



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: 12012 Broad meadow Lane
 City: Clarksville State: MD Zip Code: 21029
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: 2 Area: _____ Lot: 64
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: 4.9 AC

Existing Use: Single Family Home
 Proposed Use: same
 Estimated Construction Cost: \$ 20,000
 Description of Work: Post and pier deck with steps to grade 20x23' irregular
front deck with steps
 Occupant or Tenant: Attired
 Was tenant space previously occupied? Yes No
 Contact Name: Attired
 Address: 12012 Broad meadow Lane
 City: Clarksville State: MD Zip Code: 21029
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Attired
 Address: 12012 Broad meadow Lane
 City: Clarksville State: MD Zip Code: 21029
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Brace Blair
 Address: 7331 Blanchard Dr. N.C
 City: Darwood State: MD Zip Code: 20855
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: EC Services Inc
 Contact Person: Edgar Clavico
 Address: 7331 Blanchard Dr. N.C
 City: Darwood State: MD Zip Code: 20855
 License No.: 122702
 Phone: 240 441 5236 Fax: _____
 Email: ecservicesinc@yahoo.com

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:	
	<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 checked="" 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	
Water Supply	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input 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.

Applicant's Signature: _____
 Email Address: ecservicesinc@yahoo.com
 Title/Company: Plans/Project manager

Print Name: Brace Blair
 Date: _____

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

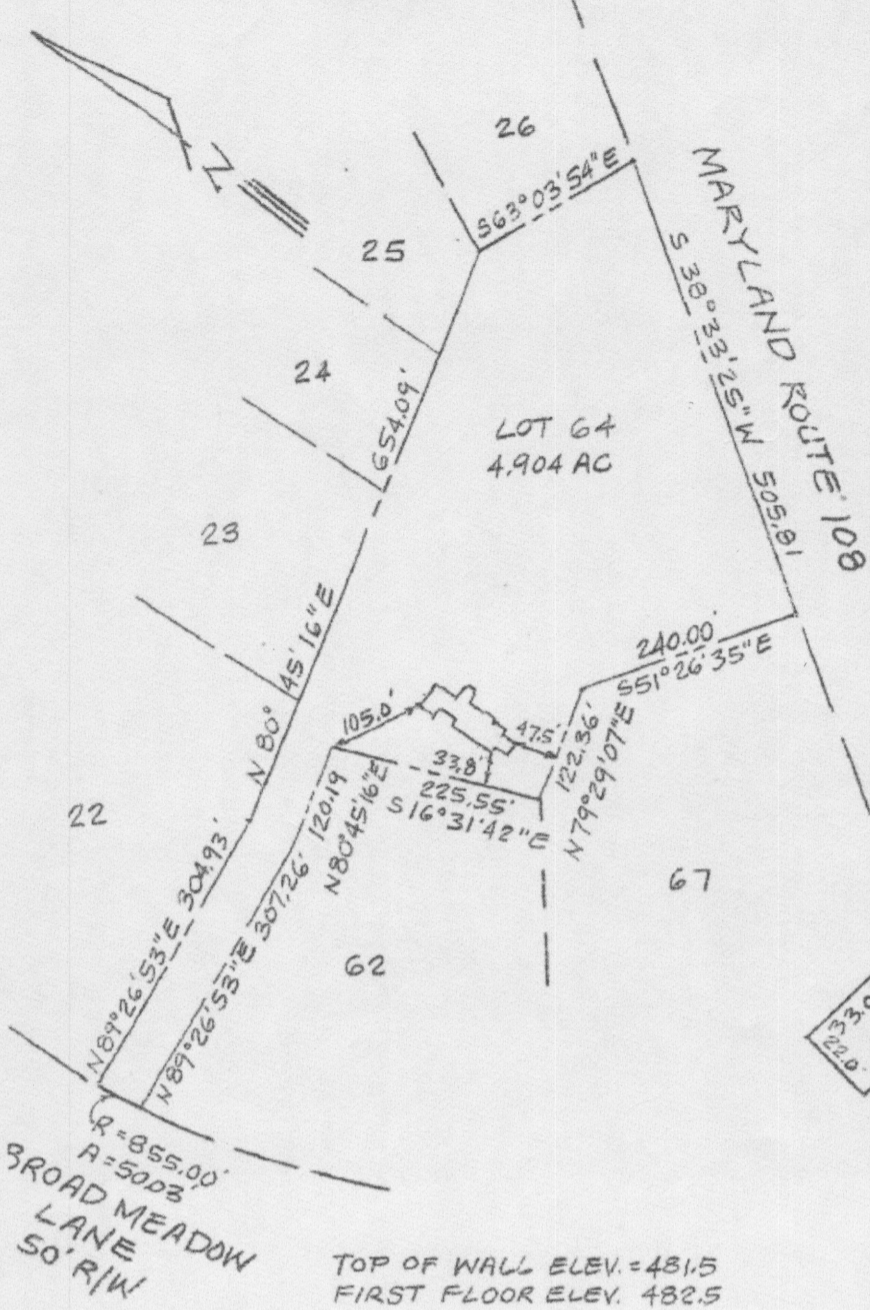
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		<u>[Signature]</u>

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

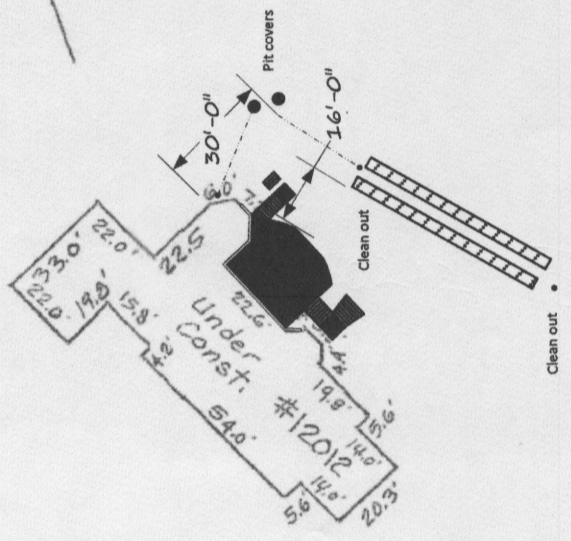
DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot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

12012 Broad Meadow Lane



APPROVED
 WALK-THRU BUILDING PERMIT
 BP# _____ A# _____
 APP. SAN P. Buckley DATE: 8/14/14
 DESC. OF WORK: 20'x23' irregular deck w/stairs



NOTE: ALL DIMENSIONS ACCURATE TO WITHIN 0.25'
 Note: Existence of property corner markers not guaranteed by this survey.

INSET SCALE 1"=50'

FOR TITLE PURPOSES ONLY • NO TITLE REPORT FURNISHED
 SUBJECT TO ALL EASEMENTS AND RIGHTS OF WAY OF RECORD
 NOT TO BE USED FOR THE CONSTRUCTION OF FENCES OR
 OTHER IMPROVEMENTS

SURVEYOR'S CERTIFICATE

I certify that I have carefully surveyed the property show above, described as
LOT 64 SECTION 2
 shown in
 Plat Book _____ at Plat 9172 one of the land records of
 Howard County, Maryland, and unless otherwise shown there are no encumbrances from adjoining
 properties and that the existing improvements shown have been carefully established by a
 transit-tape survey.

Dean Packard
 DEAN PACKARD, PE MD# 16318

PG Associates, Inc.
 16220 Frederick Road
 Suite 300
 Gaithersburg, MD 20877
 (301) 208-0250

By: <u>Wallcheck</u>	
Date: <u>4/6/12</u>	
FB _____	Page _____
By: <u>DP</u>	Check _____
Date _____	
Scale: <u>1"=200'</u>	
FILE NO _____	PN _____

