



# 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: 4635 Sheppard Manor Dr  
 City: Ellicott City State: Md. Zip Code: 21042  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: Sheppard Manor  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 9  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: Single Family  
 Proposed Use: Sims  
 Estimated Construction Cost: \$ 8,000  
 Description of Work: Remove Existing Stone Dock and steps. Reconstruct new 12x10 minimum 6 foot dock w/ steps  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: Anand Mattai  
 Address: 4635 Sheppard Manor Dr.  
 City: Ellicott City State: Md. Zip Code: 21042  
 Phone: 410-549-5050 Fax: 410-549-5449  
 Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: Classic Design Group Inc.  
 Address: 5433 Woodlawn Rd  
 City: Woodlawn State: Md. Zip Code: 21797  
 Phone: 410-549-5050 Fax: \_\_\_\_\_  
 Email: psorge3@earthlink.net

Contractor Company: Classic Design Group Inc.  
 Contact Person: Luis Balaguer  
 Address: 5433 Woodlawn Rd.  
 City: Woodlawn State: Md. Zip Code: 21797  
 License No.: 83116  
 Phone: 410-549-5050 Fax: 410-549-5449  
 Email: psorge3@earthlink.net

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:	
	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	

Utilities	
<b>Water Supply</b>	
<input checked="" 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	
<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: \_\_\_\_\_  
 Email Address: psorge3@earthlink.net  
 Title/Company: VP

Print Name: PERCIVAL JONES III  
 Date: 8/15/15

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

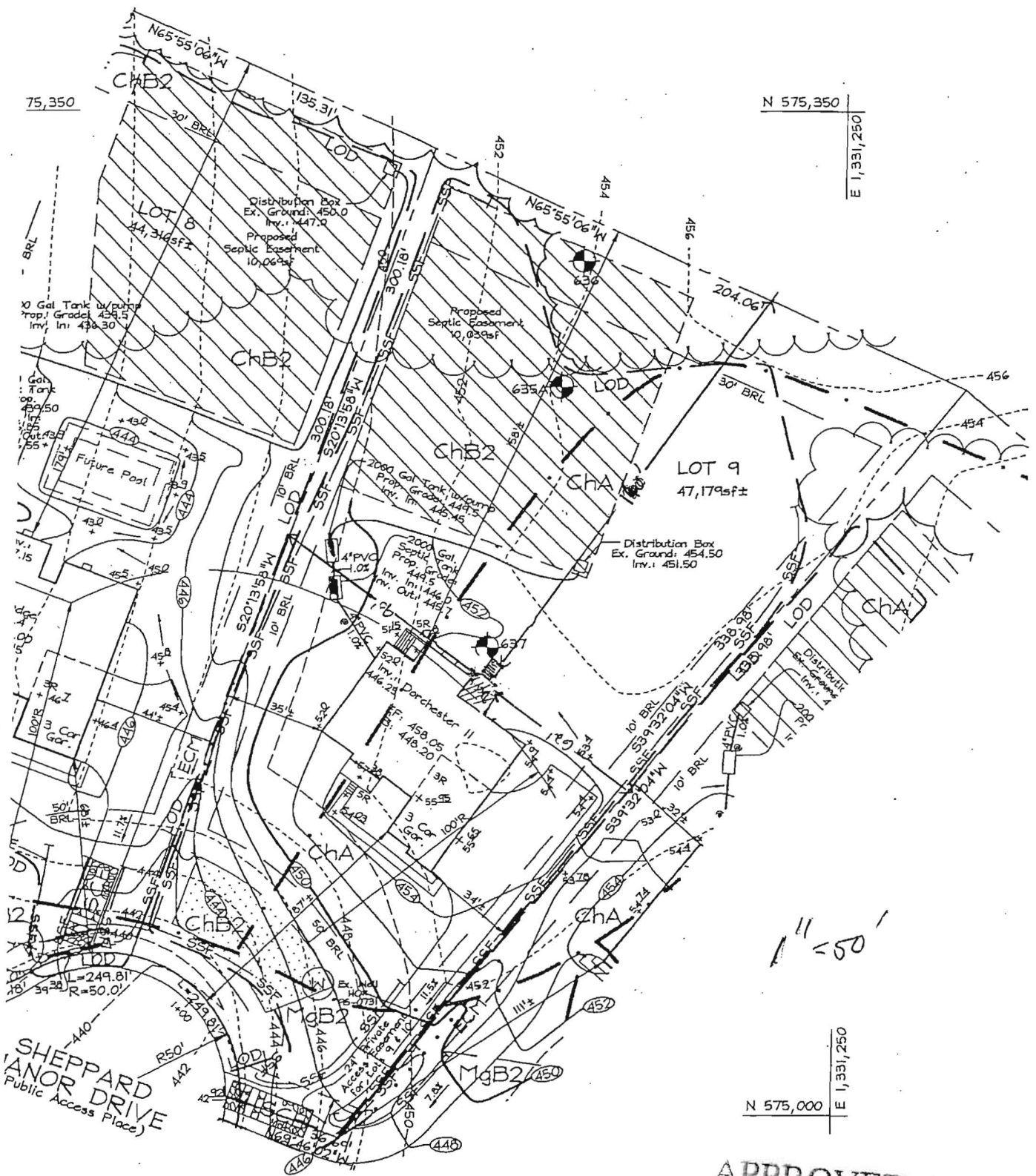
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA ( Zoning )		
PSZA ( Engineering )		
Health	<u>8/19/2015</u>	<u>R. Becker</u>

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	\$
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



75,350

N 575,350

052'100" E 1 3

1" = 50'

N 575,000  
E 1,331,250

4635 Sheppard Manor Dr.

APPROVED  
 WALK-THRU BUILDING PERMIT  
 BP# \_\_\_\_\_ A# \_\_\_\_\_  
 APP. SAN F. Baker DATE: 8/19/15  
 DESC. OF WORK: Replace  
stone deck w/ 2' x 10' composite  
deck & stairs