



# 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: 7514 Cherry Tree Drive  
 City: Fulton State: MD Zip Code: 20759  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: Monroestfield  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: \_\_\_\_\_  
 Proposed Use: \_\_\_\_\_  
 Estimated Construction Cost: \$ \_\_\_\_\_  
 Description of Work: Above ground pool  
pool 15x24 + 8FT deck x 15'  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 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:   |
|   | 2 <sup>nd</sup> floor:   |
| Area of construction (sq. ft.):   | Basement:  |
|   | <input type="checkbox"/> Finished Basement                                 |
| Use group:  | <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:   |
| <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"/> <b>Roadside Tree Project Permit</b> | Footings:  |
| <input type="checkbox"/> Yes <input type="checkbox"/> No                | Roof:  |
| <b>Roadside Tree Project Permit #</b>                                   | <input type="checkbox"/> State Certified Modular                           |
|   | <input type="checkbox"/> Manufactured Home                                 |

Property Owner's Name: Julie + Kandy Roby  
 Address: 7514 Cherry Tree Drive  
 City: Fulton State: MD Zip Code: 20759  
 Phone: 301-776-7716 Fax: \_\_\_\_\_  
 Email: randy9207@verizon.net

Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: Same  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

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

Engineer/Architect Company: \_\_\_\_\_  
 Responsible Design Prof.: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

| Utilities   |
|---|
| <b>Water Supply</b>   |
| <input type="checkbox"/> Public   |
| <input type="checkbox"/> Private  |
| <b>Sewage Disposal</b>  |
| <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             |
| <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                  |
| <b>Grading Permit Number:</b>   |
| <b>Building Shell Permit Number:</b>                                      |

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: Julie Roby  
 Email Address: randy9207@verizon.net Date: 4/22/15  
 Title/Company: \_\_\_\_\_

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>4/22/15</u> | <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?  Yes  No  
 Is Entrance Permit Required?  Yes  No  
 Historic District?  Yes  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          | #  |

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

