



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: 15067 Frederick Rd
 City: Woodbridge State: MD Zip Code: 21797
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: 0.9959

Property Owner's Name: Kenneth Clark
 Address: 15067 Frederick Rd
 City: Woodbridge State: MD Zip Code: 21797
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Travis Poquette
 Address: 1300 St. Michael's Rd
 City: Mt Airy State: MD Zip Code: 21771
 Phone: 443 336 7690 Fax: _____
 Email: travispq@bce@hotmail.com

Existing Use: SFD
 Proposed Use: SFD
 Estimated Construction Cost: \$ 6110,000
 Description of Work: detached garage

Contractor Company: Poquette Construction Inc
 Contact Person: Travis Poquette
 Address: 1300 St. Michael's Rd
 City: Mt Airy State: MD Zip Code: 21771
 License No.: _____
 Phone: 443 336 7690 Fax: _____
 Email: travispq@bce@hotmail.com

Occupant or Tenant: Occupied
 Was tenant space previously occupied? Yes No
 Contact Name: Kenneth Clark
 Address: 15067 Frederick Rd
 City: Woodbridge State: MD Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

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

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	
<u>Construction type:</u>	<input checked="" 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 type="checkbox"/> No	Roof:	
Roadside Tree Project Permit # _____	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
<u>Water Supply</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<u>Sewage Disposal</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Heating System</u>	
<input checked="" 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 checked="" 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.

Applicant's Signature: [Signature] Print Name: Travis Poquette
 Email Address: travispq@hotmail.com Date: 7/20/16
 Title/Company: owner

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

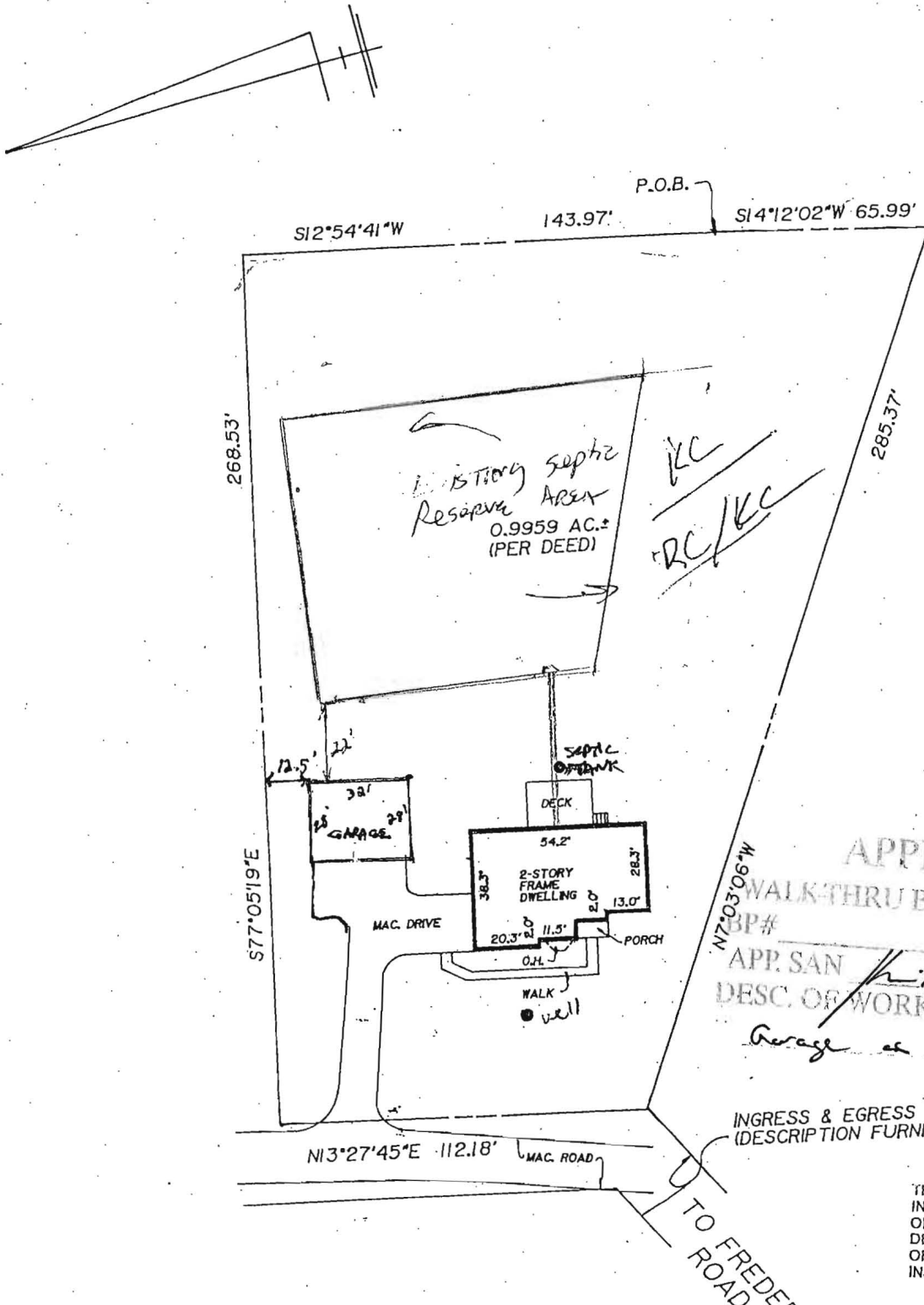
AGENCY	DATE	SIGNATURE OF APPROVAL	DPZ SETBACK INFORMATION	Filing Fee	\$
State Highways			Front: _____	Permit Fee	\$
Building Officials			Rear: _____	Tech Fee	\$
PSZA (Zoning)			Side: _____	Excise Tax	\$
PSZA (Engineering)			Side St.: _____	PSFS	\$
Health	<u>7/24/16</u>	<u>[Signature]</u>	All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No	Guaranty Fund	\$
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No			Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Add'l per Fee	\$
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START			Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fees	\$
			Lot Coverage for New Town Zone: _____	Sub-Total Paid	\$
			SDP/Red-line approval date: _____	Balance Due	\$
				Check	#

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

LANDTECH ASSOCIATES, INC.

1410 CRAIN HIGHWAY, N.W. SUITE 7B GLEN BURNING, MD 21061
(410) 768-2121 FAX (410) 553-9081

NOTE: NOT TO BE USED FOR THE ISSUANCE OF PERMITS.



APPROVED
WALK-THRU BUILDING PERMIT
APP. SAN / *[Signature]* DATE: 7/29/04
DESC. OF WORK: *Garage as shown*

INGRESS & EGRESS EASEMENT
(DESCRIPTION FURNISHED BY CLIENT)

THIS PROPERTY LIES IN FLOOD ZONE C, AN AREA OF MINIMAL FLOODING, AS DELINEATED ON THE MAPS OF THE NATIONAL FLOOD INSURANCE PROGRAM

PROPERTY LINE SURVEY RECOMMENDED TO DETERMINE THE EXACT LOCATION OF IMPROVEMENTS AND/OR ENCROACHMENTS, IF ANY.

- Notes:
- 1) This plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing.
 - 2) This plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.
 - 3) This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing.
 - 4) No title report furnished.



Certification: This is to certify that the improvements indicated hereon are located as shown.

Braden A. Rogers
GRADEN A. ROGERS - Propt. L.S. MD. Lic. No. 119

LIBER 7628 FOLIO 174
LOT _____ BLOCK _____ SECT. _____ PLAT _____
PLAT ENTITLED _____
RECORDED IN HOWARD CO. MD.

15062 FREDERICK ROAD
SCALE 1"=50' CASE NO. 3840-04-05266
DATE 10-22-2004 JOB NO. TW20042332