



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: 7130 Moorland Dr
City: Clarksville State: _____ Zip Code: 21029
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: Ashleigh
Section: 0 Area: _____ Lot: 22
Tax Map: 41 Parcel: 475 Grid: 7
Zoning: _____ Map Coordinates: _____ Lot Size: 37,500

Existing Use: SFD
Proposed Use: Inground pool
Estimated Construction Cost: \$ 39,000
Description of Work: 19' x 37'6" inground concrete pool, depth 3' to 7'

Occupant or Tenant: _____
Was tenant space previously occupied? Yes No
Contact Name: _____
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: | Depth | Width |
| 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 | Multi-family Dwelling | |
| <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: | |
| > 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 | |

Property Owner's Name: Mahoney, Brendan
Address: 7130 Moorland Dr
City: Clarksville State: MD Zip Code: 21029
Phone: 410 379 2208 Fax: _____
Email: _____

Applicant's Name & Mailing Address (If other than stated herein)
Applicant's Name: Karen Kowley
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: 410-507-7705 Fax: _____
Email: _____

Contractor Company: Sunrise Premiere Pools
Contact Person: Donald Satterth
Address: Cape St. Claire
City: Anna State: MD Zip Code: 21049
License No.: 45494
Phone: _____ Fax: _____
Email: _____

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

| Utilities | |
|---|--|
| Water Supply | |
| <input checked="" type="checkbox"/> Public | |
| <input checked="" type="checkbox"/> Private | |
| Sewage Disposal | |
| <input checked="" 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 | |
| Heating System | |
| <input type="checkbox"/> Electric <input type="checkbox"/> Oil | |
| <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas | |
| <input type="checkbox"/> Other: | |
| Sprinkler System: | |
| <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.

Karen Kowley
Applicant's Signature

Email Address

Title/Company

Karen Kowley
Print Name
4/10/2014
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>01/13/14</u> | <u>[Signature]</u> |

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

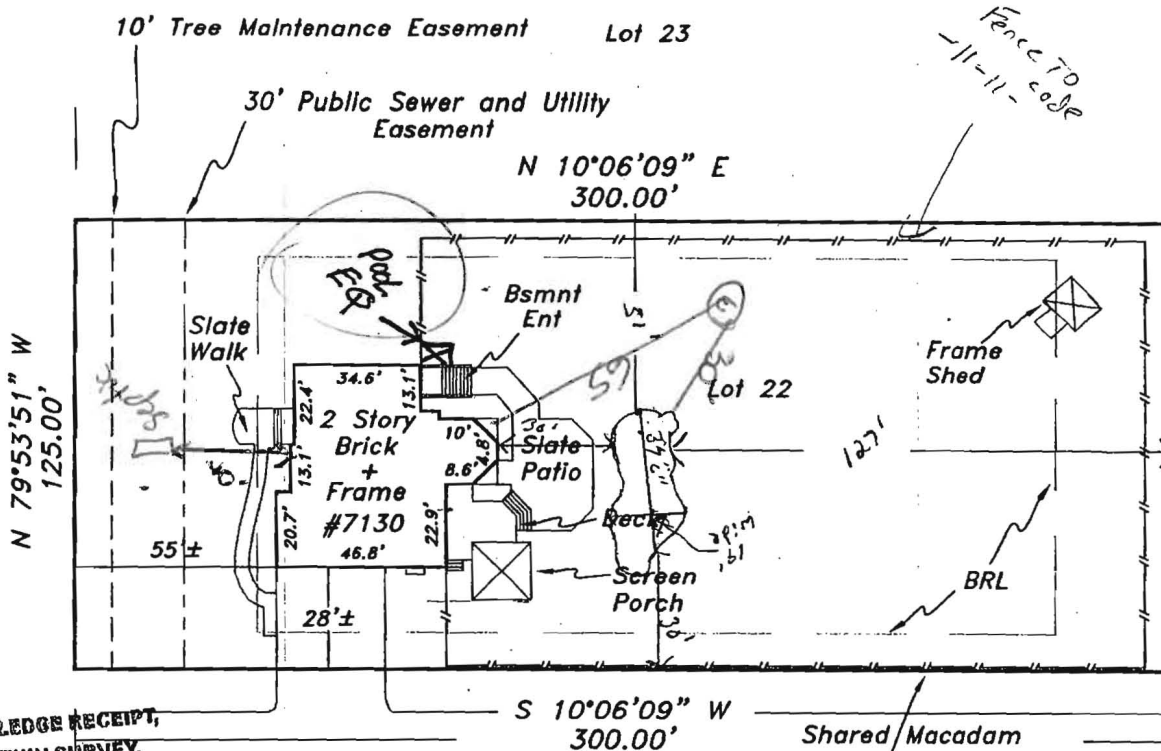
| DPZ SETBACK INFORMATION |
|---|
| Front: |
| Rear: |
| Side: |
| Side St.: |
| All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Historic District? <input type="checkbox"/>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

Building Restriction Lines:
 Front....50'
 Sides....10'
 Rear.....30'

Moorland Drive



APPROVED

WALKTHRU BUILDING PERMIT

PP# SAN H. Oswald DATE: 10/13/14

DESC. OF WORK: 19 x 37 ft

inground concrete pad 3 to 7'

THE UNDERSIGNED BUYERS ACKNOWLEDGE RECEIPT, REVIEW AND ACCEPTANCE OF THE WITHIN SURVEY.

The purpose of this drawing is to locate, describe, and represent the positions of buildings and substantial improvements affecting the property shown hereon, being known as:
 Lot 22, Block O, Phase Two,
 ASHLEIGH KNOLLS
 recorded among the land records of Howard County, Maryland in Plat 11538



LOCATION DRAWING
 7130 Moorland Drive
 5th ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

PREPARED FOR:

This is page one of a two page document. The advice found on the affixed page is an integral part of this drawing, and is not valid without all pages.

NTT Associates, Inc.
 16205 Old Frederick Rd.
 Mt. Airy, Maryland 21771
 Phone: (410) 442-2031
 Fax: (410) 442-1315
 www.nttsurveyors.com

Scale: 1" = 50'
 Date: 7-14-14
 Field By: DR
 Drawn By: DR
 File No.: LMD15211
 Page No.: 1 of 2