



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.: B14001518

Building Address: 16080 AE Mullinix Rd
 City: Woodbine State: MD Zip Code: 21797
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Residential
 Proposed Use: Residential
 Estimated Construction Cost: \$ 116,000
 Description of Work: Build new 18'x18' sunroom, remodel kitchen, dining, + living rooms

Occupant or Tenant: Steve + Regina Schneider
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Steve + Regina Schneider
 Address: 16080 AE Mullinix Rd
 City: Woodbine State: MD Zip Code: 21797
 Phone: 301-466-7082 Fax: _____
 Email: RB555@verizon.net

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Douglas Mast
 Address: 1045 Long Corner Rd
 City: Mt Airy State: MD Zip Code: 21771
 Phone: 240-405-0763
 Email: d.mast@mastconstructionllc.com

Contractor Company: Mast Construction LLC
 Contact Person: Douglas Mast
 Address: 1045 Long Corner Rd
 City: Mt Airy State: MD Zip Code: 21771
 License No.: 92245
 Phone: 240-405-0763 Fax: _____
 Email: d.mast@mastconstructionllc.com

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

| Commercial Building Characteristics | Residential Building Characteristics | |
|---|--|--------------|
| Height: | <input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse | |
| No. of stories: | <u>Depth</u> | <u>Width</u> |
| Gross area, sq. ft./floor: | 1 st floor: | |
| | 2 nd floor: | |
| Area of construction (sq. ft.): | Basement: | |
| | <input type="checkbox"/> Finished Basement | |
| Use group: | <input type="checkbox"/> Unfinished Basement | |
| | <input type="checkbox"/> Crawl Space | |
| Construction type: | <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 <input checked="" type="checkbox"/> No | Roof: | |
| Roadside Tree Project Permit # | <input type="checkbox"/> State Certified Modular | |
| | <input type="checkbox"/> Manufactured Home | |

| Utilities | |
|---|--|
| <u>Water Supply</u> | |
| <input type="checkbox"/> Public | |
| <input checked="" type="checkbox"/> Private | |
| <u>Sewage Disposal</u> | |
| <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 |
| <u>Heating System</u> | |
| <input type="checkbox"/> Electric | <input type="checkbox"/> Oil |
| <input type="checkbox"/> Natural Gas | <input type="checkbox"/> Propane Gas |
| <input type="checkbox"/> Other: | |
| <u>Sprinkler System:</u> | |
| <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: Douglas E. Mast Print Name: Douglas E. Mast
 Email Address: d.mast@mastconstructionllc.com Date: 5-13-14
 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 | <u>6/13/14</u> | <u>R. Buckler</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: | |

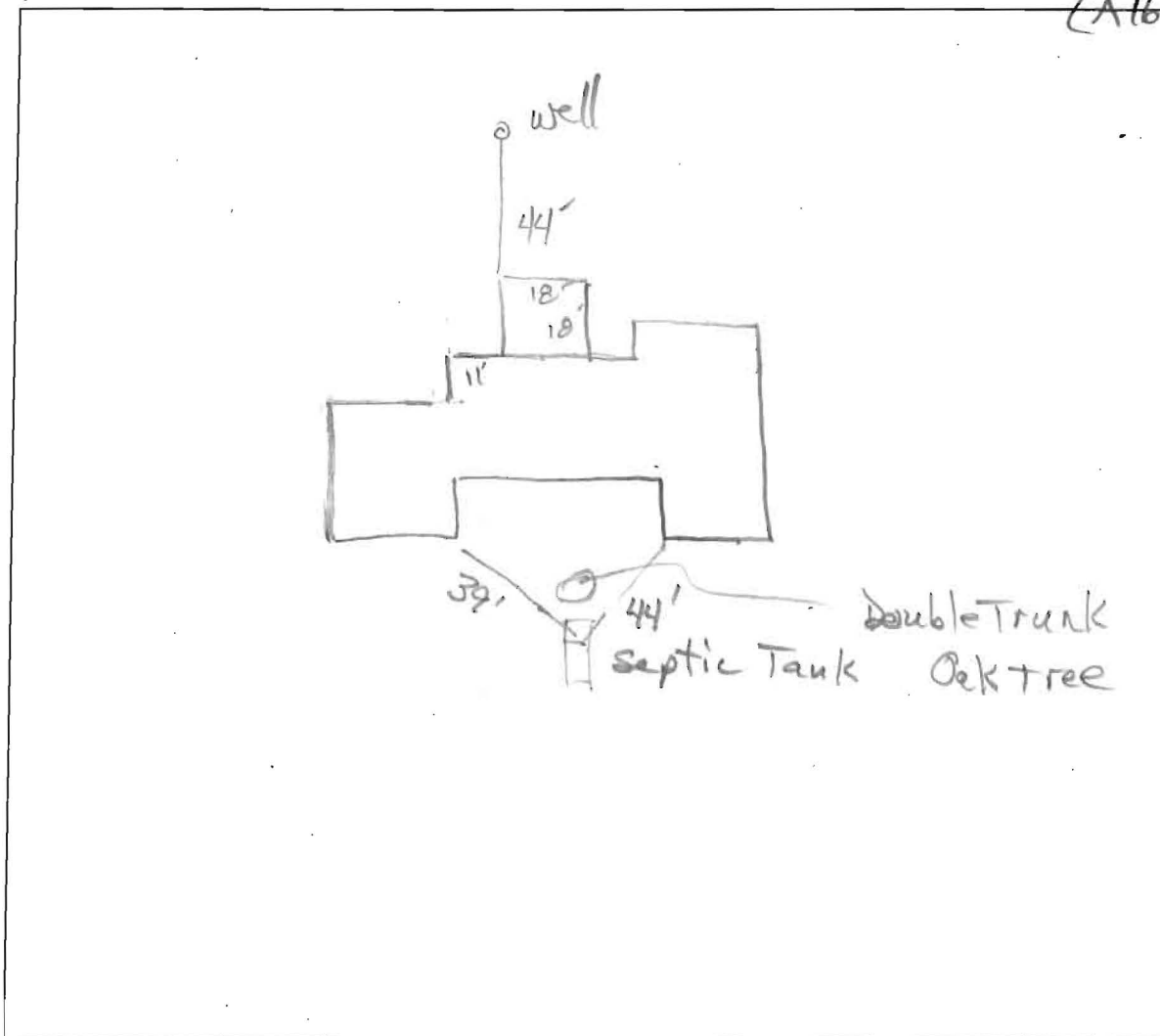
| | | |
|----------------|----|--------------|
| Filing Fee | \$ | <u>25.00</u> |
| Permit Fee | \$ | |
| Tech Fee | \$ | |
| Excise Tax | \$ | |
| PSFS | \$ | |
| Guaranty Fund | \$ | |
| Add'l per Fee | \$ | |
| Total Fees | \$ | |
| Sub-Total Paid | \$ | |
| Balance Due | \$ | |
| Check | # | <u>3694</u> |

SITE INSPECTION SHEET

OWNER: Steve & Regina Schneider PHONE #: 301-854-6003
ADDRESS: 16080 AE Mullinix Rd. CONTRACTOR: D. Mast
2797 WELL TAG #: HO-71-1471
SUBDIVISION: _____ LOT: _____ COUNTY #: _____
PROPOSAL: Expand living area (sunroom, etc)

LOCATION DIAGRAM

P58126A Repair
(A16417)



COMMENTS: well steel case ~18" w/ 1-pc metal cap. Conduit in cap port; tight. Proposed addition 44 feet from well.

DATE: 6/9/ INSPECTOR: F. Buehler