

Permits: 410-313-2455  
 Inspections: 410-313-1810  
 Automated Line: 410-313-3800

Howard County Building/Fire Permit Application  
 Department of Inspections, Licenses & Permits  
 3430 Court House Drive  
 Ellicott City, MD 21043

Permit Number: 1101086

Building Address: 2465 Ellice Way  
West Friendship MD 21994  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: Archeron Estates  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 1  
 Tax Map: 15 Parcel: 2 Grid: 7  
 Zoning: R-200 Map Coordinates: \_\_\_\_\_ Lot Size: 49,751 sq ft

Existing Use: blt, lot  
 Proposed Use: single home  
 Estimated Construction Cost: \$ 450,000  
 Description of Work: Construction of new single home

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

Property Owner's Name: Ronald & Bonnie Michael  
 Address: 1709 Heathwood Way  
 City: Sylmar MD State: MD Zip Code: 21154  
 Home Phone: 4104031140 Work Phone: 4103024356  
 Applicant's Name & Mailing Address, (If other than stated herein): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Contractor Company: Owner  
 Contact Person: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No.: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Engineer/Architect Company: JRA Architecture  
 Responsible Design Prof.: \_\_\_\_\_  
 Address: 1242 Myrtle St. Ellicott City, MD  
 City: Woodbine MD State: MD Zip Code: 21797  
 Phone: 4432265945 Fax: \_\_\_\_\_  
 Email: jrivora@jra-arch.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 type="checkbox"/> Partial
	<input type="checkbox"/> Other Suppression
	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 <sup>st</sup> floor: <u>35'</u> <u>70'</u>	<input checked="" type="checkbox"/> Private
2 <sup>nd</sup> floor: <u>35'</u> <u>50'</u>	<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms: <u>3</u>	<input 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:	
Roof:	
<input type="checkbox"/> State Certified Modular	
<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: Ronald & Bonnie Michael  
 Email Address: bonnie@jra-arch.com  
 Title/Company: \_\_\_\_\_

Print Name: Bonnie L. Michael  
 Date: 12/17/2010

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>12/17/2010</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? <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	\$ _____



# 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: 10-17-13

Permit No.: B13003920

Building Address: 2425 ELLIES WAY  
 City: WEST FRIENDSHIP State: MD Zip Code: 21794  
 Suite/Apt. # — SDP/WP/BA #: F-08-152  
 Census Tract: 6030.00 Subdivision: ARRINGTON ESTATES  
 Section: — Area: — Lot: 1  
 Tax Map: 15 Parcel: 0283 Grid: 7  
 Zoning: RCDEO Map Coordinates: — Lot Size: 49751.SF

Property Owner's Name: CATOCTIN HOMES, INC.  
 Address: P.O. BOX 512  
 City: ELICOTT CITY State: MD Zip Code: 21041  
 Phone: 410 772 5804 Fax: 410 772 5805  
 Email: PRPARADIS@COMCAST.NET

Applicant's Name & Mailing Address, (if other than stated herein)  
 Applicant's Name: —  
 Address: —  
 City: — State: — Zip Code: —  
 Phone: — Fax: —  
 Email: —

Existing Use: VACANT LOT  
 Proposed Use: SINGLE FAMILY HOUSE  
 Estimated Construction Cost: \$ 350,000  
 Description of Work: NEW SFD "HARFORD" W/ 3 GARAGE 2 STORY FULL FINISHED BSMR, 10 R, 4 FB, LHB, FP 4 BR  
 Occupant or Tenant: —  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: —  
 Address: —  
 City: — State: — Zip Code: —  
 Phone: — Fax: —  
 Email: —

Contractor Company: CATOCTIN HOMES, INC.  
 Contact Person: PHILLIP PARADIS  
 Address: P.O. BOX 512  
 City: ELICOTT CITY State: MD Zip Code: 21041  
 License No.: 579  
 Phone: 410 772 5804 Fax: 410 772 5805  
 Email: PRPARADIS@COMCAST.NET

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 <sup>st</sup> floor:	2 <sup>nd</sup> floor:
Area of construction (sq. ft.):	Basement:	
Use group:	<input checked="" type="checkbox"/> Finished Basement	
	<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: <u>4</u>	
<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:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Heating System</b>	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>G13000345</u>	
Building Shell Permit Number: <u>—</u>	

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: PHILLIP G. PARADIS  
 Date: 10/17/13  
 Email Address: —  
 Title/Company: VICE PRESIDENT CATOCTIN HOMES, 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>[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	\$ 100
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	\$ 9165

## Real Property Data Search ( WI)

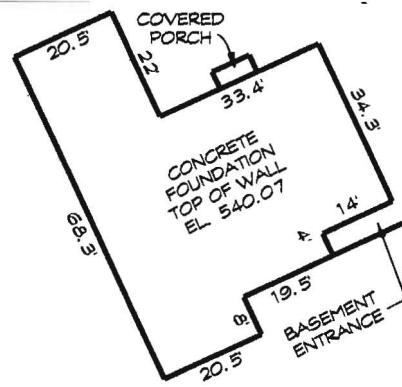
[Search Help](#)

## Search Result for HOWARD COUNTY

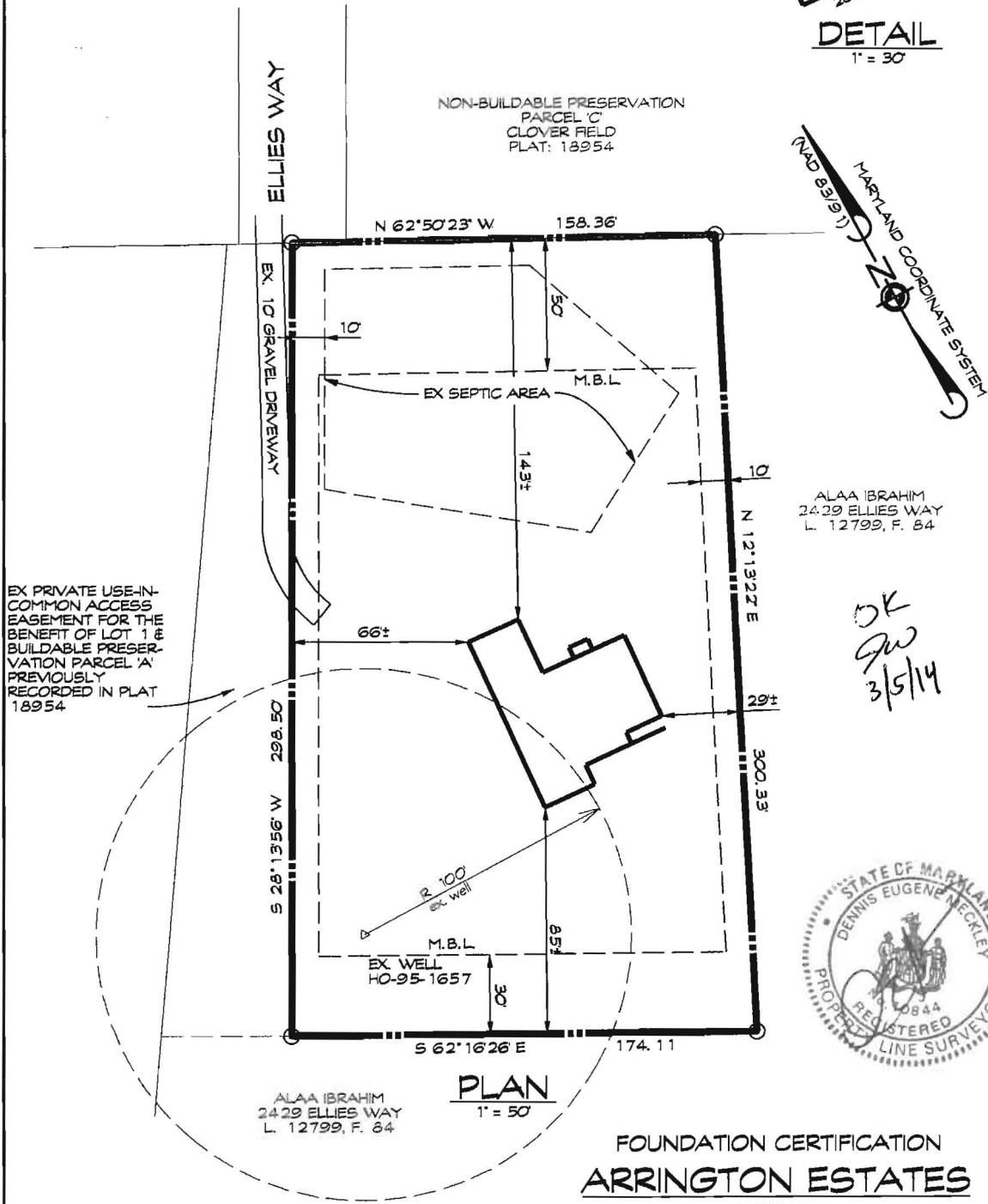
<a href="#">View Map</a>	<a href="#">View GroundRent Redemption</a>	<a href="#">View GroundRent Registration</a>
<b>Account Identifier:</b> District - 03 Account Number - 353907		
<b>Owner Information</b>		
<b>Owner Name:</b>	CATOCTIN HOMES INC	<b>Use:</b> RESIDENTIAL
		<b>Principal Residence:</b> NO
<b>Mailing Address:</b>	2425 ELLIES WAY WEST FRIENDSHIP MD 21794-	<b>Deed Reference:</b> 1) /15306/ 00204 2)
<b>Location &amp; Structure Information</b>		
<b>Premises Address:</b>	2425 ELLIES WAY WEST FRIENDSHIP 21794-0000	<b>Legal Description:</b> LOT 1 1.14 A. 2425 ELLIES WAY ARRINGTON ESTATES
<b>Map:</b> 0015	<b>Grid:</b> 0007	<b>Parcel:</b> 0283
<b>Sub District:</b>	<b>Subdivision:</b> 0000	<b>Section:</b>
		<b>Block:</b> 9999
		<b>Lot:</b> 1
		<b>Assessment Year:</b> 2013
		<b>Plat No:</b> 20440
		<b>Plat Ref:</b>
	<b>Town:</b>	NONE
<b>Special Tax Areas:</b>	<b>Ad Valorem:</b>	100
	<b>Tax Class:</b>	
<b>Primary Structure Built</b>	<b>Above Grade Enclosed Area</b>	<b>Finished Basement Area</b>
		<b>Property Land Area</b>
		1.1400 AC
		<b>County Use</b>
		000000
<b>Stories</b>	<b>Basement</b>	<b>Type</b>
		<b>Exterior</b>
		<b>Full/Half Bath</b>
		<b>Garage</b>
		<b>Last Major Renovation</b>
<b>Value Information</b>		
	<b>Base Value</b>	<b>Value</b>
		<b>Phase-in Assessments</b>
		As of
		As of
		As of
<b>Land:</b>	211,400	179,900
<b>Improvements</b>	0	0
<b>Total:</b>	211,400	179,900
<b>Preferential Land:</b>	0	0
		179,900
		179,900
<b>Transfer Information</b>		
<b>Seller:</b> MICHAEL RONALD	<b>Date:</b> 10/30/2013	<b>Price:</b> \$325,000
<b>Type:</b> ARMS LENGTH VACANT	<b>Deed1:</b> /15306/ 00204	<b>Deed2:</b>
<b>Seller:</b> ARRINGTON VENTURE LLC	<b>Date:</b> 08/03/2009	<b>Price:</b> \$350,000
<b>Type:</b> ARMS LENGTH VACANT	<b>Deed1:</b> /11946/ 00319	<b>Deed2:</b>
<b>Seller:</b> ARRINGTON REGINALD N JR	<b>Date:</b> 02/19/2009	<b>Price:</b> \$200,000
<b>Type:</b> NON-ARMS LENGTH OTHER	<b>Deed1:</b> /00000/ 00000	<b>Deed2:</b>
<b>Exemption Information</b>		
<b>Partial Exempt Assessments:</b>	<b>Class</b>	<b>07/01/2013</b>
		<b>07/01/2014</b>
<b>County:</b>	000	0.00
<b>State:</b>	000	0.00
<b>Municipal:</b>	000	0.00 0.00
		0.00 0.00
<b>Tax Exempt:</b>	<b>Special Tax Recapture:</b>	
<b>Exempt Class:</b>	NONE	
<b>Homestead Application Information</b>		
<b>Homestead Application Status:</b> No Application		

I hereby certify that I have surveyed the property shown hereon For the sole purpose of locating the improvements. This plan is A benefit to the customer only in so far as it is required by a lender or a title insurance company or its agent in connection with Contemplated transfer, financing or refinancing. It is not to be relied upon for the establishment of boundary, easement or right-of-way lines for any reason, such as the location of fences, garages, buildings, or other existing or future improvements. Offsets of buildings to property lines are to the nearest foot (1') unless otherwise noted.

By: Dennis E. Meckley Date: 3/04/14  
 Dennis E. Meckley Property Line Surveyor No. 10844  
 License expires March 29, 2016



**DETAIL**  
1" = 30'



ALAA IBRAHIM  
 2429 ELLIES WAY  
 L. 12799, F. 84

OK  
 gw  
 3/5/14



**PLAN**  
1" = 50'

**FOUNDATION CERTIFICATION**  
**ARRINGTON ESTATES**

LOT 1  
 2425 ELLIES WAY, WEST FRIENDSHIP  
 3rd ELECTION DISTRICT - HOWARD COUNTY, MARYLAND

CATOCTIN HOMES, INC.  
 P.O. Box 512  
 ELLICOTT CITY, MD 21041

A licensed Maryland Surveyor either personally prepared this Location Drawing, or was in responsible charge over its preparation and the surveying work reflected in it, in compliance with the Maryland Minimum Standards of Practice for Land Surveyors. (COMAR 09-13-06.06 AND .12)

Engineers - Surveyors  
**CLSI**  
 www.clsi-cvlleng.com  
 Land Planning & Environmental Consulting  
 439 East Main Street Westminster, MD 21157-5539  
 (410) 848-1790 FAX (410) 848-1791

DRAWN BY:	KMB
DESIGN BY:	
REVIEW BY:	DEM
DATE:	02-27-14
SCALE:	AS SHOWN
JOB NO:	2003174
SHEET:	1 of 1

# RESIDENTIAL BUILDING PERMIT PERMIT FEE AND EXCISE TAX WORKSHEET

PERMIT NUMBER B/300 3920

OWNER Contractor ADDRESS 2425 Elles Way

CONSTRUCTION PHASE: New  Addition  Alteration  Temporary

IRC USE GROUP: 10K, 312B 1HB DESCRIPTION OF WORK: Just start full house 3 car garage (4BR)

PRESCRIPTIVE METHOD  UA ALTERNATIVE  PERFORMANCE METHOD

BUILDING	FRONT	DEPTH	HEIGHT	AREA	AREA
1	54	68	10	2498	
2	54	56	10	1802	
3	54	46	10	1692	
				GSF = 5992	OGSF =

Footings <u>8x18</u>	Foundation <u>10" conc</u>	Walls <u>wood fr Sides</u>	Roof <u>Gable 7/15</u>	Other <u>N/A</u>
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### Residential Fee Calculations:

Residential - A building which contains one or more dwelling unit, including boarding houses but not including transient accommodations such as hotels, country inns or bed and breakfast inns. Residential includes uses accessory to building units such as attached garages or home occupations, but does not include non-residential uses in-mixed use structures.

BPF =  $\frac{5992}{GSF} \times \$1.18 = \$$  1678.56  $\times 10\%$  (Tech Fee) = 107.86

ET =  $\frac{5992}{OGSF} \times \$1.13 = \$$  6770.96 PSFS =  $\frac{5992}{OGSF} \times \$1.24 = \$$  7430.08

BPF = Building Permit Fee OGsf = Occupiable Gross Square Feet GSF = Gross Square Feet ET = Excise Tax PSFS = Public School Facilities Surcharge  
Note: OGsf calculations may differ from GSF calculations when computing excise tax.

$33.5 \times 33 = 1106$ $19 \times 4 = 76$ $19.5 \times 67.5 = 1316$	$33 \times 33 = 1089$ $19.5 \times 23 = 449$ $12 \times 22 = 264$	$32.5 \times 32 = 1040$ $19 \times 4 = 76$ $18 \times 32 = 576$
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**PERMIT FEE, TECHNOLOGY FEE, SCHOOL SURCHARGE AND EXCISE TAX TOTAL: \$** \_\_\_\_\_

References: Chapter 285, Acts of the Maryland General Assembly of 1992; Howard County Code Sections 20.503; County Council Resolution 58-2008; 2004 Legislation House Bill 1445; 2006 International Residential Code for One and Two Family Dwellings

BY: \_\_\_\_\_ DATE: \_\_\_\_\_ CHECKED BY: \_\_\_\_\_ DATE: \_\_\_\_\_