



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: 2314 Mount Hebron Drive
City: Ellicott City State: MD Zip Code: 21042
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: _____
Tax Map: _____ Parcel: _____ Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFD
Proposed Use: SFD w/ Deck
Estimated Construction Cost: \$ 5,200

Description of Work: ERECT 12'x16' OPEN WOOD DECK AT REAR OF DWELLING 192 A

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

Property Owner's Name: Trustees of Presbytery of Balt.
Address: 2314 Mount Hebron Dr
City: Ellicott City State: MD Zip Code: 21042
Phone: (516) 576-2257 Fax: _____
Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Craig Stanton
Address: 903 Timber Run Rd
City: Reston State: MD Zip Code: 21136
Phone: 413 844 4086 Fax: _____
Email: CRAIGBUILT@GMAIL.COM

Contractor Company: Stanton Home Construction
Contact Person: Craig Stanton
Address: 903 Timber Run Rd
City: Reston State: MD Zip Code: 21136
License No.: 125112
Phone: 413 844 4086 Fax: _____
Email: CRAIGBUILT@GMAIL.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 <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl Space <input type="checkbox"/> Slab on Grade
Use group:	No. of Bedrooms: _____
Construction type:	Multi-family Dwelling
<input type="checkbox"/> Reinforced Concrete	No. of efficiency units: _____
<input type="checkbox"/> Structural Steel	No. of 1 BR units: _____
<input type="checkbox"/> Masonry	No. of 2 BR units: _____
<input type="checkbox"/> Wood Frame	No. of 3 BR units: _____
<input type="checkbox"/> State Certified Modular	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 checked="" type="checkbox"/> Public <input type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
Sprinkler System:
<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: Craig Stanton Print Name: CRAIG STANTON
Email Address: CRAIGBUILT@GMAIL.COM Date: 11-6-2014
Title/Company: Stanton Home Construction

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>11/18/14</u>	<u>[Signature]</u>

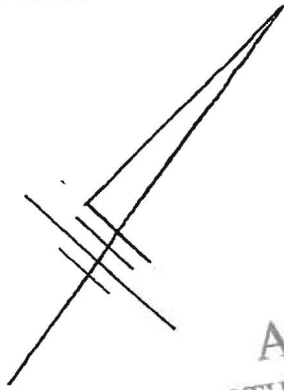
DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input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

COMMUNITY PANEL NO: 24027C 0090D

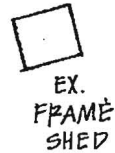
ONE: "X"

NOTE: THIS PROPERTY IS NOT LOCATED IN A FLOOD HAZARD ZONE



APPROVED WALK-THRU BUILDING PERMIT

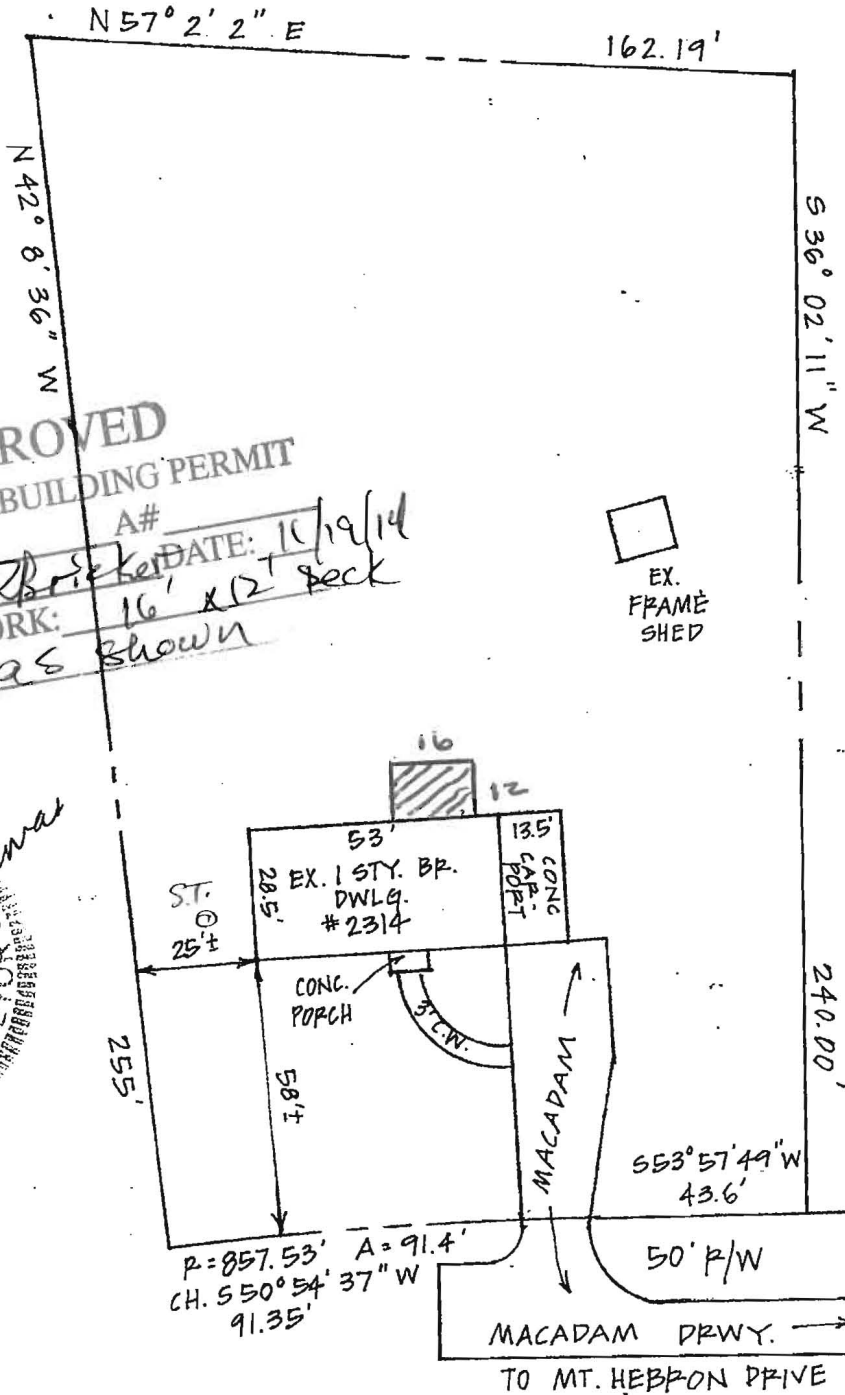
BP# _____ A# _____ DATE: 10/19/14
APP. SAN R. Becker
DESC. OF WORK: 16' x 12' Deck
as shown



EX. FRAME SHED



LOCATION SURVEY
#2314 MOUNT HEBRON DRIVE
ELECTION DISTRICT NO. 2
HOWARD COUNTY, MD
3168/622



I HEREBY CERTIFY THAT THE LOT SHOWN HEREON HAS BEEN SURVEYED FOR THE PURPOSE OF LOCATING ALL IMPROVEMENTS ONLY. THE PLAT IS A BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING. THE PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. THE PLAT DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY LINES OR BOUNDARIES.

ACCURACY OF SETBACKS
15 ± 5'



200 E. JOPPA RD
SUITE 101
TOWSON, MD 21286

T: (410) 828-9060
F: (410) 828-9066

DRAWN BY: BLM

SURVEYED BY: DTW/JK

CHECKED BY: MVM

SCALE: 1" = 40'

DATE: 11/17/14