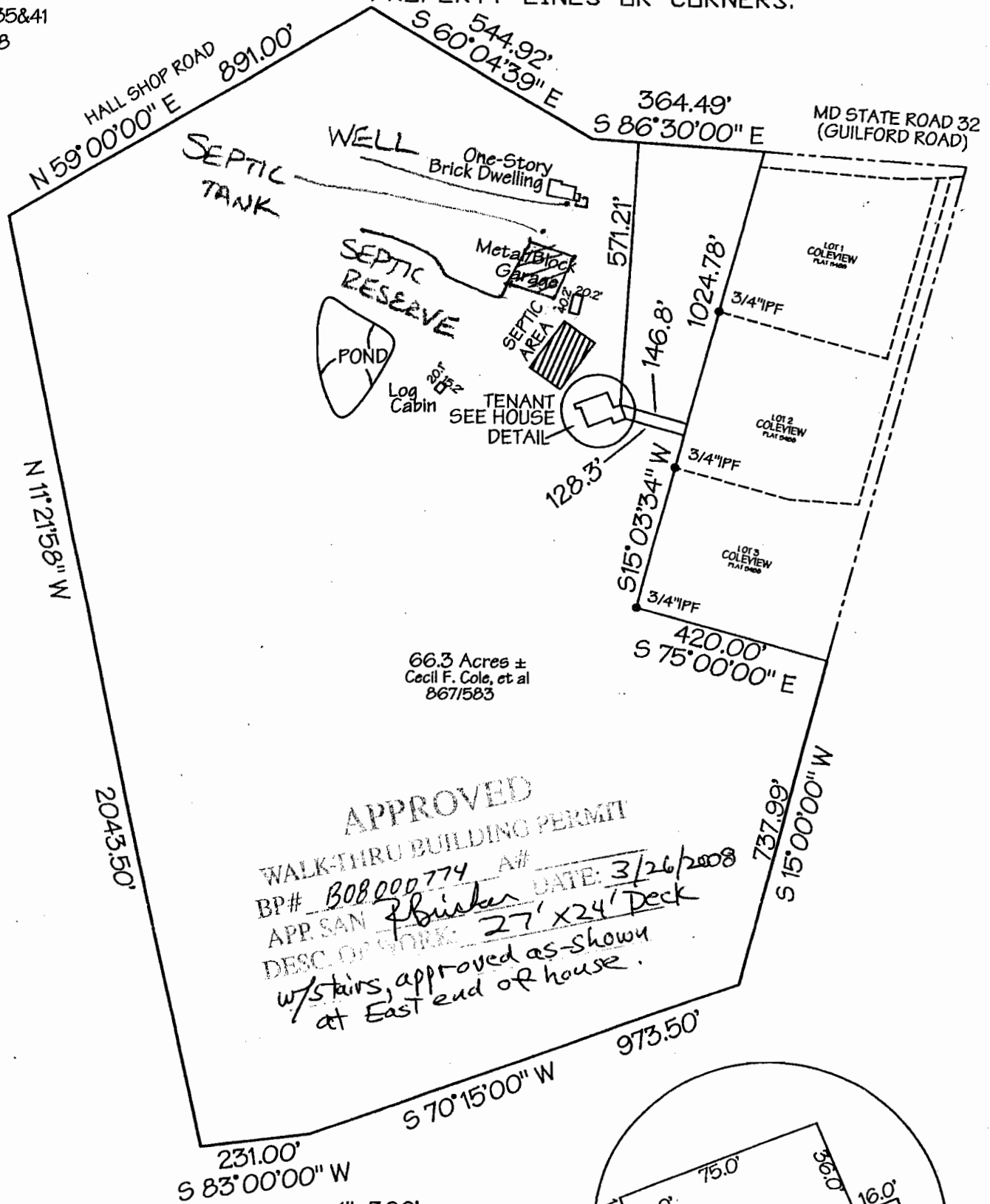
Distribution of Copies - White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

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Rev. 11/4/04

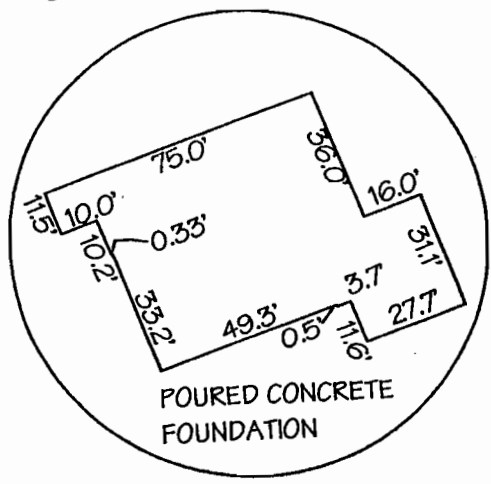
PROPERTY KNOWN AS:  
 TOM J. D'ASTO PROPERTY  
 TAX MAP 35&41  
 PARCEL 68

THIS PLAT CAN NOT BE USED TO ESTABLISH  
 PROPERTY LINES OR CORNERS.



66.3 Acres ±  
 Cecil F. Cole, et al  
 8671583

**APPROVED**  
 WALK-THRU BUILDING PERMIT  
 BP# BOB000774 A#  
 APP. SAN fbislar DATE: 3/26/2008  
 DESC. OF WORK: 27' x 24' Deck  
w/stairs, approved as shown  
at East end of house.



TENANT HOUSE DETAIL  
 1"=50'  
 FIRST FLOOR ELEV= 459.02'

LOCATION DRAWING

CERTIFICATION	SEAL	SCALE AS NOTED	DATE 6/01
<p>This is to certify that I have surveyed the property known as:  <u>PARCEL 68 GUILFORD ROAD</u></p> <p>The information shown has been established by current acceptable survey procedures and from available record information. This drawing is to be used for Title Transfer Financing, or Refinancing Only and IS NOT to be used for the Establishment of Property Lines, Location for Fences, Garages, Buildings, or other Existing or Future Improvements.</p>		<p><b>LDE Inc.</b>          Engineers, Surveyors, Planners</p> <p>9250 Rumsey Road, Suite 106          Columbia, Maryland - 21045          (410)715-1070 - (301)596-3424 - FAX(410)715-9540</p>	