



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

DILP 2016 NOV 22 AM 9:00

Date Received: _____

Permit No.: B/6005042

Building Address: 7165 Columbia Gateway Drive
 City: Columbia State: MD Zip Code: 21045
 Suite/Apt. # G SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Gateway RSB
 Section: _____ Area: _____ Lot: Par J
 Tax Map: 0043 Parcel: 0671 Grid: 0001
 Zoning: _____ Map Coordinates: _____ Lot Size: 20.852

Existing Use: medical offices
 Proposed Use: medical offices
 Estimated Construction Cost: \$ 185,000.00
 Description of Work:
interior alt for a new tenant layout. demo exist partitions, finishes & fixtures & construct new drywall partitions, finishes & fixtures...Including an X-ray room
 Occupant or Tenant: FMH/Howard County Corp OHS
 Was tenant space previously occupied? Yes No
 Contact Name: Steve Knott
 Address: 7165 Columbia Gateway Drive
 City: Columbia State: MD Zip Code: 21045
 Phone: 301.607.1416 Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: <u>1</u>	Depth Width
Gross area, sq. ft./floor: <u>26,690</u>	1 st floor:
	2 nd floor:
Area of construction (sq. ft.): <u>4505</u>	Basement:
	<input type="checkbox"/> Finished Basement
Use group: <u>B</u>	<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: Gateway Crossing Green LLC
 Address: 50 N Water St
 City: South Norwalk State: CT Zip Code: 06854
 Phone: _____ Fax: _____
 Email: _____
Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Michelle Jefferson/PPESI
 Address: 416 Sycamore Ave
 City: Westminster State: MD Zip Code: 21157
 Phone: 410.259.2102 Fax: _____
 Email: michelle@ppesi.com

Contractor Company: CCS, Inc (commercial const svc)
 Contact Person: Steve Knott
 Address: 108 Byte Dr suite200
 City: Frederick State: MD Zip Code: 21702
 License No.: 1D01853
 Phone: 301.607.1416 Fax: _____
 Email: _____

Engineer/Architect Company: Proffitt & Associates
 Responsible Design Prof.: Michael Proffitt
 Address: 49 S Carroll St
 City: Frederick State: MD Zip Code: 21701
 Phone: 301.662.8532 Fax: _____
 Email: _____

Utilities	
Water Supply	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input checked="" 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	
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 COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Michelle Jefferson
 Applicant's Signature
 michelle@ppesi.com
 Email Address
 authorized agent/PPESI
 Title/Company

Michelle Jefferson
 Print Name
 11.22.2016
 Date

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>11/29/16</u>	<u>A. 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? 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>200.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>011495</u>



Bureau of Environmental Health

8930 Stanford Boulevard, Columbia, MD 21045

Main: 410-313-2640 | Fax: 410-313-2648

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

www.hchealth.org

Facebook: www.facebook.com/hocohealth

Twitter: HowardCoHealthDep

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

November 29, 2016

Michelle Jefferson/PPESI
416 Sycamore Ave
Westminster, MD 21157

Sent via email to: michelle@ppesi.com

**RE: B16005042
FMH/Howard County Corp OHS
7165 Columbia Gateway Drive
Columbia, MD 21045**

Ms. Jefferson:

This letter is in response to building permit B16005042. The building permit application and plans indicate that the proposed work includes x-ray equipment that will need to be reviewed/registered with Maryland Department of the Environment, Air Quality Program, Air and Radiation Management Administration. If you have any questions you may contact the Air Quality Permits Program at (410) 537-3230.

Your building permit has been **approved** by this Department. I may be reached at (410) 313-1786 if you would like to discuss the project in more detail.

Respectfully,

Hank Oswald

Hank Oswald, L.E.H.S.
Well & Septic Program
Bureau of Environmental Health

Oswald, Hank

From: Oswald, Hank
Sent: Tuesday, November 29, 2016 2:11 PM
To: 'michelle@ppesi.com'
Subject: B16005042_7165 Columbia Gateway Drive
Attachments: B16005042_X Ray Letter_2016.pdf

Ms. Jefferson:

Please see attached memo regarding building permit # B16005042.

Should you have any questions, please don't hesitate to ask.

Respectfully,

Hank

Hank Oswald, L.E.H.S.
Howard County Health Department
Bureau of Environmental Health
Well & Septic Program
8930 Stanford Boulevard
Columbia, MD 21045
410.313.1786 (Office)
410.313.2648 (Fax)