



# 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: 2/19/15

Permit No.: B15000638

Building Address: 685 GARTHNER RD.  
City: SUKESVILLE State: MD Zip Code: 21784  
Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: yard  
Proposed Use: carport  
Estimated Construction Cost: \$ 15,000  
Description of Work: Build carport 20' x 20'

Occupant or Tenant: \_\_\_\_\_  
Was tenant space previously occupied?  Yes  No  
Contact Name: Anita Wilcox  
Address: 685 GARTHNER RD  
City: SUKESVILLE State: MD Zip Code: 21784  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Property Owner's Name: Anita Wilcox  
Address: 685 GARTHNER RD  
City: SUKESVILLE State: MD Zip Code: 21784  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

**Applicant's Name & Mailing Address, (if other than stated herein)**  
Applicant's Name: Barry Eckard  
Address: 472 GARTHNER RD  
City: SUKESVILLE State: MD Zip Code: 21784  
Phone: 410-313-2455 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Contractor Company: W. J. ...  
Contact Person: Barry Eckard  
Address: 472 GARTHNER RD  
City: SUKESVILLE State: MD Zip Code: 21784  
License No.: \_\_\_\_\_  
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 type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	<b>Depth</b>	<b>Width</b>
Gross area, sq. ft./floor:	1 <sup>st</sup> floor: <u>20</u>	2 <sup>nd</sup> floor: <u>20</u>
Area of construction (sq. ft.):	Basement:	
Use group:	<input type="checkbox"/> Finished Basement	
<b>Construction type:</b>	<input type="checkbox"/> Unfinished Basement	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Crawl Space	
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Masonry	No. of Bedrooms:	
<input type="checkbox"/> Wood Frame	<b>Multi-family Dwelling</b>	
<input type="checkbox"/> State Certified Modular	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"/> <b>Roadside Tree Project Permit</b>	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 type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Heating System</b>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<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: Barry Eckard  
Email Address: BarryEckard@yahoo.com  
Title/Company: \_\_\_\_\_

Print Name: Barry Eckard  
Date: 2-19-15

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>3/16/15</u>	<u>R. Buckner</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	\$ <u>25</u>
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

will pay filing fees in time of permit

Supplement to Plot Plan

PERMIT # 34209 A21540

REVISED

Date: 3/12/2015

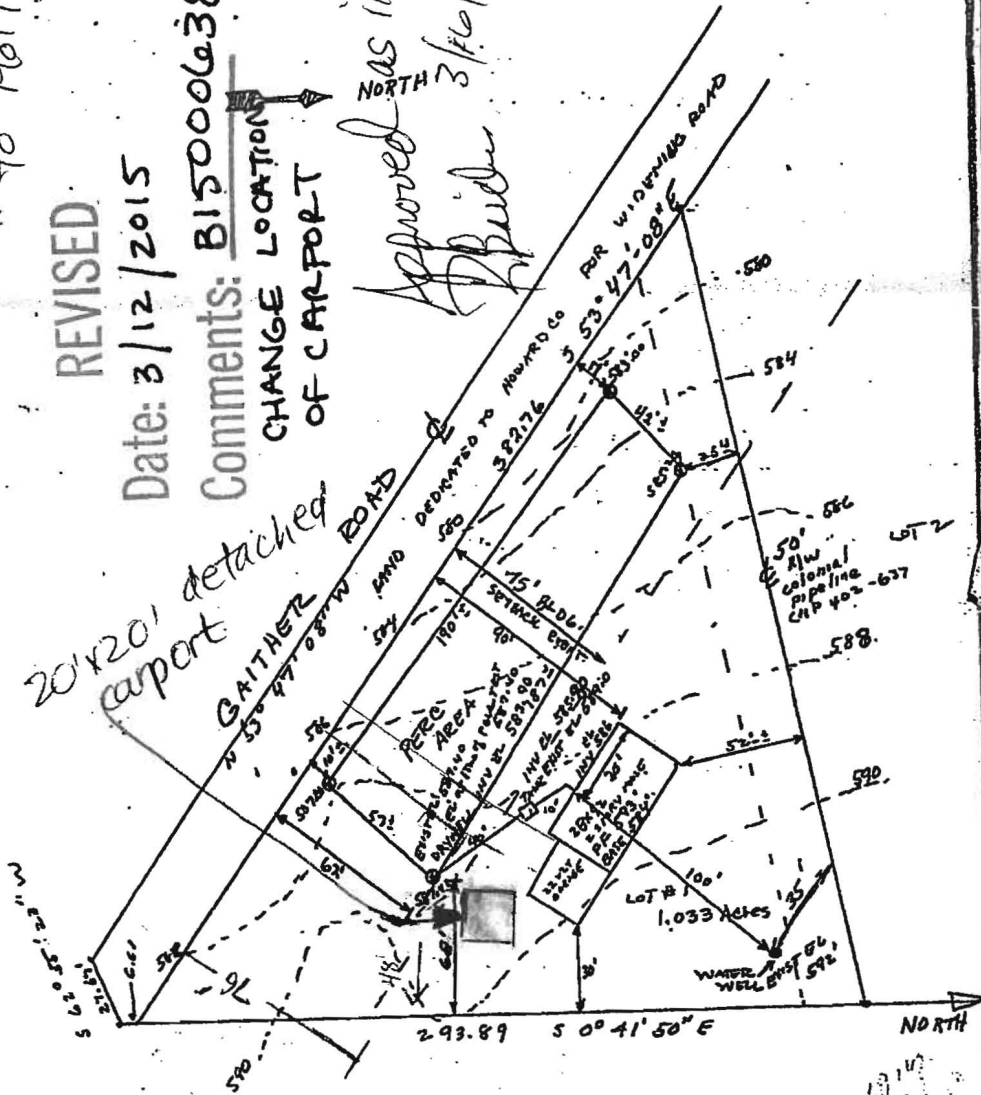
Comments: B15000638

CHANGE LOCATION OF CARPORT

NORTH

Approved as illustrated  
Bridges

20'x20' detached carport

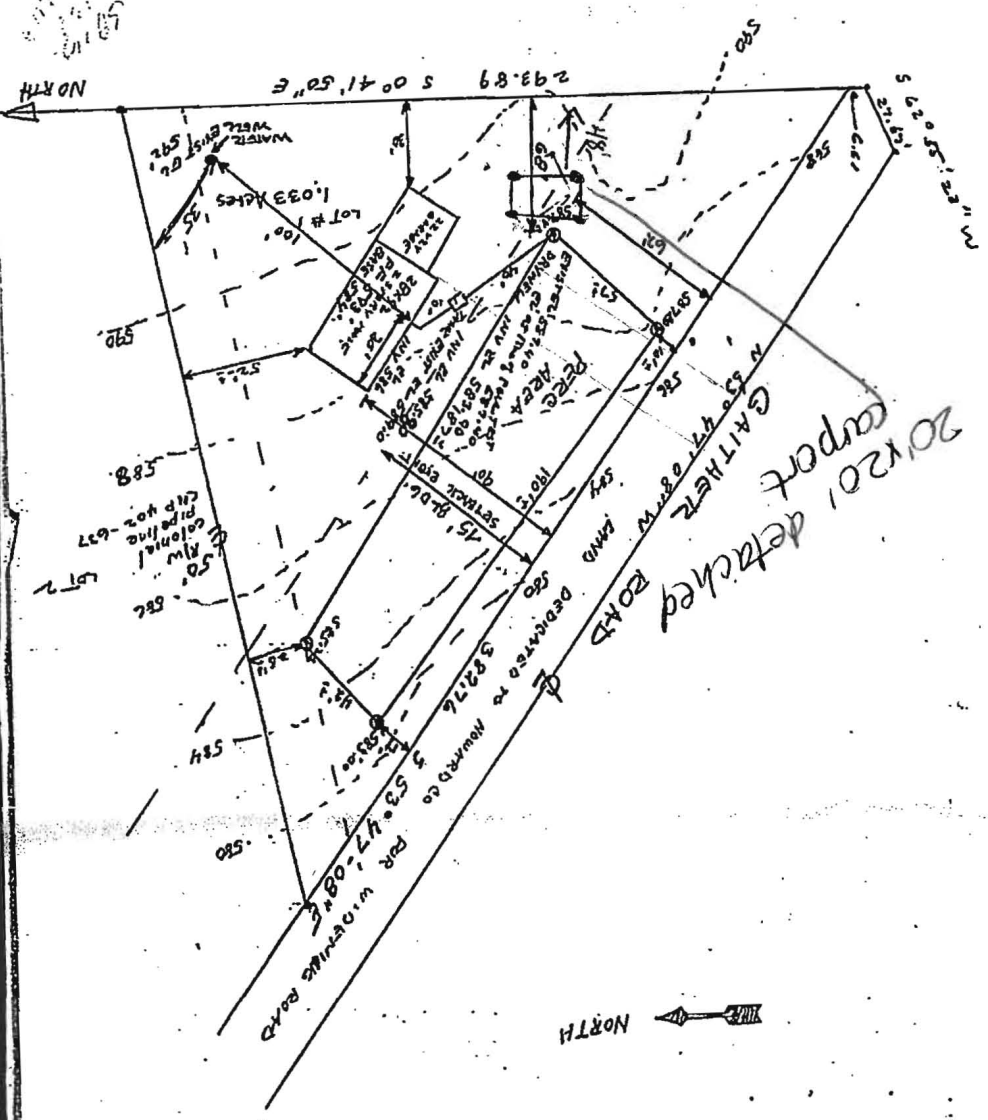


I certify the above measurements are actual & correct for this property

Walter A. Choke  
PLANS BK RH 11/14/77

LOT #1 HEUBNER PROPERTY  
GAITHER ROAD 320 ELECTION DIST.  
HOWARD COUNTY, SYKESVILLE, MD.  
FINAL PLAT # F-76-07  
LINDER# 722 FOLIO 607 SCALE 1"=50'

I certify the above measurements  
 are actual & correct for this property  
 MRS. C. K. ...  
 PLANS 814 11114177  
 FIRM PLAT # F-76-07  
 LENGTH 722 PLOID 607 SCALE 1"=50'  
 GAITHER ROAD 320 ELECTION DIST.  
 HOWARD COUNTY, SYDNEYVILLE, MD.  
 LOT # 1 HEUBNER PROPERTY



201201 detached  
 report

Permit # 34209  
 Aa154d

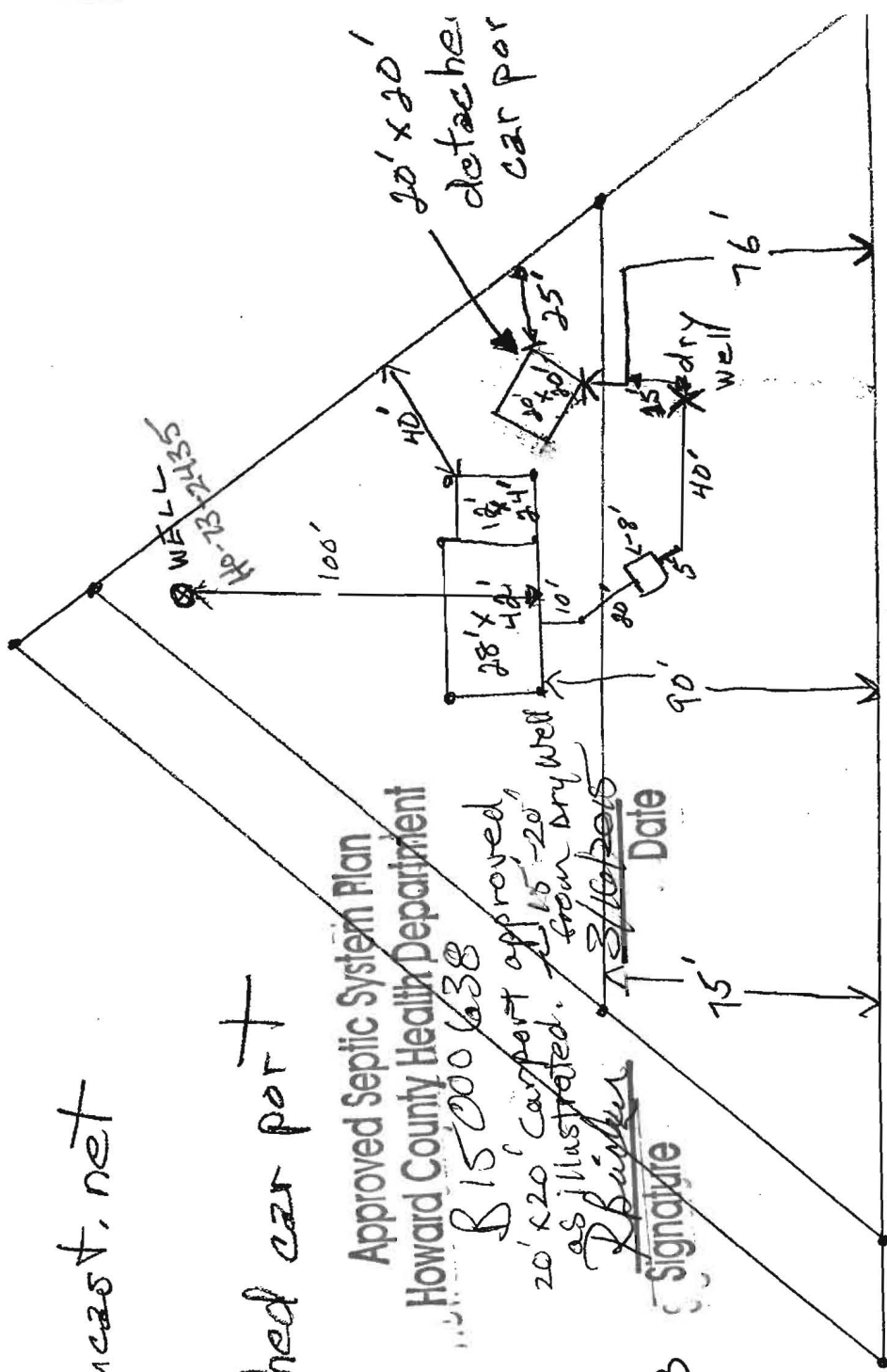
Anita Wilcox  
685 Gaither Rd.  
21784

george685@comcast.net

Permit for

20'x20' detached car port

1" = 50'  
Scale



Approved Septic System Plan  
Howard County Health Department

B15200638

20'x20' Carport approved  
as illustrated. 15'x8' from dry well

*[Signature]*

Signature

REVISED

Date: 3/12/2015

Comments: B15200638

CHANGE LOCATION  
OF CARPORT

685 Gaither Rd.

COMPLETE THIS FORM WHEN DROPPING OFF ANY  
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY  
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:

Date: 3/12/15  
To: ANNETTE/DPZ + ROBERT BRICKER/HEALTH  
(Person's Name and Division)  
From: ANITA WILCOX (410) 489-4346  
(Your Name, Company Name and Telephone Number)  
Subject: Project name WILCOX RESIDENCE  
Project site address 685 GAITHER RD  
Permit # B15000638 SDP # \_\_\_\_\_  
Other information pertinent to this project \_\_\_\_\_

✓ Please check the attachments below that you are submitting with this transmittal:

- Letter of response to address plan review comment letter
- Revised plans and/or revised details: When submitting for a complete re-review, **duplicate sets shall be submitted.**
- Letter Summarizing Changes
- Energy conservation calculations
- Copies of PLOT PLANS (be specific).
- Health Department Request  DPZ/DED Request  Applicant's Request
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # \_\_\_\_\_
- Other \_\_\_\_\_

Contact Person Information: (Required)

ANITA WILCOX  
Please Print Name

Telephone No: 410-489-4346

E-Mail Address: george685@comcast.net

**PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.**

Received by AKH

PER DPZ +  
HEALTH