



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: _____
 Permit No.: BLD00063

Building Address: 12235 Frederick Rd.
 City: Ellicott City State: MD Zip Code: 21042
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: Vacant dwelling
 Proposed Use: single family dwelling
 Estimated Construction Cost: \$ 4,100
 Description of Work: Install (1) 1,000 gallon propane tank underground

Occupant/Tenant Name: _____
 Was tenant space previously occupied? Yes No
 Contact Name: BRAD RONKER
 Address: 6708 Old National Pike
 City: BOONSBORO State: MD Zip Code: 21713
 Phone: 301-432-1111 Fax: _____
 Email: BRONKER@THOMPSONGAS.COM

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input checked="" 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:
<input checked="" type="checkbox"/> 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

Property Owner's Name: Linda and John Peters
 Address: 12235 Frederick Rd.
 City: Ellicott City State: MD Zip Code: 21042
 Phone: 943-422-3906 Fax: _____
 Email: j03peter@gmail.com

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

Contractor Company: Thompson Gas
 Contact Person: J. Randall Thompson
 Address: 6708 Old National Pike
 City: BOONSBORO State: MD Zip Code: 21713
 License No.: GASB0114 60003
 Phone: 301-432-1111 Fax: _____
 Email: BRONKER@THOMPSONGAS.COM

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

Utilities	
Electric:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
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 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 A COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: [Signature]
 Email Address: _____

Print Name: J. Randall Thompson
 Date: 1/5/17

Title/Company: _____
 Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY

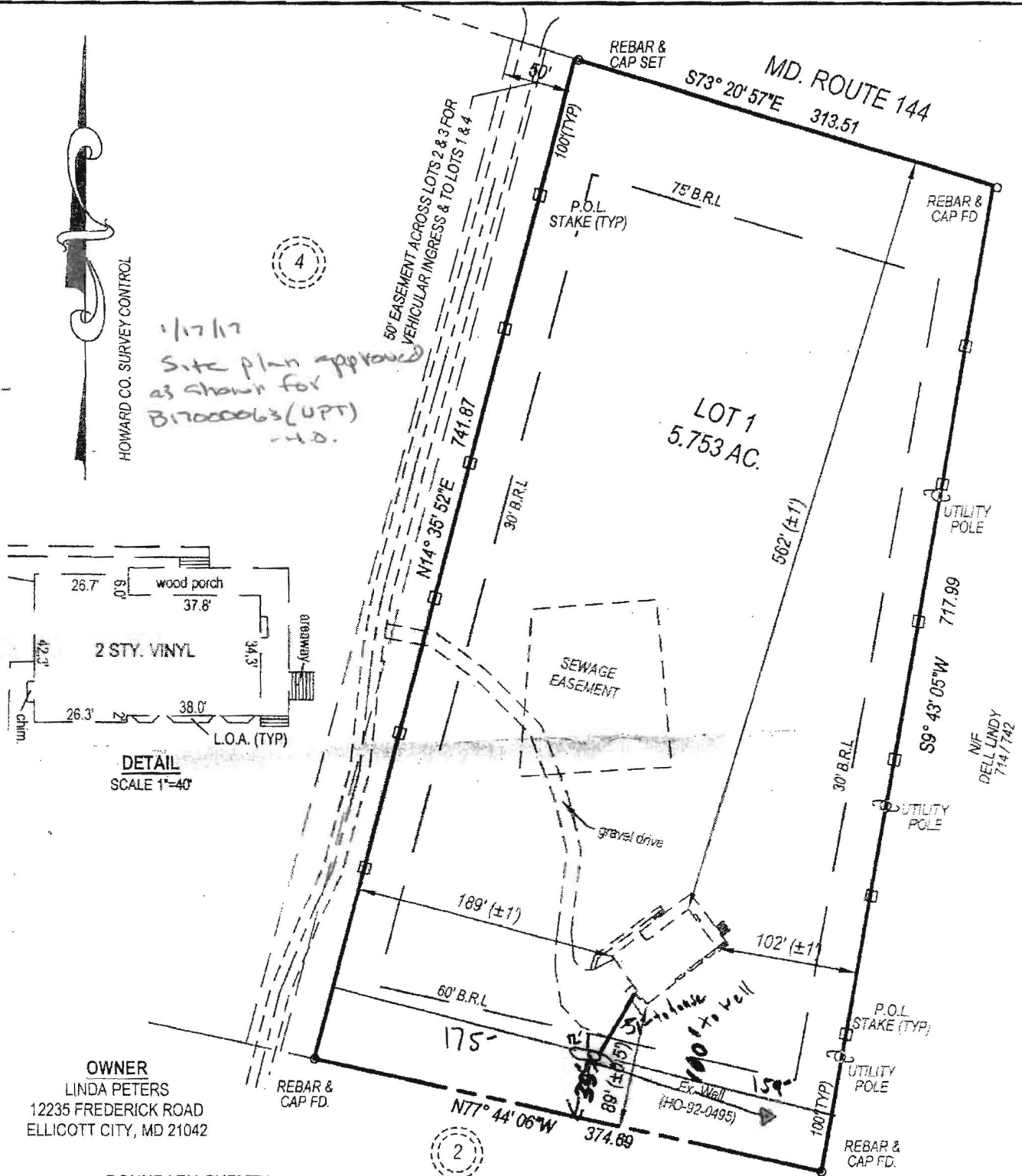
FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>1/17/17</u>	<u>H. Oswald</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>110.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# <u>1008424</u>



OWNER
LINDA PETERS
12235 FREDERICK ROAD
ELLCOTT CITY, MD 21042

BOUNDARY SURVEY
AND
LOCATION DRAWING
LOT #1
**HEBB PROPERTY
LOTS 1,2,3, AND 4**

RECORDED IN PLAT C.M.P. NO 5850
3rd ELECTION DISTRICT
HOWARD COUNTY, MARYLAND
TAX MAP: 15 GRID:18 PARCEL: 39

NOTES

1. The Property shown hereon is owned by Linda Peters, by deed dated August 29, 2014 and recorded among the land records of Howard County, MD in Liber 15814 Folio 125.
2. The boundary and location of improvements as shown hereon have been taken from a field run survey performed by BPR, Inc. on March 11, 2015.
3. A statement of minimum advice is an integral part of the plat and is detailed on the attached general notes.
4. The property shown hereon is not affected by the Flood Hazard Zone as shown on Flood Insurance Rate Map for Howard County, Maryland Panel No. 70 of 235, Community Panel No. 240044 0070D as prepared by the National Flood Insurance Program, revision date November 6, 2013.