



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: 13505 Mitchells Way
 City: WEST FRIENDSHIP State: MD Zip Code: 21794
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: N/A
 Proposed Use: COVERED DOCK
 Estimated Construction Cost: \$ 56,000
 Description of Work: Concrete DOCK WITH ROOF,
APP. 17x20' 340 TP

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

Property Owner's Name: CAREY CARLSON
 Address: 13505 Mitchells Way
 City: WEST FRIENDSHIP State: MD Zip Code: 21794
 Phone: 443-463-4268 Fax: 410-750-2009
 Email: _____

Applicant's Name & Mailing Address (If other than stated herein)
 Applicant's Name: RAFFAEL MANNARELLI
 Address: 9376 BALT. NAT. PIKE
 City: GLICOTTA State: MD Zip Code: 21092
 Phone: 410-750-7740 Fax: 410-750-2009
 Email: Rmcblandscapes481@gmail.com

Contractor Company: CONCEPT BUILDING
 Contact Person: RAFFAEL MANNARELLI
 Address: SAME AS ABOVE
 City: _____ State: _____ Zip Code: _____
 License No.: 50636
 Phone: 410-750-7740 Fax: 410-750-2009
 Email: SAME AS ABOVE

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 Width
Gross area, sq. ft./floor:	1 st floor: 2 nd floor:
Area of construction (sq. ft.):	Basement:
Use group:	<input checked="" type="checkbox"/> Finished Basement
<u>Construction type:</u>	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Masonry	No. of Bedrooms: <u>-</u>
<input type="checkbox"/> Wood Frame	<u>Multi-family Dwelling</u>
<input type="checkbox"/> State Certified Modular	No. of efficiency units:
	No. of 1 BR units:
	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 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 checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:
<u>Sprinkler System:</u>
<input type="checkbox"/> Yes <input checked="" 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
RMCBLANDSCAPES481@gmail.com
 Email Address
PRESIDENT
 Title/Company

Print Name
RAFFAEL MANNARELLI
 Date
8-25-2014

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>8/25/14</u>	<u>[Signature]</u>

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	#

13503 MITCHELLS WAY WEST FRIENDSHIP

GENERAL NOTES:

LOCATION DRAWING IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATIONS OF EASES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS LOCATION DRAWING DOES NOT PROVIDE ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR OBTAINING FINANCING FOR RE-FINANCING.

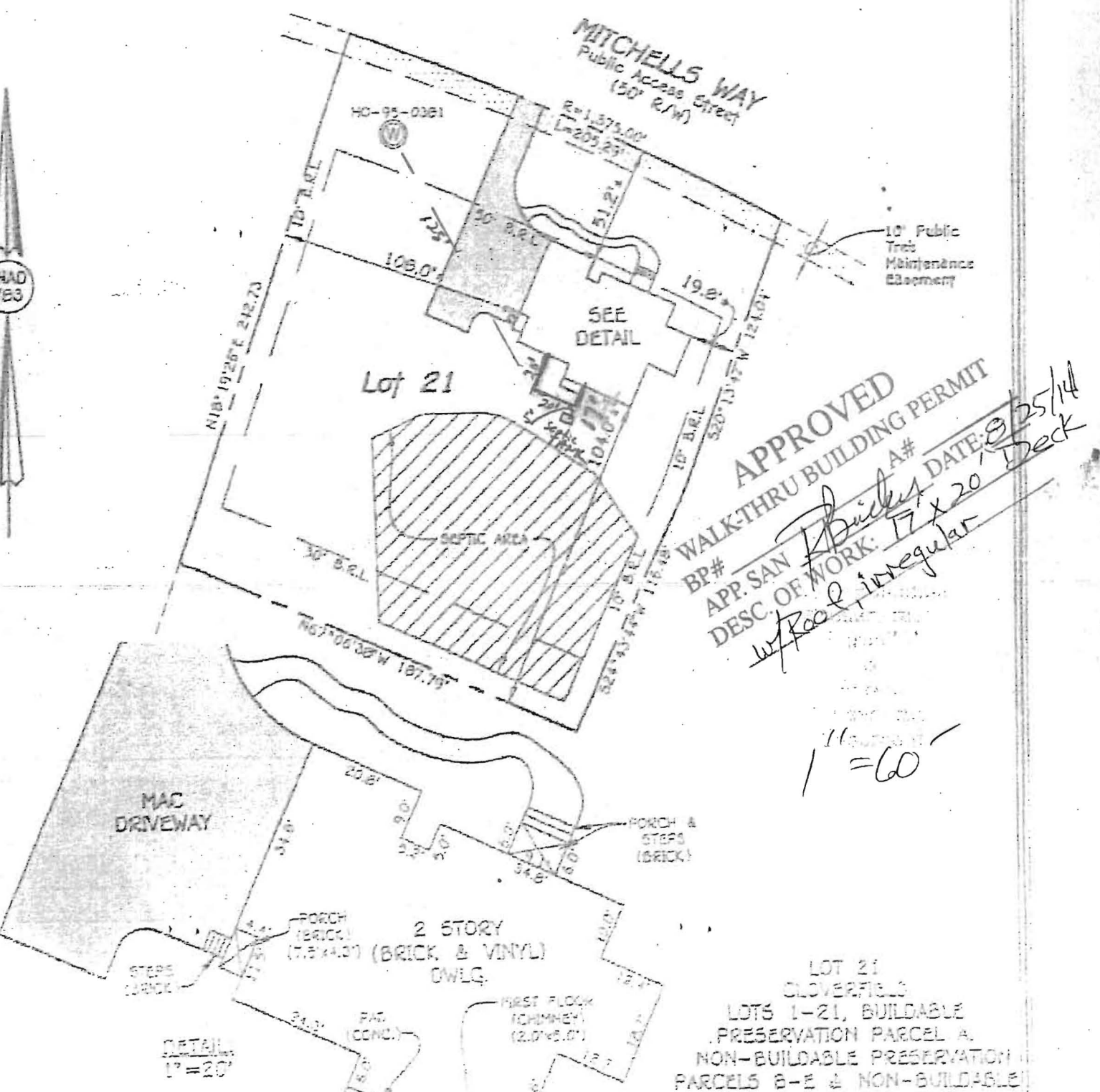
PROJECT PROPERTY IS SHOWN IN ZONE D ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 24004A0015 B, EFFECTIVE DEC. 4, 1995.

OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 1/4" TITLE REPORT FURNISHED, SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.

EXISTING WELL(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HC-55-0361) HAS BEEN FIELD LOCATED BY MR. COLLINS AND CARTEE, INC. PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.

PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND I AM A DULY LICENSED PROPERTY LINE SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 839, EXPIRATION DATE 4/2012.

DWG PERMIT# B-1100106;



APPROVED
WALK-THRU BUILDING PERMIT
 BP# _____ A# _____
 APP. SAN _____ DATE: 8/25/14
 DESC OF WORK: 17' x 20' Deck
 w/ RAIL, irregular

LOT 21
 CLOVERFIELD
 LOTS 1-21, BUILDABLE
 PRESERVATION PARCEL A
 NON-BUILDABLE PRESERVATION
 PARCELS B-E & NON-BUILDABLE

DETAIL 1"=20'

1"=60'