



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: 9/27/13

Permit No.: B13003646

Building Address: 14885 Meriwether Dr
 City: Glenely State: MD Zip Code: 21737
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 21
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: Toll MD VII LP
 Address: 7164 Columbia Gateway Dr
 City: Columbia State: MD Zip Code: 21046
 Phone: 443-500-0606 Fax: 410-489-2676
 Email: Kmonath@tollbrothersinc.com

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Keith Monath
 Address: 14881 Meriwether Dr
 City: Glenely State: MD Zip Code: 21737
 Phone: 443-500-0606 Fax: 410-489-2676
 Email: Kmonath@tollbrothersinc.com

Existing Use: Vacant Lot
 Proposed Use: Single Family Dwelling
 Estimated Construction Cost: \$ 350,000
 Description of Work: Largely Williamsburg with Expanded Family Room + Solarium

Contractor Company: Toll Brothers Inc
 Contact Person: Keith Monath
 Address: _____
 City: _____ State: _____ Zip Code: _____
 License No.: 5050
 Phone: _____ Fax: _____
 Email: _____

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

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"/> 3F Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor: <u>64'</u>	<u>59'8"</u>
Area of construction (sq. ft.):	2 nd floor: <u>64'</u>	<u>59'8"</u>
Use group:	Basement:	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Finished Basement	
<input type="checkbox"/> Structural Steel	<input checked="" type="checkbox"/> Unfinished Basement	
<input type="checkbox"/> Masonry	<input type="checkbox"/> Crawl Space	
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> State Certified Modular	No. of Bedrooms: <u>4</u>	
	Multi-family Dwelling	
	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 checked="" type="checkbox"/> No	Roof:	
<input type="checkbox"/> Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: <u>G12000002</u>	
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: Keith Monath
 Email Address: Kmonath@tollbrothersinc.com
 Title/Company: CM/Toll Brothers Inc

Print Name: Keith Monath
 Date: 9/27/13

RECEIVED
 SEP 27 2013
 LICENSES & PERMITS
 DIVISION

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY
 FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE OF APPROVAL
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health	<u>10/16/13</u>	<u>Shady Saitl</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	\$ 100.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$ 50.00
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# 09327710

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA



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: 5-16-14

Permit No.: B/400 1596

Tax # 04-593662

Building Address: 14885 Meriwether Dr.
City: Glen Elg State: MD Zip Code: 21737
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: Meriwether Farms
Section: _____ Area: _____ Lot: 21
Tax Map: 21 Parcel: _____ Grid: 16
Zoning: _____ Map Coordinates: _____ Lot Size: 48958

Property Owner's Name: Billion Hill Limited
Address: 7164 Columbia Gateway Dr.
City: Columbia State: MD Zip Code: 21046
Phone: _____ Fax: _____
Email: _____

Existing Use: SFD
Proposed Use: SFD w/ tank
Estimated Construction Cost: \$ 5000
Description of Work: Install 1000gal (46) Propane tank

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Jeremy Clancy
Address: PO Box 1253
City: Sikesville State: MD Zip Code: 21784
Phone: 4433401229 Fax: _____
Email: Jeremy@appliedandapproved.com

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

Contractor Company: Valley National Gas
Contact Person: William Ahering
Address: 7201 Montebedo Rd
City: Bessemer State: MD Zip Code: 20794
License No.: 607793
Phone: 410 7991114 Fax: _____
Email: _____

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:	<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	
<u>Construction type:</u>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input checked="" 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:	
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<input checked="" type="checkbox"/> Private	
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Gas:	<input checked="" 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 checked="" type="checkbox"/> No
Grading Permit Number:	
Building Shell Permit Number:	

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Applicant's Signature: Jeremy Clancy
Jeremy@appliedandapproved.com
Email Address: _____
Permitto
Title/Company

Print Name: Jeremy Clancy
Date: 5/16/14

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

PLEASE WRITE NEATLY & LEGIBLY
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Buffering Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>6/6/14</u>	<u>Hank Osunkwa</u>

Is Sediment Control approval required for Issuance? Yes No
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Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check #	<u>3657</u>