



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: 4835 Castle bridge Road
 City: Ellicott City State: MD Zip Code: 21042
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 42
 Tax Map: 0029 Parcel: 0020 Grid: 0004
 Zoning: _____ Map Coordinates: _____ Lot Size: 1.11AC

Existing Use: SFD
 Proposed Use: SFD with Nook
 Estimated Construction Cost: \$ 20,000
 Description of Work: Add 124 SF Breakfast nook off the back of the house at the kitchen
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Terene and Debra Spear
 Address: 4835 Castle bridge
 City: Ellicott City State: MD Zip Code: 21042
 Phone: 410-740-2431 Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Paul Arnold
 Address: 9693 Cornwing Lane
 City: Columbia State: MD Zip Code: 21046
 Phone: 410-290-9899 Fax: 410-290-5824
 Email: paul@arndo.com

Contractor Company: ARDO Contracting Inc
 Contact Person: Paul Arnold
 Address: 9693 Cornwing Lane
 City: Columbia State: MD Zip Code: 21046
 License No.: MHC 19789
 Phone: 410-290-9899 Fax: 410-290-5824
 Email: paul@arndo.com

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 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:	Depth Width
Gross area, sq. ft./floor:	1 st floor: _____ 2 nd floor: _____
Area of construction (sq. ft.):	Basement: <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl Space
Use group:	<input type="checkbox"/> Slab on Grade
Construction type:	<input type="checkbox"/> No. of Bedrooms:
<input type="checkbox"/> Reinforced Concrete	Multi-family Dwelling
<input type="checkbox"/> Structural Steel	No. of efficiency units: _____
<input type="checkbox"/> Masonry	No. of 1 BR units: _____
<input type="checkbox"/> Wood Frame	No. of 2 BR units: _____
<input type="checkbox"/> State Certified Modular	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	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<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	
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.

Applicant's Signature: [Signature]
 Email Address: paul@arndo.com
 Title/Company: President ARDO Contracting, Inc

Print Name: Paul Scott Arnold
 Date: 07/09/2017

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

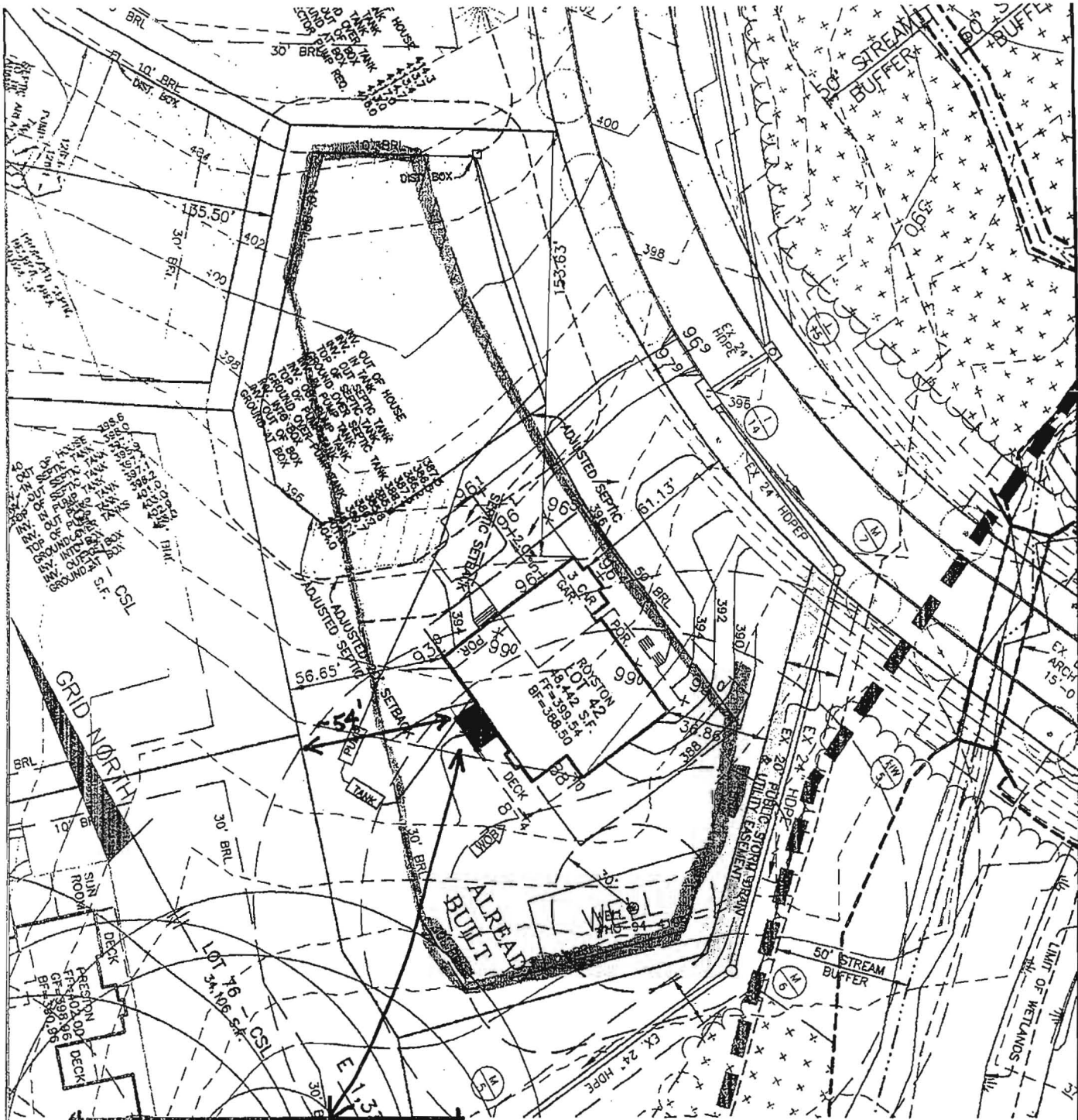
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		<u>[Signature]</u>

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: _____

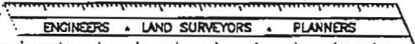
Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

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



12'-4" x 10'-2" FRAME ADDITION
 TO FIRST FLOOR OF HOME
 ON BLOCK PIER FOUNDATION
 124 SQ. FEET

BENCHMARK



ENGINEERING, INC.

8480 BALTIMORE NATIONAL PIKE • SUITE 418 • ELLICOTT CITY, MD 21043

1950 RIVERWOOD PHOTOS AND PLANS FOR LOT 7/21/2008 4:42 PM 410-465-6644

RIVERWOOD

LOT 42

WALK-THRU BUILDING PERMIT

BP# _____ A# _____

APP SAN DBeyond DATE: 2-9-17

DESC OF WORK: Buffet Breakfast

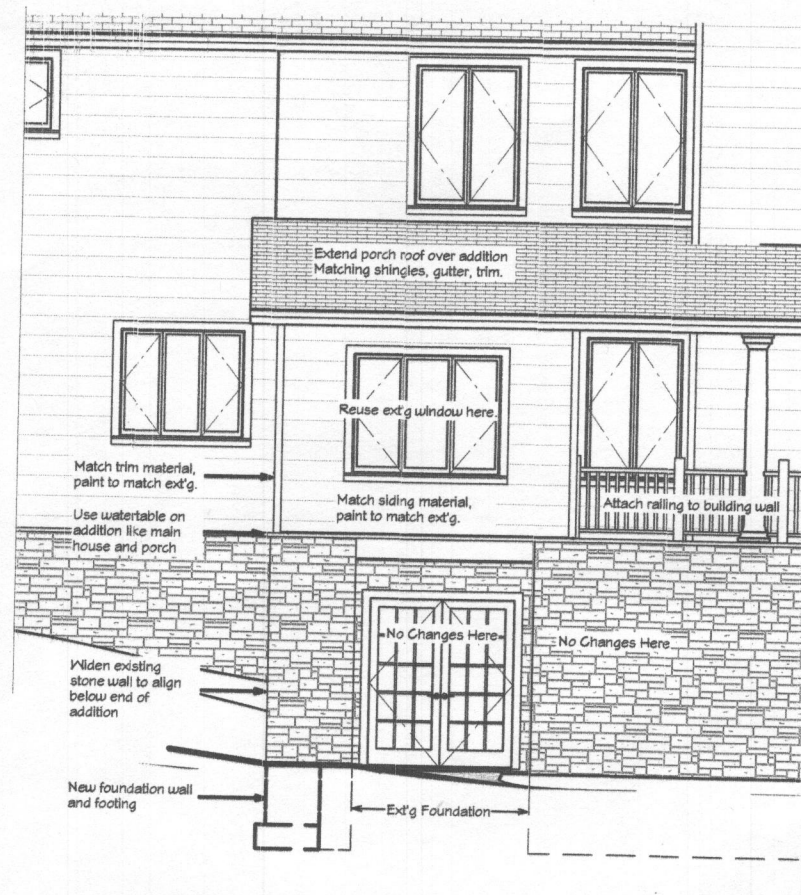
Rock off of kitchen

THIRD ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND

SCALE: 1" = 50' DATE: 7/21/08

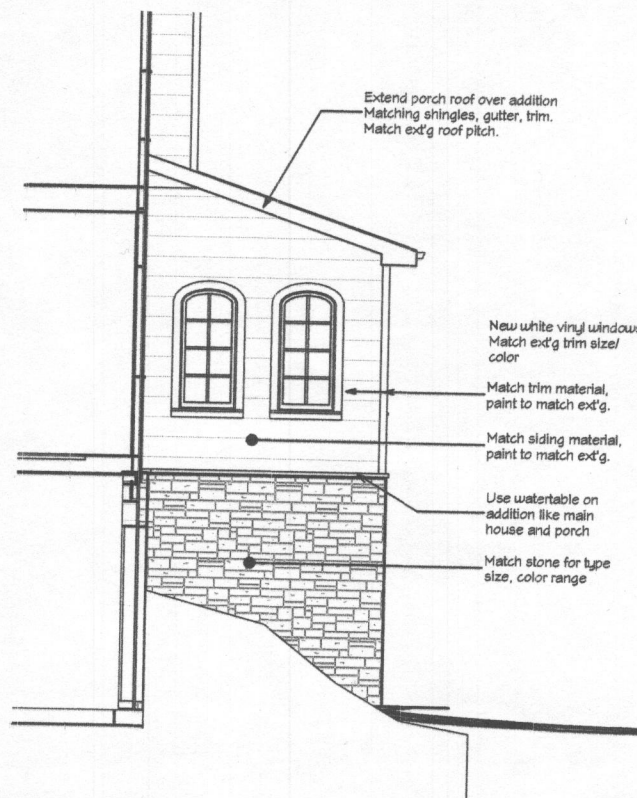
Approved as

4835 Castlebridge Road



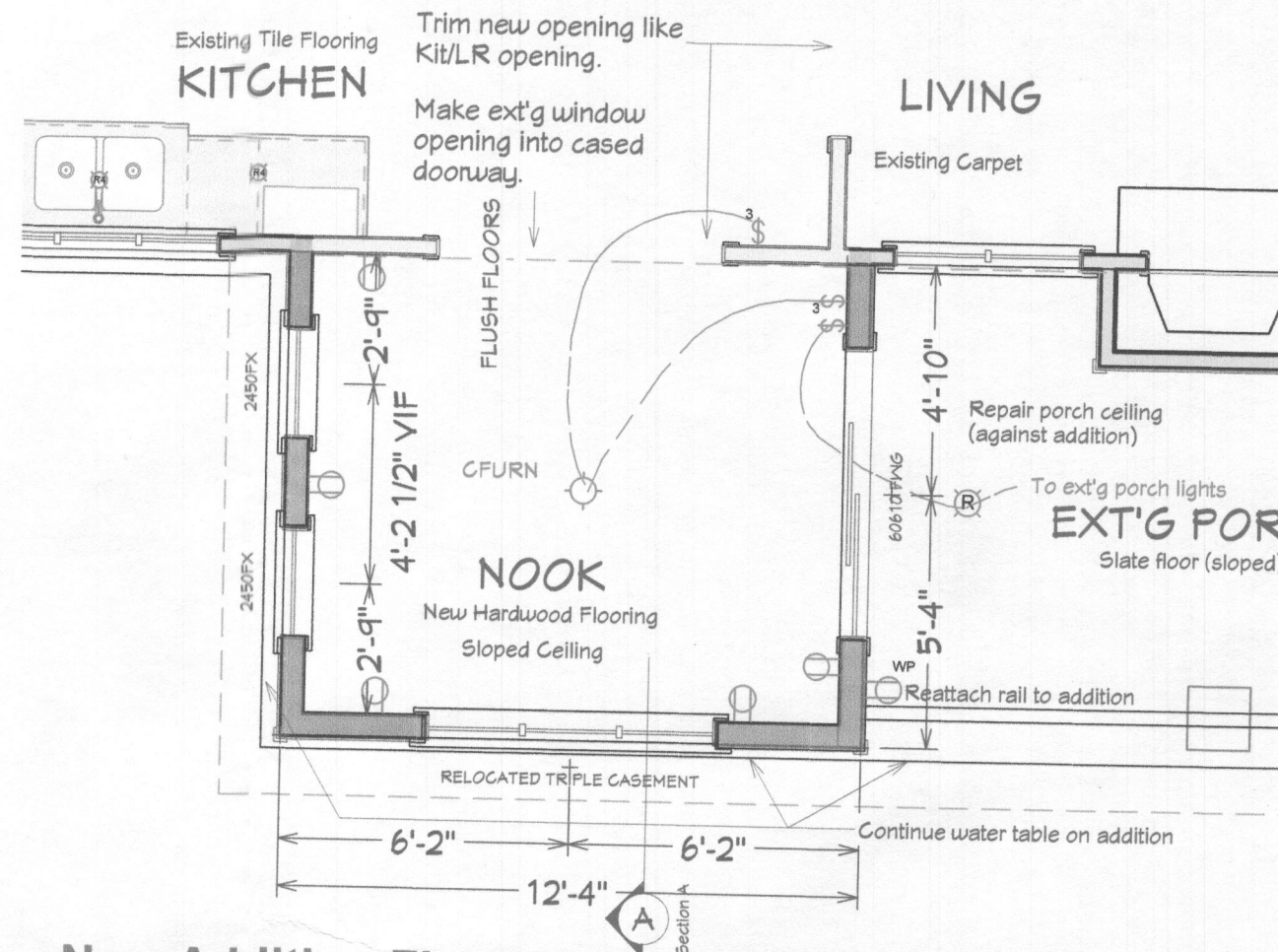
Rear Elevation of Addition

scale 1/8" = 1' - 0"



Side Elevation of Addition

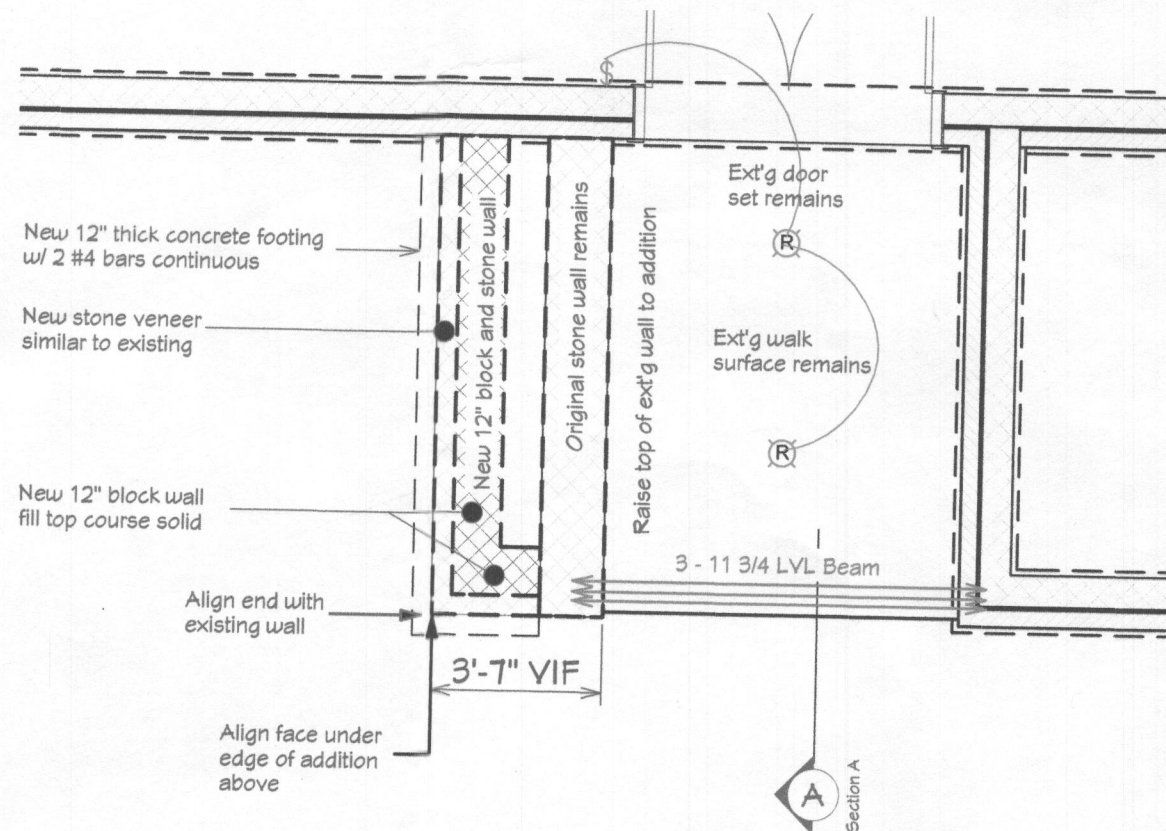
scale 1/8" = 1' - 0"



New Addition Floor Plan

124 Square Foot Addition

scale 1/4" = 1' - 0"



New Addition Foundation Plan

scale 1/4" = 1' - 0"

ARDO

CONTRACTING, INC.

ARDO Contracting Inc.

9693 - G Gerwig Lane
Columbia, MD 21046

410-290-9899

Spears Addition
4835 Castlebridge Road
Ellicott City, MD, 21042

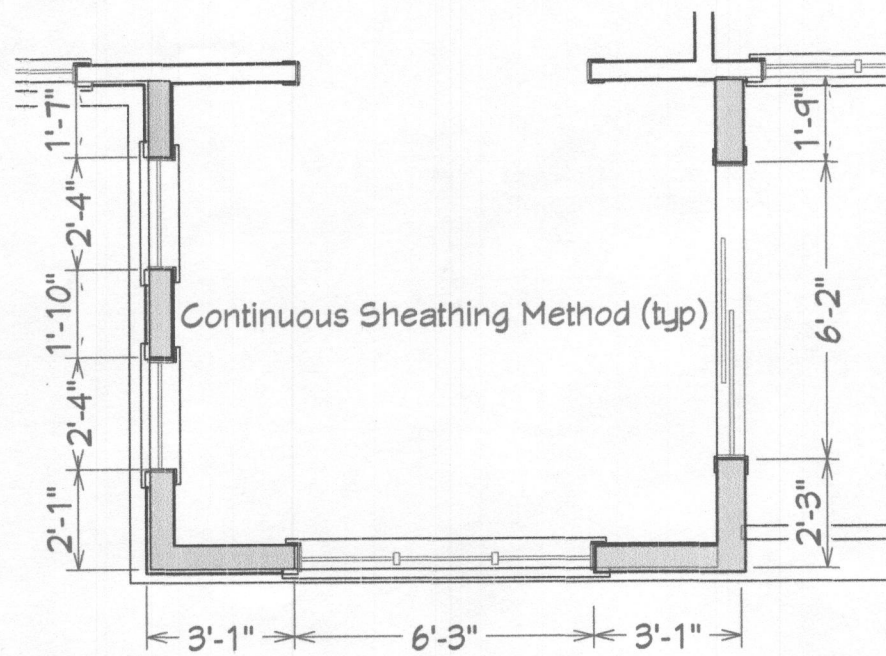
Printed: February 9, 2017

I certify that these documents were prepared or approved by me, and that I am a duly licensed architect under the laws of the State of Maryland, License # 7277, Expiration date: 9-21-18



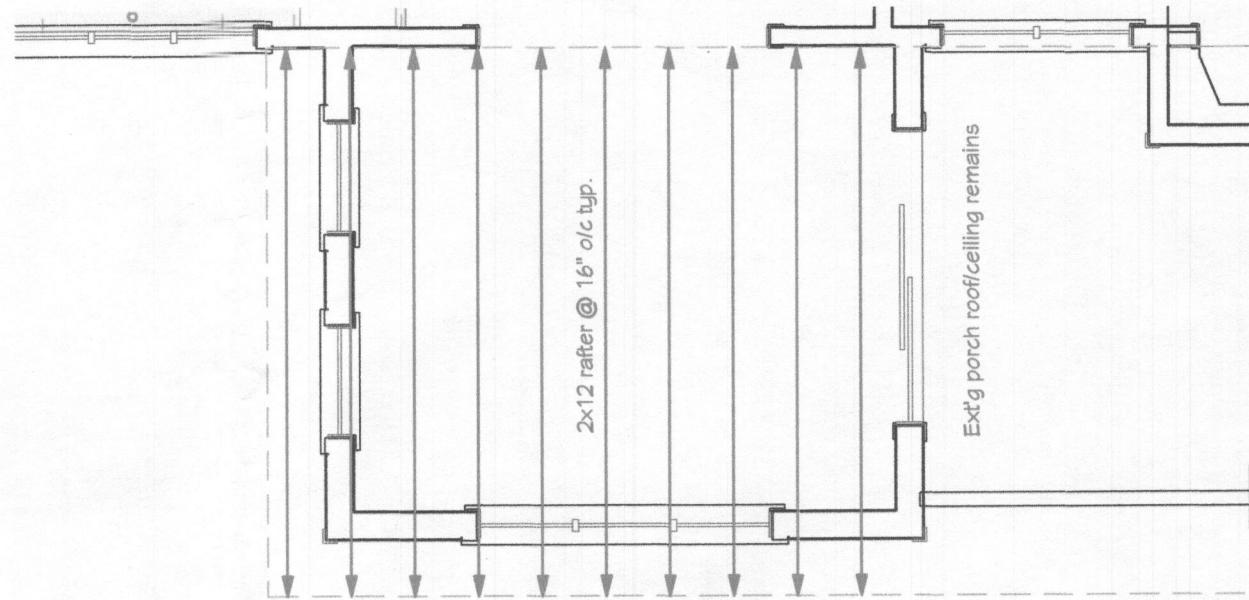
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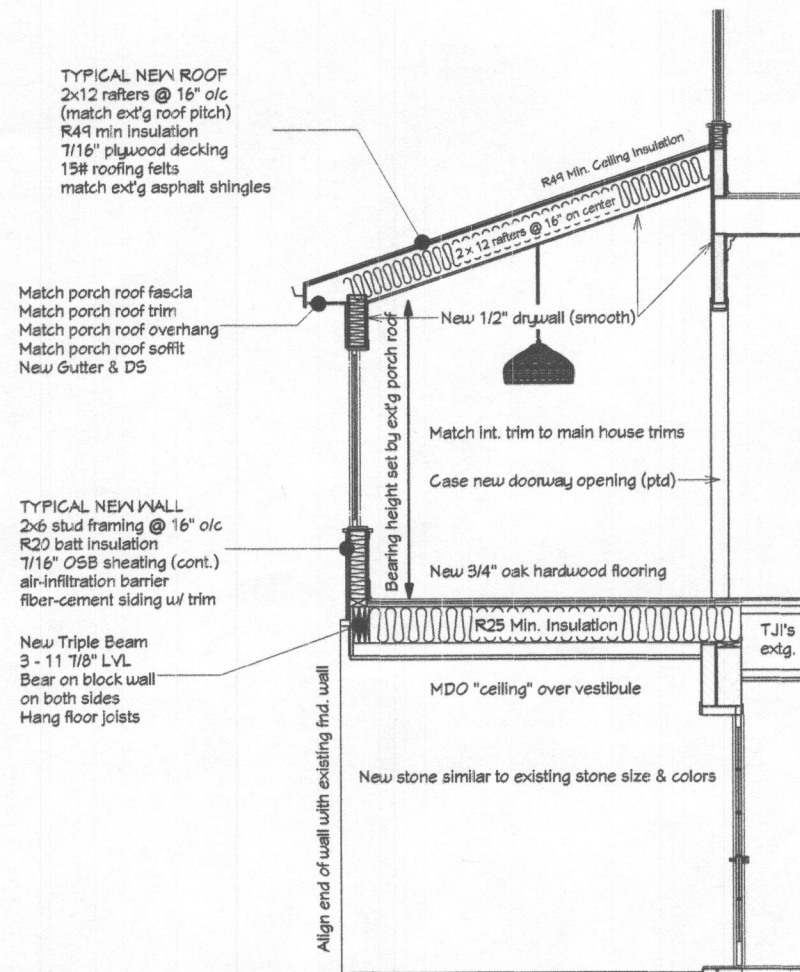


Apply wall bracing to entire addition shell (shaded walls). Per IRC 602.10

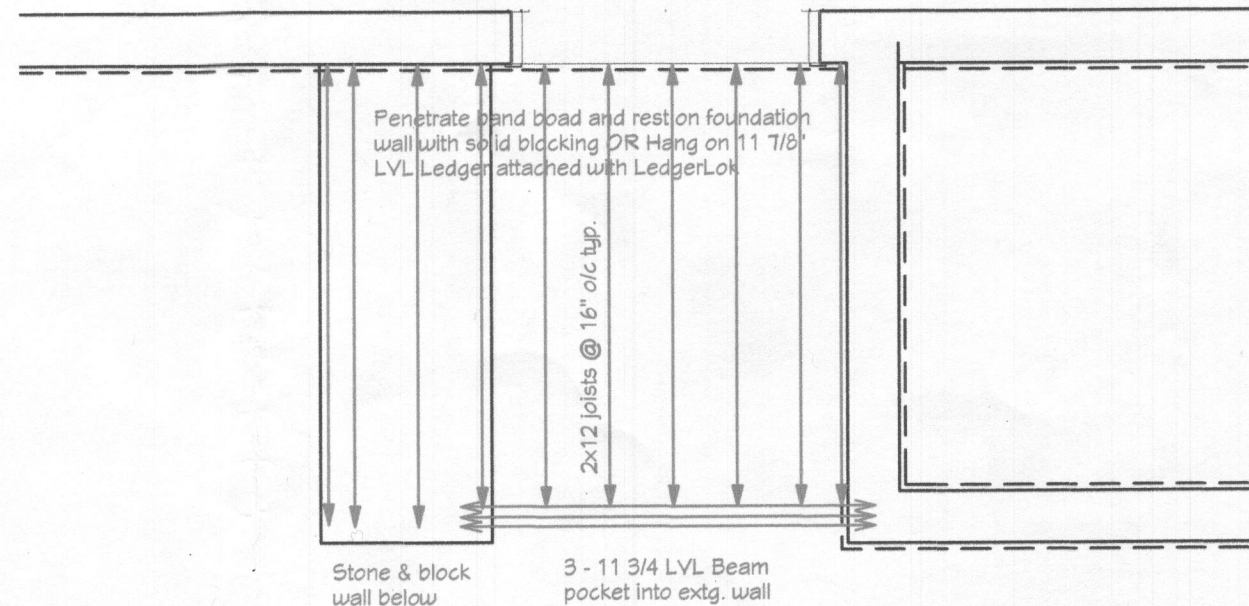
Wall Bracing Plan 1/8" = 1' - 0"



Addition Roof Framing Plan scale 1/4" = 1' - 0"



Cross Section "A" 3/16" = 1' - 0"



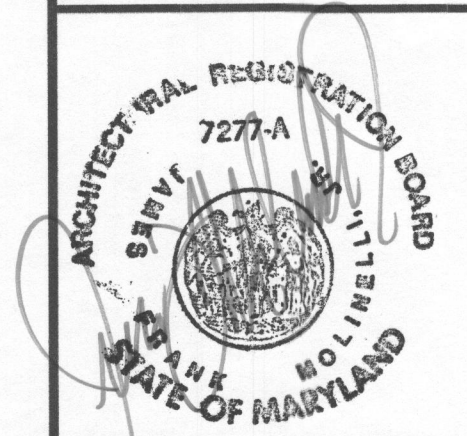
Addition Floor Framing Plan scale 1/4" = 1' - 0"

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Sheet: **2**