



# 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: 5105 MOUNTAIN LANE  
 City: CLARKSVILLE State: MD Zip Code: 21029  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: SFD  
 Proposed Use: SAME w/DECK  
 Estimated Construction Cost: \$ 6,900  
 Description of Work: 5' x 9' DECK WITH 4 STEPS

Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: OMIP TO FIGH  
 Address: 5105 MOUNTAIN LANE  
 City: CLARKSVILLE State: MD Zip Code: 21029  
 Phone: 410-371-1967 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: EVERGREEN FENCE & DECK  
 Address: PO Box 274  
 City: BROOKVILLE State: MD Zip Code: 20833  
 Phone: 301.774.2211 Fax: 301.774.3028  
 Email: evergreenfence@verizon.net

Contractor Company: SAME  
 Contact Person: MARK or NATALIE DILLON  
 Address: \_\_\_\_\_  
 City: SAME State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No.: 49311  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

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:	<b>Depth</b>	<b>Width</b>
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:	
	2 <sup>nd</sup> floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	<b>Multi-family Dwelling</b>	
<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: <u>DECK</u>	
	Dimensions: <u>5' x 9'</u>	
<input checked="" type="checkbox"/> <b>Roadside Tree Project Permit</b>	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof: <u>NA</u>	
<b>Roadside Tree Project Permit #</b>	<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 type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Heating System</b>	
<input 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
<b>Grading Permit Number:</b>	
<b>Building Shell Permit Number:</b>	

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.

Natalie A Dillon  
 Applicant's Signature  
evergreenfence@verizon.net  
 Email Address  
VP/EVERGREEN FENCE & DECK  
 Title/Company

NATALIE DILLON  
 Print Name  
4/9/14  
 Date

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>4/9/14 Natalie A Dillon</u>

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

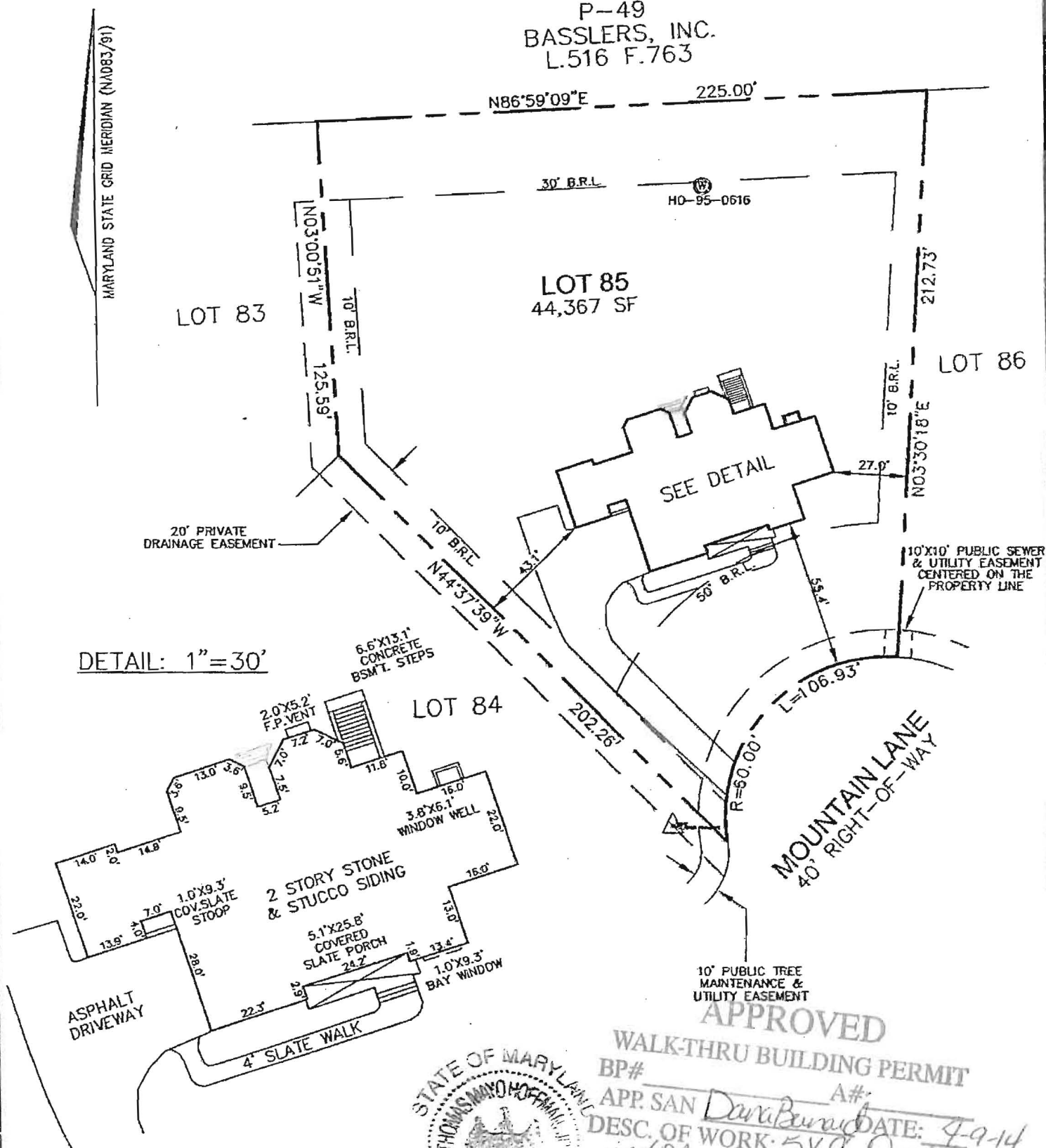
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot 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

THIS PLAT IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY THE LENDER OR TITLE INSURANCE COMPANY OR IT'S AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING. THIS PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR FUTURE IMPROVEMENTS. THIS PLAT DOES NOT PROVIDE THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING. THIS PLAT CONTAINS A TOLERANCE OF ACCURACY OF 0.2' MORE OR LESS.

P-49  
 BASSLERS, INC.  
 L.516 F.763



APPROVED  
 WALK-THRU BUILDING PERMIT

BP# \_\_\_\_\_ A#:  
 APP. SAN *Dani Bernick* DATE: *4-9-14*  
 DESC. OF WORK: *5x9 Deck w/Steps approved*



I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN AND THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.

PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM A DULY LICENSED PROPERTY LINE SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 267, EXPIRATION DATE JULY 28, 2014.

*Thomas M. Hoffman Jr.*  
 THOMAS M. HOFFMAN, JR., PROPERTY LINE SURVEYOR #267 DATE *12-4-13*

BUILDING PERMIT #13000631

SCALE 1" = 50'	DATE 12/04/13	ROBERT H. VOGEL ENGINEERING, INC. ENGINEERS - SURVEYORS - PLANNERS 8407 MAIN STREET ELLCOTT CITY, MARYLAND 21043 TEL: 410-461-7666 FAX: 410-461-8961	FINAL LOCATION DRAWING 5105 MOUNTAIN LANE LOT 85 WALNUT GROVE PLAT No. 19224 5th ELECTION DISTRICT HOWARD COUNTY, MARYLAND
DRAWN BY A.M.S.	CHECKED BY T.M.H.		
PLAT NUMBER 19220-19227	JOB NUMBER 08-22.00		