



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.: B15005235

Building Address: 11811 Chapel woods Ct
 City: Clarksville State: MD Zip Code: 21029
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Arbans Poplar
 Section: _____ Area: _____ Lot: 1
 Tax Map: 29 Parcel: 36 Grid: 13
 Zoning: _____ Map Coordinates: _____ Lot Size: 3.38

Existing Use: SF
 Proposed Use: SF w/ tank
 Estimated Construction Cost: \$ 8000
 Description of Work: install 1000 gallon inground propane tank
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: owner
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: James Garrett
 Address: 11811 Chapel woods Ct
 City: Clarksville State: MD Zip Code: 21029
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Jeremy Clancy
 Address: PO Box 310
 City: Perry Hall State: MD Zip Code: 21125
 Phone: 410-700-1239 Fax: _____
 Email: Jeremy.Clancy@AppliedandApproved.com

Contractor Company: Prest Gas Co
 Contact Person: Michael Underwood
 Address: 300 mins
 City: Lanett State: MD Zip Code: 20707
 License No.: 60024
 Phone: 301-725-3232 Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: Contractor
 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 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<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:	
➤ Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities
Water Supply
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
Heating System
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:
Sprinkler System:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Grading Permit Number:
Building Shell Permit Number:

RECEIVED
 DEC 10 2015
 HOWARD COUNTY HEALTH DEPT
 BUREAU OF ENVIRONMENTAL HEALTH

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: Jeremy.Clancy@AppliedandApproved.com
 Title/Company: _____

Print Name: Jeremy Clancy
 Date: 11/20/15

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>12/7/15</u>	<u>R-P-E</u>

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

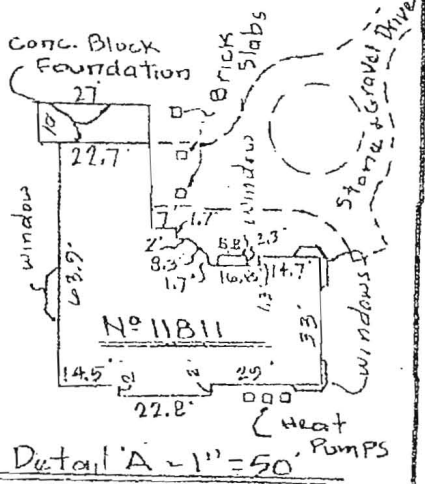
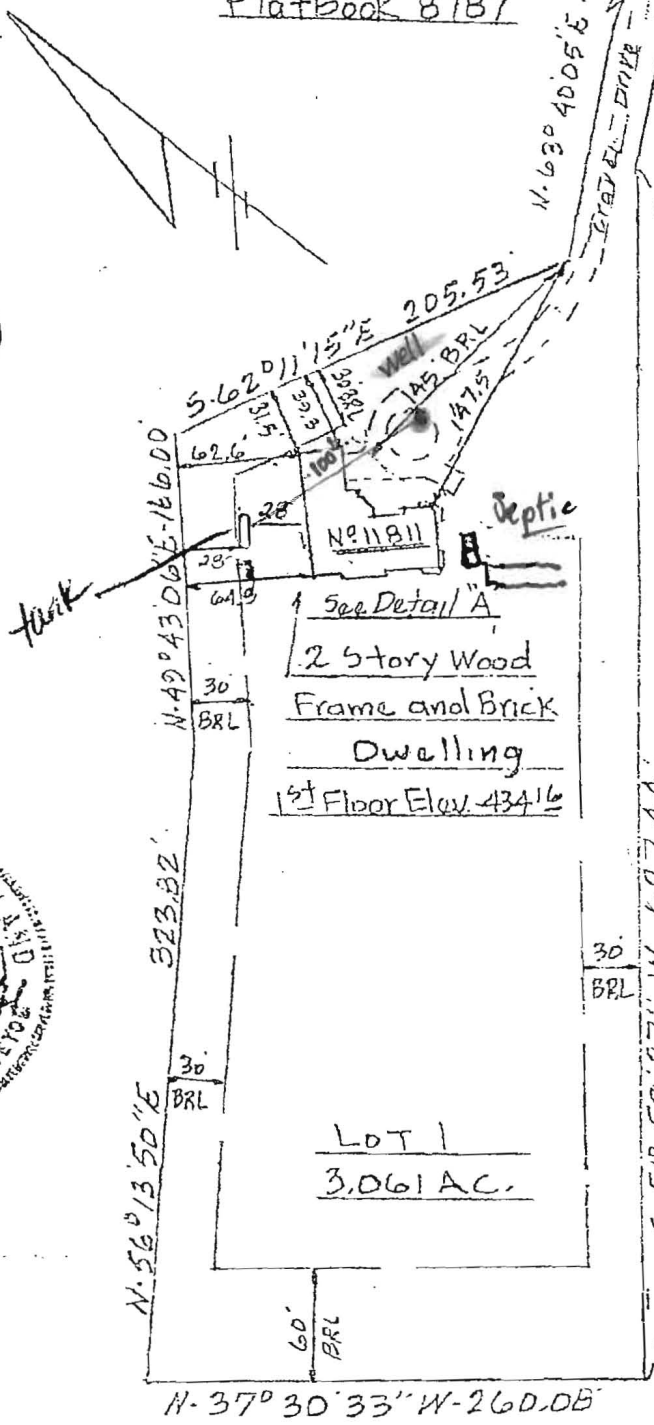
DPZ SETBACK INFORMATION

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	\$ <u>110.00</u>
Permit Fee	\$ <u>110.00</u>
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

Plat Reference - Bea Property
 Lot 1 and 2, recorded in
 Platbook 8787

1" = 100'



Approved for OPT
 B15005235
 RHT 12/17/15

site visit 12/17/15
 verified location
 of well's septic
 setbacks are good.
 (A) 12/17/15



TITLE LOCATION SURVEY				
PROJECT LOT 1 BEA PROPERTY				
LOCATION 5TH ELECTION DISTRICT, HOWARD CO., MD.				
FIELD BOOK 122	PAGE NO. 70	DRAWN BY: BH	CHECKED BY	DATE: 4-10-01
SCALE			JOB NO.:	

THIS IS TO CERTIFY THAT WE HAVE CONDUCTED A LOCATION SURVEY OF THE IMPROVEMENTS AND THAT THEY ARE LOCATED AS SHOWN HEREON.

William B. Hartel
 SIGNATURE

REG. NO. **9436** DATE **4-10-01**

Boender