



HEALTH

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: 8/5/14

Permit No.: B14002848

Building Address: 12217 Basslers Way
City: CLARKSVILLE State: MD Zip Code: 21089
Suite/Apt. #: SBP/WP/BA #: GP-13-038
Census Tract: Subdivision: WALNUTCREEK
Section: Area: Lot: 15
Tax Map: 28 Parcel: 49 Grid: 17+18
Zoning: RC-DED Map Coordinates: 14, E2 Lot Size: 33,542 sq ft

Existing Use: Vacant Lot
Proposed Use: SFD
Estimated Construction Cost: \$ 313,667
Description of Work: 2 story, FP, 3 car garage, Full finished basement with Full Bath, 9 Rooms, 3 Full Baths, 1 HB, 5 Bedrooms
Occupant or Tenant:
Was tenant space previously occupied? Yes No
Contact Name:
Address:
City: State: Zip Code:
Phone: Fax:
Email:

Property Owner's Name: Trinity Quality Homes INC
Address: 3675 PARK AVE # 301
City: ELICOTT CITY State: MD Zip Code: 21043
Phone: Fax:
Email:

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

Contractor Company: Trinity Quality Homes, INC
Contact Person: SHERRY MEWSHAW
Address: 3675 PARK AVE # 201
City: ELICOTT CITY State: MD Zip Code: 21043
License No.: 699
Phone: 443-525-8516 Fax:
Email: Sherry@trinityhomes.com

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

Table with 2 columns: Commercial Building Characteristics and Residential Building Characteristics. Includes fields for Height, No. of stories, Gross area, Area of construction, Use group, Construction type, and Roadside Tree Project Permit.

Table with 2 columns: Utilities and other permit information. Includes sections for Water Supply, Sewage Disposal, Heating System, Sprinkler System, and Grading/Building Shell Permit Numbers.

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.
Sherry L Mewshaw
Applicant's Signature
Sherry@trinityhomes.com
Email Address
Selections Director
Title/Company
Print Name: SHERRY MEWSHAW
Date: 8/5/14
RECEIVED
AUG 05 2014
LICENSES & PERMITS DIVISION

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

Table with 3 columns: AGENCY, DATE, SIGNATURE OF APPROVAL. Rows include State Highways, Building Officials, PSZA (Zoning), PSZA (Engineering), and Health.

Table with 1 column: DPZ SETBACK INFORMATION. Rows include Front, Rear, Side, Side St., All minimum setbacks met?, Is Entrance Permit Required?, Historic District?, Lot Coverage for New Town Zone, and SDP/Red-line approval date.

Table with 2 columns: Fee Name and Amount. Rows include Filing Fee, Permit Fee, Tech Fee, Excise Tax, PSFS, Guaranty Fund, Add'l per Fee, Total Fees, Sub-Total Paid, Balance Due, and Check #.