

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER
B06001169

Building Address 14223 MEADOW LAKE DR
LODENELO, MD 21738
 Suite/Apt. #: _____ SDPWP/Petition #: _____
 Census Tract _____ Subdivision Triadelphia Crossing
 Section _____ Area _____ Lot 12
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name RAY SILVA
 Address 14223 MEADOW LAKE DR
 City LODENELO State MD Zip Code 21738
 Home Phone 410 489 9250 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon): _____
 Phone _____ Fax _____

Existing Use SF House
 Proposed Use Same w/ Sundeck
 Estimated Construction Cost \$ 15,000
 Description of Work SUNDECK MEASURING
16x24 WITH STAIRS

Contractor Company MARK S. MCWHORTER
 Contact Person RYAN MCWHORTER
 Address 6857 REDBERRY RD
 City CLARKSVILLE State MD Zip Code 21029
 License No. 9803
 Phone 410 984 5813 Fax _____

Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Engineer or Architect Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/>
<input type="checkbox"/> Reinforced Concrete	Natural Gas <input type="checkbox"/>
<input type="checkbox"/> Structural Steel	Propane Gas <input type="checkbox"/>
<input type="checkbox"/> Masonry	Sprinkler system: <input type="checkbox"/> N/A <input type="checkbox"/>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> Full
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Partial
	<input type="checkbox"/> Other Suppression
	<input type="checkbox"/> # of Heads

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <u>SHARED</u>
1st floor: _____	Sewage Disposal: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Natural Gas <input type="checkbox"/>
No. of Bedrooms <u>(4)</u>	Propane Gas <input type="checkbox"/>
Height: _____	Sprinkler system: <input type="checkbox"/> N/A <input type="checkbox"/>
Multi-family dwellings: _____	<input type="checkbox"/> NFPA #13D
No. of efficiency units: _____	<input type="checkbox"/> NFPA #13R
No. of 1 BR units: _____	<input type="checkbox"/> Other:
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof Height: _____	
<input type="checkbox"/> State Certified Modular	
<input type="checkbox"/> Manufactured Home	

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.

Ray McWhorter
 Applicant's Signature
 Title/Company _____

RYAN MCWHORTER
 Print Name
7/6/06
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health	<u>7/6/06</u>	<u>Ryan Doman</u>	All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies-			Lot Coverage for NewTown Zone _____	
White: Building Official			SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ				
Yellow: DED, DPZ				
Pink: Health				
Gold: SHA				

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

B-153464

Building Address 14255 M...
Glen Ridge, MD 21734
SUITE/APT. # TAXED 04-309173 SDP/NWP/Petition #:
Census Tract 60400 Subdivision Triadelphia Crossing
Section 12 Area 12 Lot 12
Tax Map 21 Parcel 97 Grid 17
Zoning RC-D1 Map Coordinates 9012 Lot size

Property Owner's Name T.H. B...
Address 714...
Home Phone 410... Work Phone 410...
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone 410... Fax 410...

Existing Use ...
Proposed Use Small Family Dwelling
Estimated Construction Cost \$ 300,000
Description of Work 5 B.R. home 5 1/2 bath Expanded Family Plan

Contractor Company ...
Contact Person B. H. R...
Address 714...
City Glen Ridge State MD Zip Code 21734
License No. ...
Phone 410... Fax 410...

Occupant or Tenant T.H. B...
Contact Name B. H. R...
Address 714...
City Glen Ridge State MD Zip Code 21734
Phone 410... Fax 410...

Engineer or Architect Company ...
Contact Person ...
Address ...
City ... State MD Zip Code ...
Phone 410... Fax 410...

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics		Utilities		Building Characteristics		Utilities	
Height:		Water Supply:		SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>		Water Supply:	
No. of stories:		<input type="checkbox"/> Public		Depth	Width	<input checked="" type="checkbox"/> Public	
Gross area, sq. ft. per floor:		<input type="checkbox"/> Private		1st floor: <u>84</u>	<u>84</u>	<input type="checkbox"/> Private	
Use group:		Sewage Disposal:		2nd floor: <u>84</u>	<u>84</u>	Sewage Disposal:	
Construction type:		<input type="checkbox"/> Public		Basement:		<input type="checkbox"/> Public	
<input type="checkbox"/> Reinforced Concrete		<input type="checkbox"/> Private		Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>		<input checked="" type="checkbox"/> Private	
<input type="checkbox"/> Structural Steel		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>		Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>		Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
<input type="checkbox"/> Masonry		Gas Yes <input type="checkbox"/> No <input type="checkbox"/>		No. of Bedrooms <u>3</u>		Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	
<input type="checkbox"/> Wood Frame		Heating System:		Height: <u>3.5</u>		Heating System:	
<input type="checkbox"/> State Certified Modular		Electric <input type="checkbox"/> Oil <input type="checkbox"/>		Multi-family dwellings:		Electric <input type="checkbox"/> Oil <input type="checkbox"/>	
		Natural Gas <input type="checkbox"/>		No. of efficiency units: _____		Natural Gas <input type="checkbox"/>	
		Propane Gas <input type="checkbox"/>		No. of 1 BR units: _____		Propane Gas <input type="checkbox"/>	
		Sprinkler system: N/A <input type="checkbox"/>		No. of 2 BR units: _____		Sprinkler system: N/A <input checked="" type="checkbox"/>	
		<input type="checkbox"/> Full		No. of 3 BR units: _____		<input type="checkbox"/> NEPA #13D	
		<input type="checkbox"/> Partial		Other Structure: _____		<input type="checkbox"/> NEPA #13R	
		<input type="checkbox"/> Other Suppression		Dimensions: _____		<input type="checkbox"/> Other:	
		<input type="checkbox"/> # of Heads		Footings: _____			
				Roof Height: _____			
				<input type="checkbox"/> State Certified Modular			
				<input type="checkbox"/> Manufactured Home			

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Applicant's Signature

Print Name

Title/Company

Date

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SIGNATURE APPROVAL
 Land Development DPZ
 Public Works
 Building Official
 Div. Engineering DPZ
 Health
 Fire Protection
 Sediment Control approval required prior to construction
 YES NO
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

DPZ SETBACK INFORMATION

Front:	Filing fee	\$ 1,000.00
Rear:	Permit fee	\$
Side:	Excise tax	\$
Side St:	Add'l per. fee	\$
At minimum setbacks met?	TOTAL FEES:	\$
YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid	\$
Is Entrance Permit required?	Balance due	\$
YES <input type="checkbox"/> NO <input type="checkbox"/>	Check	\$ 65457
Wanted District?	Validator	\$ 272.51
YES <input type="checkbox"/> NO <input type="checkbox"/>		
Lot Coverage for New Town Zone		
SDP/signed-line approval date	Accepted by	
Yellow: DEP, DPZ	Public Health	Gen. SHA

FAX cover sheet



Bureau of Utilities
8270 Old Montgomery Rd.
Columbia, Md. 21045
Tel. : 410 313 4900
Fax : 410 313 4989

To: Water & Sewer Programs

Date: 11/28/05 Number of pages including this one one

Fax Number: 7648

From: Matt Tudor

Comments: Tridaphin Crossing Shared Septic

11/22/05 14223 Meadow Lake Drive, lot 12
passed grinder pump test

Pindell Woods Shared Septic

11/22/05 7213 Preservation Court, lot #6
gravity SHC inspection, removed plug

Both lots are app. released for U&O by our department