



# 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: 11/2/14

Permit No.: B14004000

Building Address: 13574  
 City: 13574 State: MD Zip Code: 21021  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 5  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: Single Family  
 Proposed Use: Single Family  
 Estimated Construction Cost: \$ 175,000  
 Description of Work: Remodeling of kitchen and bathroom  
 Occupant or Tenant: 1632 sq ft  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: K...  
 Address: 13574  
 City: 13574 State: MD Zip Code: 21021  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

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

Contractor Company: ...  
 Contact Person: ...  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No.: 91406  
 Phone: 410-570-2929 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:	Depth	Width
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"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

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
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: \_\_\_\_\_ Print Name: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Date: \_\_\_\_\_  
 Title/Company: \_\_\_\_\_

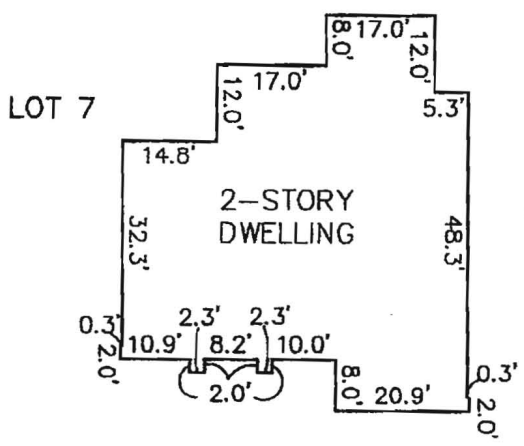
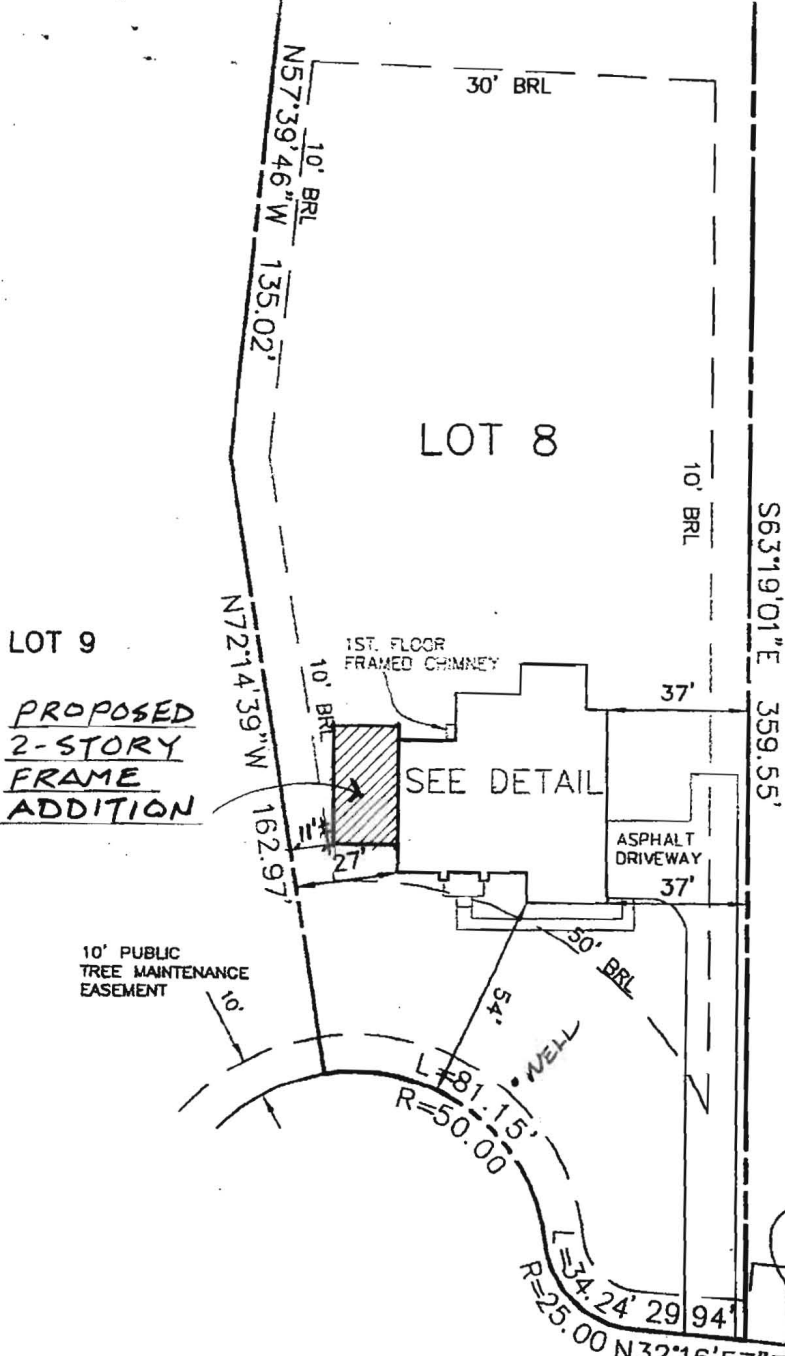
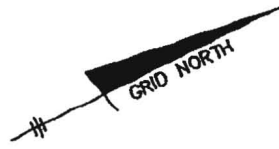
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA ( Zoning )		
PSZA ( Engineering )		
Health	<u>1-21-15</u>	<u>D. Bernard</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>250</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>559</u>



DETAIL  
SCALE: 1" = 30'

Approved Septic System Plan  
Howard County Health Department

*Dana Beard* 1-21-15  
Signature Date

Approved as shown  
B14004000 2 pages

LOCATION DRAWING  
BRIGHTON MILL  
LOTS 1 - 22  
PLAT No. 19464  
LOT No. 8

13578 BROCCOLINO WAY

5TH ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

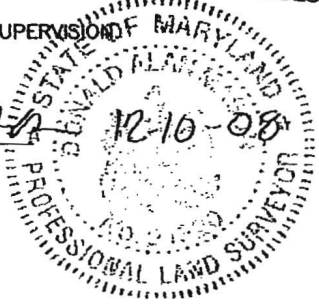
SCALE: 1" = 50' DATE: 12/09/08

SURVEYOR'S CERTIFICATE

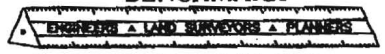
THIS DRAWING WAS MADE UNDER MY SUPERVISION OF

*Donald A. Mason*

DONALD A. MASON  
PROFESSIONAL LAND SURVEYOR  
MARYLAND REG. No. 21320  
FEMA FIRM No. 240044 0032 B  
ZONE: C  
DATED: 12/4/86



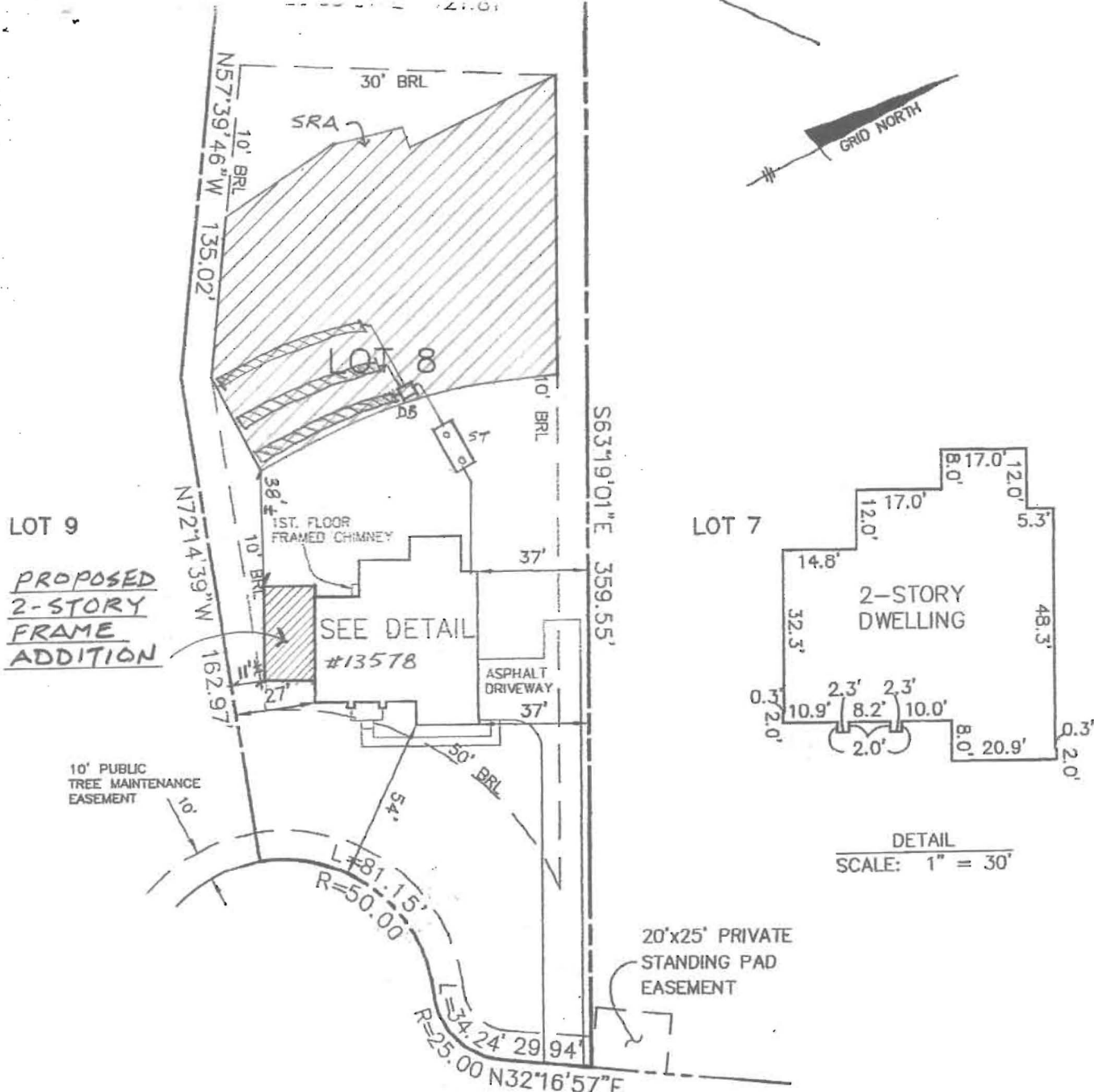
BENCHMARK



ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE Δ SUITE 418  
ELLCOTT CITY, MARYLAND 21043  
phone: 410-465-6105 Δ fax: 410-465-6644  
www.bei-civilengineering.com

FIELD OBS. BY DH  
COMP. BY EWF  
DRAWN BY EWF



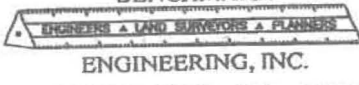
DETAIL  
SCALE: 1" = 30'

**BROCCOLINO WAY**  
PUBLIC ACCESS STREET

**SURVEYOR'S CERTIFICATE**

THIS DRAWING WAS MADE UNDER MY SUPERVISION OF MARYLAND

*Donald Mason*  
DONALD A. MASON  
PROFESSIONAL LAND SURVEYOR  
MARYLAND REG. No. 21320  
FEMA FIRM No. 240044 0032 B  
ZONE: C  
DATED: 12/4/86  
BASED ON A DRAWING BY  
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PROPOSED ADDITION TO THE  
**KHLEIF RESIDENCE**  
REV 12-09-2014

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**BRIGHTON MILL**  
LOTS 1 - 22  
PLAT No. 19464  
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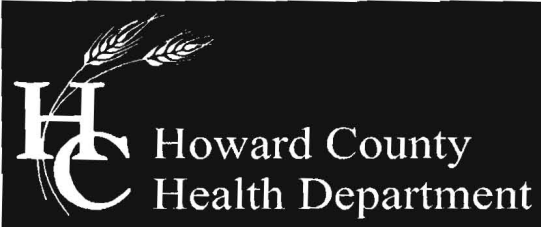
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HOWARD COUNTY, MARYLAND

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Office of the Health Officer

8930 Stanford Drive, MD 21045

Main: 410-313-6300 | Fax: 410-313-6303

TDD 410-313-2323 | Toll Free 1-866-313-6300

[www.hchealth.org](http://www.hchealth.org)

Face book: [www.facebook.com/hocohealth](https://www.facebook.com/hocohealth)

Twitter: HowardCoHealthDep

Maura J. Rossman, M.D., Health Officer

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DATE: November 20, 2014

TO: K C BECRAFT CONSTRUCTION LLC  
C/O Kevin Becraft  
Via E-mail: [KCBECRAFT@COMCAST.NET](mailto:KCBECRAFT@COMCAST.NET)

RE: **Building Permit # B14004000**  
**13578 Broccolino Way**  
**Clarksville, Maryland 21029**

Mr. Becraft,

Further review is contingent upon submission of a revised building plan showing the following:

- Floor plans for the existing house and the proposed addition must be submitted to determine the number of bedrooms used.
- The well and septic system must be shown on building plan.

Your building permit will be placed "on hold" until all Health Department requirements are met. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

Respectfully,

Dana Bernard, REHS/RS

Environmental Specialist II

Bureau of Environmental Health

Well and Septic Program

Phone (410) 313-2775

E-mail: [DBernard@howardcountymd.gov](mailto:DBernard@howardcountymd.gov)

cc: Well & Septic program file