



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.: _____

Building Address: 6461 Daisy Rd
 City: WOODBINE State: MD Zip Code: _____
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: 20 Parcel: 13 Grid: 06
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: RESIDENTIAL
 Proposed Use: SAME
 Estimated Construction Cost: \$ 75,000
 Description of Work: REPAIR FRONT PORCH

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 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:	<u>Depth</u>	<u>Width</u>
Gross area, sq. ft./floor:	1 st floor: <u>26.10</u>	<u>46.40</u>
	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	
<u>Construction type:</u>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: _____	
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>	
<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: TAYLOR PROPERTIES
 Address: 9321 SPRINGWATER PATH
 City: JESSUP State: MD Zip Code: 20774
 Phone: 443-631-2070 Fax: _____
 Email: JENTAYLOR1105@GMAIL.COM

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Richard W Haiship
 Address: 100 2ND AVE N.
 City: GLEN BURNIE State: MD Zip Code: 21061
 Phone: 443-831-2085 Fax: _____
 Email: _____

Contractor Company: INNOVATIVE BUILDING SERV
 Contact Person: Richard W Haiship
 Address: 100 2ND AVE N.
 City: GLEN BURNIE State: MD Zip Code: 21061
 License No.: 48913
 Phone: 443-831-2085 Fax: _____
 Email: _____

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

Utilities	
<u>Water Supply</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private <u>WELL</u>	
<u>Sewage Disposal</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private <u>SEPTIC</u>	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Heating System</u>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other: _____	
<u>Sprinkler System:</u>	
<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.

Richard W Haiship
 Applicant's Signature
3EARMHANDID@COMCAST.NET
 Email Address
OWNER
 Title/Company

Richard W Haiship
 Print Name
1-5-17
 Date

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

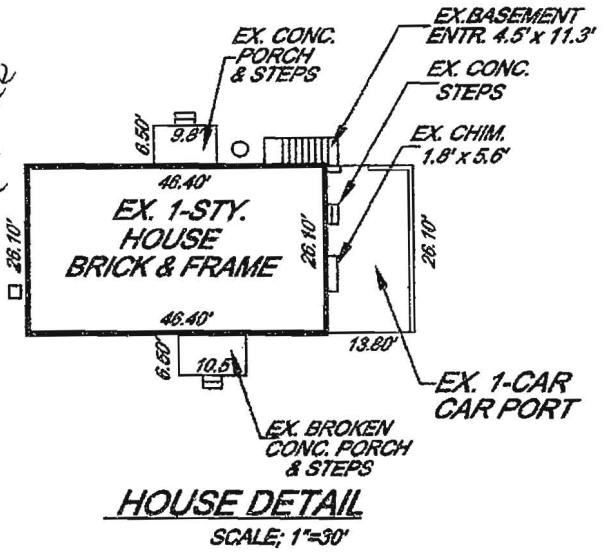
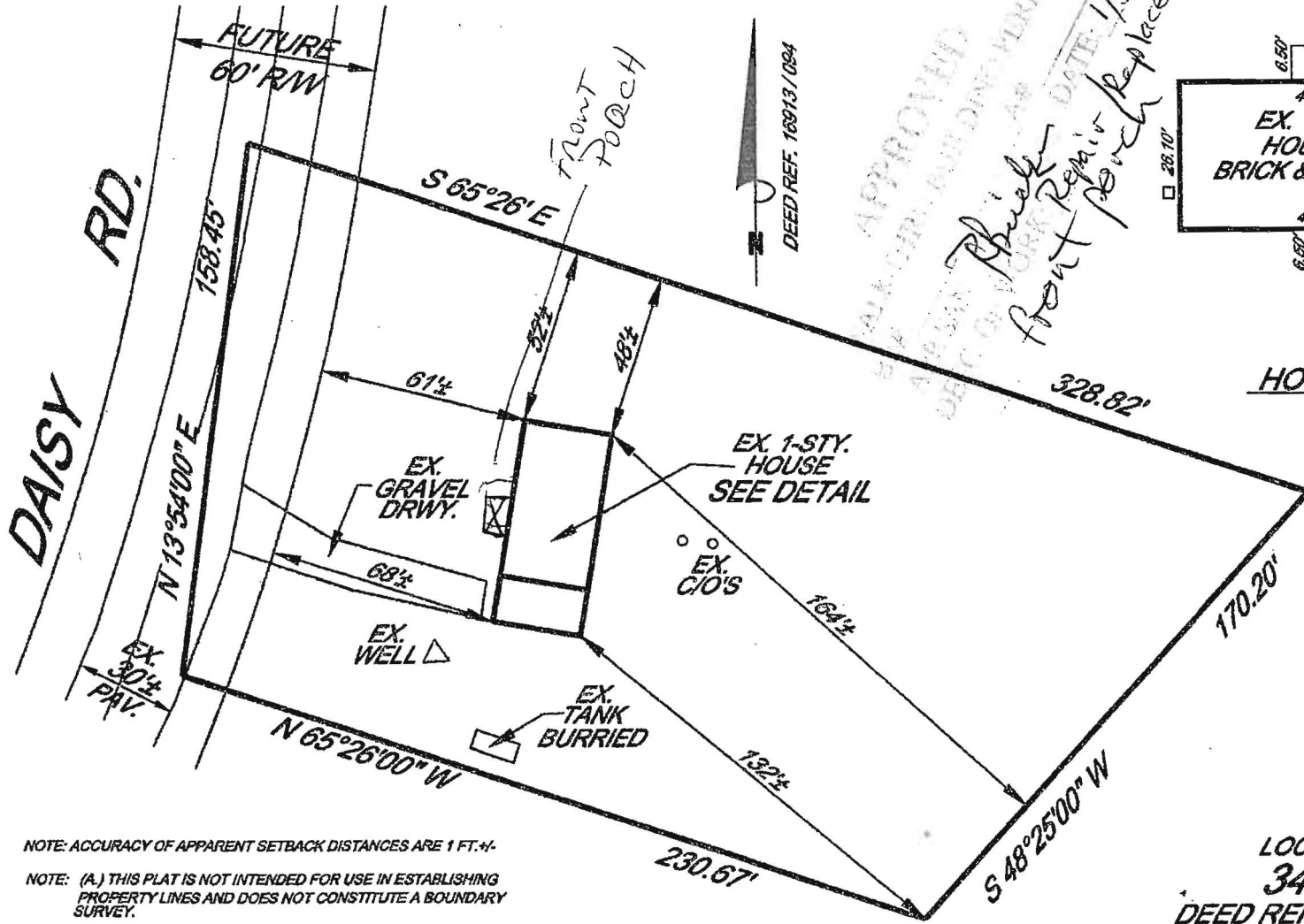
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		<u>1/5/17 R. Bickel</u>

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

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA



NOTE: ACCURACY OF APPARENT SETBACK DISTANCES ARE 1 FT. +/-

NOTE: (A.) THIS PLAT IS NOT INTENDED FOR USE IN ESTABLISHING PROPERTY LINES AND DOES NOT CONSTITUTE A BOUNDARY SURVEY.

(B.) THIS PLAT IS OF THE BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING.

(C.) THIS PLAT SHOULD NOT BE RELIED UPON FOR THE LOCATION OR ESTABLISHMENT OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS

THIS IS TO CERTIFY THAT WE HAVE LOCATED THE IMPROVEMENTS AS SHOWN ACCORDING TO THE REGULATIONS GOVERNING THE MARYLAND STANDARDS OF PRACTICE FOR PROFESSIONAL LAND SURVEYORS EFFECTIVE DATE AUGUST, 2005

Richard S. Krebs
MR. RICHARD S. KREBS MD. REG. NO. 10873
EXP. DATE 4/24/18

DATE: 7/27/2016



LOCATION CERTIFICATION
3461 DAISY RD
DEED REF. LIBER 16913 / FOLIO 094

ZONED - "RC-DEO"
TAX MAP 20, GRID 06, PARCEL 18
4TH ELECTION DISTRICT
GLENWOOD
HOWARD COUNTY, MARYLAND

07/27/2016 SCALE: 1" = 50'

CHARLES R. CROCKEN & ASSOCIATES, INC.
Civil Engineering Land Planning
902 Lee Ave.
Sykesville, Md. 21157
Tel. (410) 549-2708