

B12003046

Building Address: 11232 OLD HOPKINS ROAD
CLARKSVILLE MD, 21029 HOWARD COUNTY

Suite/Apt. # N/A SDP/WP/BA #: N/A
 Census Tract: N/A Subdivision: N/A
 Section: N/A Area: 2,154.63 sq ft Lot: N/A
 Tax Map: 41 Parcel: 118 Grid: 16
 Zoning: RURAL RESIDENTIAL Map Coordinates: _____ Lot Size: 1.2246 AC

Property Owner's Name: EDWARD GAODY
 Address: 11232 OLD HOPKINS ROAD
 City: CLARKSVILLE State: MD Zip Code: 21029
 Home Phone: 240-475-4599 Work Phone: 240-228-4289
 Applicant's Name & Mailing Address, (if other than stated herein):
MAITAZ EZZAT (TAE)
 Phone: 301-924-9550 Fax: 301-596-9181
 Email: moe-taz@RCN.COM

Existing Use: R-3 SINGLE FAMILY RESIDENTIAL
 Proposed Use: (SAME)
 Estimated Construction Cost: \$500,000
 Description of Work: NEW HOUSE AND EXISTING
STRUCTURE MODIFICATION.

Contractor Company: MARYLAND CUSTOM BUILDERS, INC.
 Contact Person: MAITAZ EZZAT (TAE)
 Address: P.O. BOX 42
 City: CLARKSVILLE State: MD Zip Code: 21029
 License No.: MHB# 381 BC# 2608
 Phone: 301-924-9550 Fax: 301-596-9181
 Email: moe-taz@RCN.COM

Occupant or Tenant: PROPERTY OWNER
 Was tenant space previously occupied? Yes No
 Contact Name: MICHE BOOZ
 Address: 209 MARKET STREET
 City: BROKEVILLE State: MD Zip Code: 20833
 Phone: 301-774-6911 Fax: 301-774-1908
 Email: mbooz@michebooz.com

Engineer/Architect Company: MICHE BOOZ ARCHITECT, INC.
 Responsible Design Prof.: MICHE BOOZ
 Address: 209 MARKET STREET
 City: BROKEVILLE State: MD Zip Code: 20833
 Phone: 301-774-6911 Fax: 301-774-1908
 Email: mbooz@michebooz.com

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit #:	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor: <u>33' 0"</u> <u>64'</u>	<input checked="" type="checkbox"/> Private
2 nd floor: _____	<u>Sewage Disposal</u>
Basement: _____	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input checked="" type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms: <u>3</u>	<input checked="" type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<input type="checkbox"/> Manufactured Home	

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: [Signature] Print Name: TAE EZZAT
 Email Address: moe-taz@RCN.COM Date: 9/10/12
 Title/Company: MARYLAND CUSTOM BUILDERS, INC.

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>2/4/13</u>	<u>[Signature]</u>
Fire Protection		

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

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	\$ 1000
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$

Distribution of Copies: White: Building Officials Green: PSZA, Zoning Yellow: SHA, Engineering, Fire Health Gold: SHA
 T:\Operations\Updated Forms\New building app 11.10.2010.docx

RECEIVED

SEP 10 2012

LICENSES & PERMITS
 DIVISION

CHK# 6076



HOWARD COUNTY DEPARTMENT OF PLANNING AND ZONING

3430 Courthouse Drive ▪ Ellicott City, Maryland 21043 ▪ 410-313-2350

Marsha S. McLaughlin, Director

www.howardcountymd.gov

FAX 410-313-3467

TDD 410-313-2323

September 11, 2012

Edward M. Gaddy
11232 Old Hopkins Road
Clarksville, MD 21029

The Howard County Zoning Regulations permit only one single-family detached dwelling unit use per lot. However, this letter temporarily authorizes the construction of a new dwelling on the property located at 11232 Old Hopkins Road, prior to removal of the existing dwelling ("Original Dwelling Unit"), on the condition that you comply with all provisions declared herein. This temporary authorization is only valid for six months from the date of this letter or until the issuance of the final use and occupancy permit for the new dwelling, whichever occurs first. If an extension is necessary due to delays, you must contact this Department in writing prior to the six month deadline in order to request an extension of this authorization.

Upon the issuance of either a temporary or final use and occupancy permit for the new dwelling, the Original Dwelling Unit must cease being used, and must be removed within 30 days. Failure to remove the Original Dwelling Unit as required is hereby declared to be a violation of the Zoning Regulations which will induce an enforcement action as delineated in Section 102.B of the Zoning Regulations. Such an enforcement action may include, but is not limited to, Civil Fines or the removal of the Original Dwelling Unit by the County at the owner's expense.

The Department of Planning and Zoning will provide its endorsement on a building permit application for the construction of the new dwelling on the subject property only upon the receipt of a copy of this letter signed by all owners of the property. This signed copy must be submitted with your building permit application for the construction of the new dwelling unit. This authorization does not relieve any of the standard requirements for building permit approval. Please notify this Division when you have received temporary or final use and occupancy permit for the new dwelling, and also when the Original Dwelling Unit has been removed. This authorization is not transferable. If you have questions regarding this matter, please contact me at 313-2350.

Sincerely,

Cindy Hamilton, Chief
Division of Public Service
and Zoning Administration

By signing below, I hereby affirm that I have read, understand, and will comply with the authorization granted above:

Edward M. Gaddy
Signature

2012 09 11
Date

Edward M. Gaddy
Print Name

Signature

Date

Print Name

(If additional signatures are necessary, please provide on back of page)

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