



# 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: 10/17/13

Permit No.: B13003923

Building Address: 11790 OLD FREDERICK RD.  
 City: MARRIOTTVILLE State: MD Zip Code: \_\_\_\_\_  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Tax Map: 10 Parcel: 45 Grid: 2  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: RESIDENTIAL  
 Proposed Use: RESIDENTIAL  
 Estimated Construction Cost: \$ 200,000.00  
 Description of Work: CONSTRUCTION OF NEW SINGLE FAMILY DWELLING  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: MUHAMMAD SAJID  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: 410-800-8974 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Commercial Building Characteristics	Residential Building Characteristics	
Height: <u>2</u>	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories: <u>2</u>	Depth	Width
Gross area, sq. ft./floor:	1 <sup>st</sup> floor: <u>48-10</u>	<u>60-3</u>
Area of construction (sq. ft.):	2 <sup>nd</sup> floor: <u>44-10</u>	<u>60-3</u>
Use group:	Basement: <u>42-10</u>	<u>60-3</u>
<u>Construction type:</u>	<input type="checkbox"/> Finished Basement	
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Unfinished Basement	
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space	
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade	
<input checked="" type="checkbox"/> Wood Frame	No. of Bedrooms: <u>4</u>	
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>	
	No. of efficiency units: _____	
	No. of 1 BR units: _____	
	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: _____	
<input type="checkbox"/> Roadside Tree Project Permit # _____	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Property Owner's Name: MUHAMMAD SAJID  
 Address: 11790 OLD FREDERICK RD  
 City: MARRIOTTVILLE State: MD Zip Code: 21104  
 Phone: 410-800-8974 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (if other than stated herein)  
 Applicant's Name: MOHAMMED MUEZI  
 Address: 12440 FREDERICK RD  
 City: WEST FRIENDS State: MD Zip Code: 21794  
 Phone: 443-604-3127 Fax: \_\_\_\_\_  
 Email: brmuezi@gmail.com

Contractor Company: \_\_\_\_\_  
 Contact Person: Home Owner  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No.: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Engineer/Architect Company: MUEZI & ASSOC. INC  
 Responsible Design Prof.: Mohammed Muftic  
 Address: 12440 FREDERICK RD  
 City: WEST FRIENDS State: MD Zip Code: 21794  
 Phone: 443-604-3127 Fax: \_\_\_\_\_  
 Email: brmuezi@gmail.com

Utilities	
<u>Water Supply</u>	
<input checked="" type="checkbox"/> Public	
<input 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 checked="" 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]  
 Email Address: brmuezi@gmail.com  
 Title/Company: MUEZI & ASSOCIATES, INC

Print Name: MOHAMMED I. MUEZI  
 Date: 9/27/13  
**RECEIVED**  
 OCT 17 2013  
 LICENSES & PERMITS DIVISION

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

AGENCY	DATE	SIGNATURE OF APPROVAL
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Officials		
<input checked="" type="checkbox"/> PSZA (Zoning)		
<input checked="" type="checkbox"/> PSZA (Engineering)		
<input checked="" type="checkbox"/> Health	<u>3-10-14</u>	<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	\$ <u>100.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>4999</u>



HOWARD COUNTY DEPARTMENT OF PLANNING AND ZONING

3430 Courthouse Drive ▪ Ellicott City, Maryland 21043 ▪ 410-313-2350

Marsha S. McLaughlin, Director

www.howardcountymd.gov  
FAX 410-313-3391  
TDD 410-313-2323

August 2, 2013

Sajid Muhammad  
11790 Old Frederick Road  
Marriottsville, MD 21104

The Howard County Zoning Regulations permit only one single-family detached dwelling unit use per lot. However, this letter temporarily authorizes the construction of a new dwelling on the property located at **11790 Old Frederick Road, Marriottsville, MD 21104**, prior to removal of the existing dwelling ("Original Dwelling Unit"), on the condition that you comply with all provisions declared herein. This temporary authorization is only valid for six months from the date of this letter or until the issuance of the final use and occupancy permit for the new dwelling, whichever occurs first. If an extension is necessary due to delays, you must contact this Department in writing prior to the six month deadline in order to request an extension of this authorization.

Upon the issuance of either a temporary or final use and occupancy permit for the new dwelling, the Original Dwelling Unit must cease being used, and must be **removed** within 30 days. Failure to remove the Original Dwelling Unit as required is hereby declared to be a violation of the Zoning Regulations which will induce an enforcement action as delineated in Section 102.B of the Zoning Regulations. Such an enforcement action may include, but is not limited to, Civil Fines or the removal of the Original Dwelling Unit by the County at the owner's expense.

The Department of Planning and Zoning will provide its endorsement on a building permit application for the construction of the new dwelling on the subject property only upon the receipt of a copy of this letter signed by all owners of the property. This signed copy must be submitted with your building permit application for the construction of the new dwelling unit. This authorization does not relieve any of the standard requirements for building permit approval. Please notify this Division when you have received temporary or final use and occupancy permit for the new dwelling, and also when the Original Dwelling Unit has been removed. This authorization is not transferable. If you have questions regarding this matter, please contact me at 313-2350.

Sincerely,

Cindy Hamilton, Chief  
Division of Public Service and  
Zoning Administration

By signing below, I hereby affirm that I have read, understand, and will comply with the authorization granted above:

Signature		Date	10/16/13	Print Name	MUHAMMAD SAJID
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Signature	_____	Date	_____	Print Name	_____
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(If additional signatures are necessary, please provide on back of page)



# Building Permit Application

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 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
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Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
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 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: 410 900-8974 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Commercial Building Characteristics	Residential Building Characteristics	
Height: <u>10</u>	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories: <u>2</u>	<b>Depth</b>	<b>Width</b>
Gross area, sq. ft./floor:	1 <sup>st</sup> floor: <u>44-10</u>	<u>60-3</u>
Area of construction (sq. ft.):	2 <sup>nd</sup> floor: <u>64-10</u>	<u>60-3</u>
Use group:	Basement: <u>92-10</u>	<u>60-3</u>
<b>Construction type:</b>	<input type="checkbox"/> Finished Basement	
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Unfinished Basement	
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space	
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade	
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 Phone: 410-900-8974 Fax: \_\_\_\_\_  
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**Applicant's Name & Mailing Address, (If other than stated herein)**  
 Applicant's Name: MOHAMMED MUFTI  
 Address: 12440 FREDERICK RD  
 City: WEST FRIENDSHIP State: MD Zip Code: 21174  
 Phone: 443-604-3127 Fax: \_\_\_\_\_  
 Email: dr.mufti@gmail.com

Contractor Company: \_\_\_\_\_  
 Contact Person: Home Owner  
 Address: \_\_\_\_\_  
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 Phone: 443-604-3127 Fax: \_\_\_\_\_  
 Email: dr.mufti@gmail.com

Utilities
<b>Water Supply</b>
<input checked="" type="checkbox"/> Public
<input type="checkbox"/> Private
<b>Sewage Disposal</b>
<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 checked="" type="checkbox"/> No
<b>Heating System</b>
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:
<b>Sprinkler System:</b>
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Grading Permit Number:</b>
<b>Building Shell Permit Number:</b>

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Applicant's Signature: [Signature]  
 Email Address: dr.mufti@gmail.com  
 Title/Company: MUFTI & ASSOCIATES, INC

Print Name: MOHAMMED I. MUFTI  
 Date: 9/27/13

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>3-10-14</u>	<u>Dona Bernaud</u>

Is Sediment Control approval required for issuance?  Yes  No  
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION
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Rear:
Side:
Side St.:
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SDP/Red-line approval date:

Filing Fee	\$ <u>100.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# <u>4999</u>

Name: SAJID SAMI  
Street Address: 11790 Old Frederick Rd  
City, State, Zip: Ellicott City, MD  
Date: 6/20/14

RECEIVED

JUN 20 2014

LICENSES & PERMITS  
DIVISION

Amendment, Permit # B13003923

Ms. Debbie Whalen  
Division of Plan Review  
Department of Inspections, Licenses and Permits  
Howard County Government  
3430 Court House Dr  
Ellicott City, MD 21043

DUPLICATE  
SENT 7.01.14

Dear Ms. Whalen:

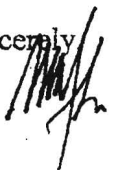
I am requesting to amend Permit # B13003923 at  
11790 Old Frederick Rd to  
ADD SUNROOM, BALCONY, PORTICO, EXTENSION OF  
DRIVE, WINDOW CHANGES, ATTIC STORAGE ROOM.

Enclosed:

✓ Fee: \$50.00 CK#5315  
5 Plot Plans INV# 365284  
2 Sets of Construction Drawings  
Other:

If there is anything we can do to assist you, please let me know.

Sincerely,

  
Name: Mohammad Mufti  
Title: Architect  
Phone: 443-604-3127  
Email: brmufti@gmail.com

Amendment Letter

DUPLICATE

SENT 07.01.14

2019 JUN 20 PM 11 33

DLP

**COMPLETE THIS FORM WHEN DROPPING OFF ANY  
CORRESPONDENCE AND/OR PLANS TO THE HOWARD COUNTY  
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS COUNTER:**

RECEIVED

DUPLICATE  
SENT 7.01.14

Date: 6/30/14  
 To: DAN  
 (Person's Name and Division)  
 From: MOHAMMED MWEI (443) 604-13127  
 (Your Name, Company Name and Telephone Number)  
 Subject: Project name RESIDENCE SUN ROOM ADDITION  
 Project site address 11790 DLD FREDERICK RD  
 Permit Number B13003923 SDP # \_\_\_\_\_  
 Other information pertinent to this project \_\_\_\_\_

Please check the attachments below that you are submitting with this transmittal:

- Letter of response to Howard County plan review code letter
- Revised plans and/or revised details: When submitting for a complete re-review, **duplicate sets shall be submitted.**
- Structural steel certification \* REVISED PLOT PLAN - CORRECTED
- Energy conservation calculations ORIENTATION OF HOUSE
- Certification for \_\_\_\_\_ (be specific).
- Copies of \_\_\_\_\_ (be specific).
- Two sets of single family dwelling model plans to be placed on permanent file: Model name and/or # \_\_\_\_\_
- Other \_\_\_\_\_

Is there anyone else that should be contacted regarding this project if there are questions?

If so, please list that person's name and telephone number below:

\_\_\_\_\_  
 (Person's name) TS (\_\_\_\_\_) \_\_\_\_\_  
60 (Telephone number)  
30

**PLEASE ASSURE ALL DOCUMENTS AND/OR REVISIONS ARE APPROPRIATELY SIGNED AND SEALED, IF NECESSARY, BY A LICENSED ARCHITECT OR ENGINEER. PLEASE BE ADVISED THAT INSUFFICIENT INFORMATION MAY RESULT IN THE DELAY OF REVIEW BY THE PLANS EXAMINER. THE DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS WILL CONTACT YOU IF THERE IS A PROBLEM. IN ADDITION, ONCE THE BUILDING PERMIT IS APPROVED BY THE PLAN REVIEW DIVISION AND ALL OTHER REQUIRED SIGNATORY AGENCIES, AND THE BUILDING PERMIT IS READY FOR ISSUANCE, THE PERMIT DIVISION WILL NOTIFY THE APPROPRIATE CONTACT PERSON FOR PERMIT PICK UP. ALL PERMIT STATUS INQUIRIES SHALL BE DIRECTED TO THE PERMIT DIVISION AT 410-313-2455. CODE RELATED QUESTIONS AND PLAN REVIEW INQUIRIES SHALL BE DIRECTED TO THE PLAN REVIEW DIVISION AT 410-313-2436. PLEASE ALLOW A MINIMUM OF FIVE (5) WORKING DAYS FOR ANY PLAN SUBMITTALS TO BE REVIEWED. THANK YOU.**

Received by AKH

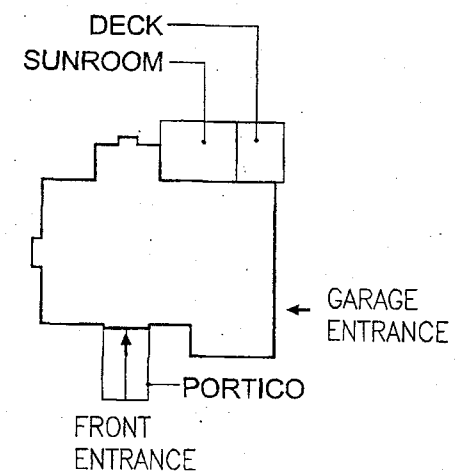
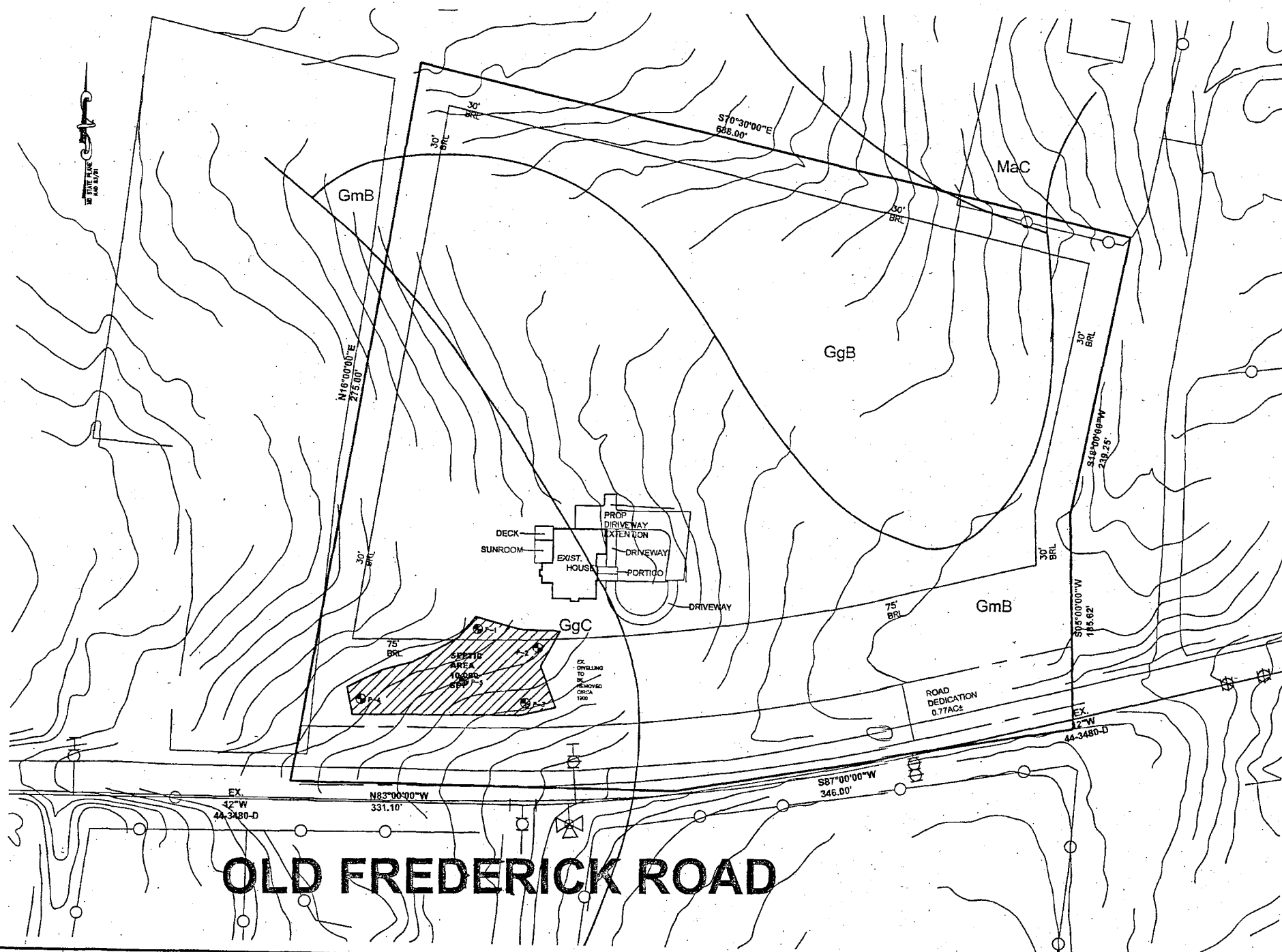
**REVISED PLOT PLAN  
(CORRECTED) - SEE  
PREVIOUS AMEND.  
REQUEST**

white: Plan Review Division  
 yellow: Applicant  
 pink: Permit Division

CC: DPZ Health  
 DED

# SAJID Residence - New Sunroom Addition

11790 Old Frederick Road  
Ellicott City, MD 21042



DRAWINGS INDEX:

- C-1.1 SITE PLAN/ COVER SHEET
- A-1.1 SUNROOM PLANS, ELEV, SEC.

**DUPLICATE SENT 07.01.14**  
**REVISED**

Date: 6/20/2014

Comments: B13003933

ADD SUNROOM, BALCONY,  
PORTICO, EXT. OF DRIVE

1 PLOT PLAN  
C-1 SCALE: 1" = 50'

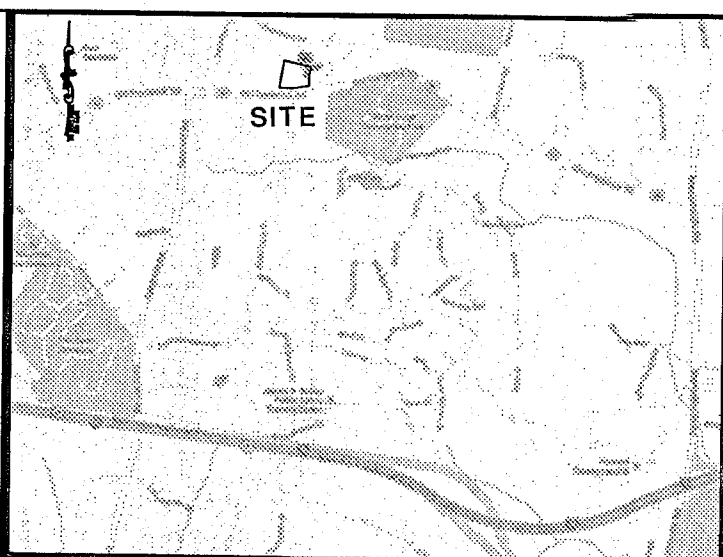
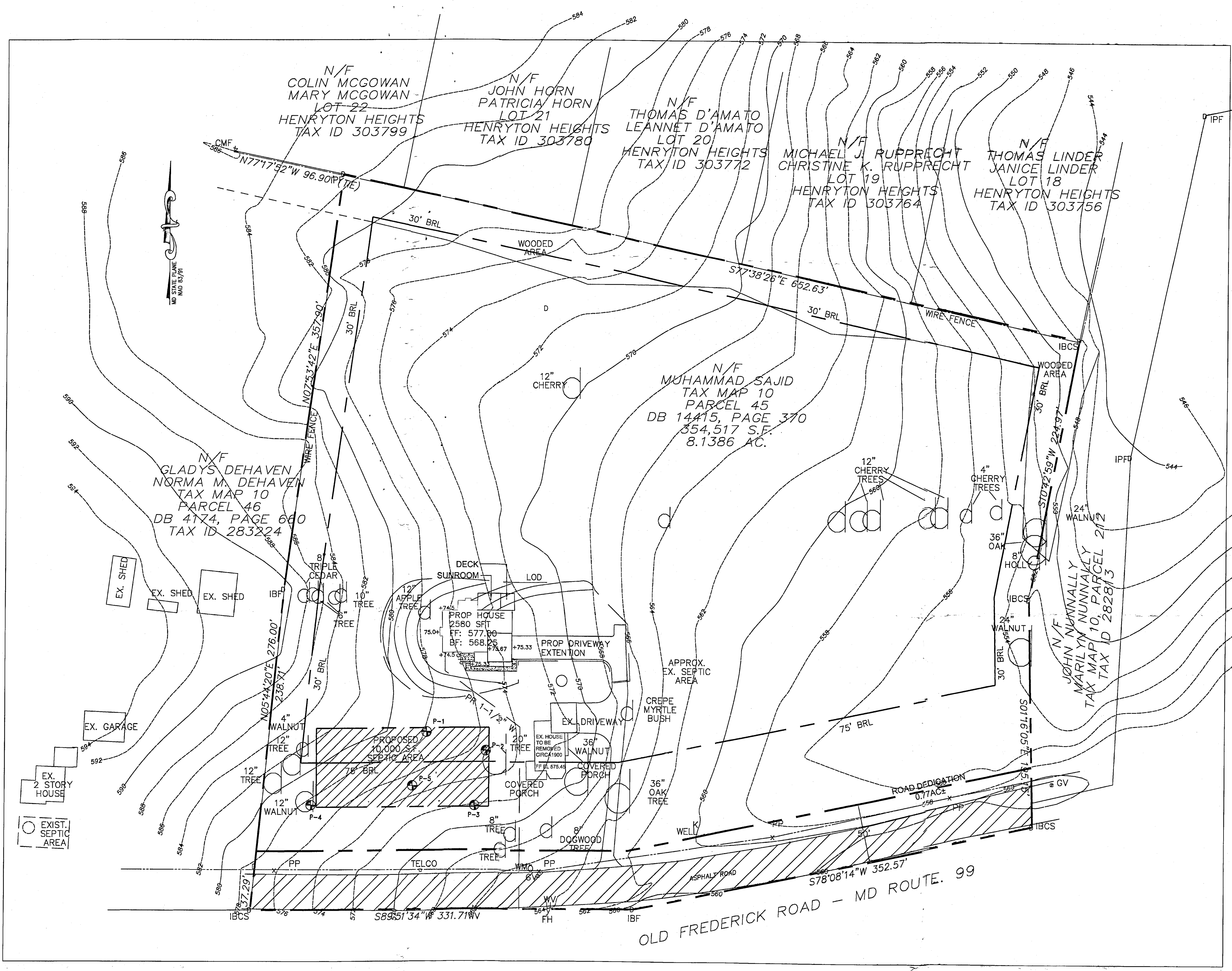
Mufti & Associates, Inc.  
6413 Windsor Mill Road  
Baltimore, Md 21207  
Phone: 443-604-3127

Sajid Residence  
Proposed Sunroom Addition  
11790 Old Frederick Road  
Ellicott City, Maryland

Revised:	Date:
REVISED	6/18/14
Drawn by:	CV 5/18/14
Designed by:	MM 5/18/14

Plot Title:  
**PLOT PLAN**  
Scale: AS NOTED

C-1.1



VICINITY MAP  
SCALE: 1" = 2000'

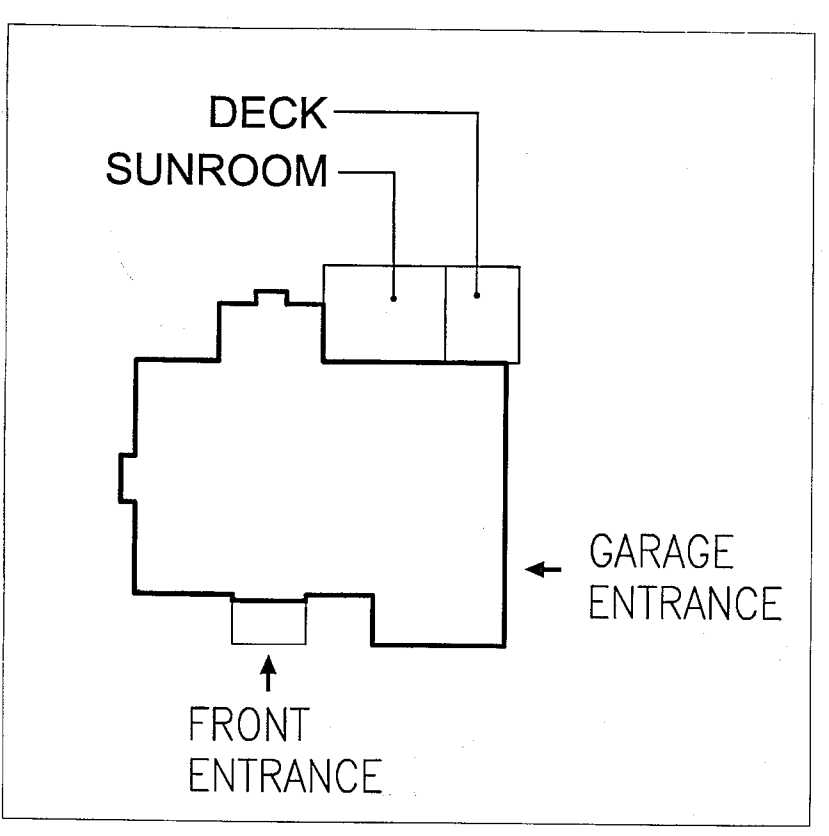
**GENERAL NOTES:**

1. SUBJECT PROPERTY IS CURRENTLY ZONED RR-DEO.
2. PROPERTY BOUNDARY IS BASED ON A DEED PLOT AND LOCATION IS APPROXIMATE ONLY.
3. TOPOGRAPHY SHOWN IS BASED ON FIELD RUN SURVEY PERFORMED IN SEP 2013.
4. BOUNDARY SHOWN IS BASED ON DEED MOSAIC.
5. CURRENT DWELLING IS NOT IN USE AND SHALL BE DEMOLISHED AFTER CONSTRUCTION OF NEW.
6. PROPOSED HOUSE WILL BE 5 BED ROOM SINGLE FAMILY HOME.
7. SUBJECT PROPERTY HAS PUBLIC WATER.
8. CURRENT HOUSE IS SERVED BY SEPTIC AND NEW PERC TESTS WERE PERFORMED AND OBSERVED BY STATE INSPECTOR ON SEPTEMBER 17, 2013. ALL TESTS PASSED.

**OWNER/DEVELOPER**  
MUHAMMAD SAJID  
11790 OLD FREDERICK ROAD  
MARRIOTTVILLE, MD 21104  
PHONE: 410-744-4313

**Mufti & Associates**  
6413 Windsor Mill Rd  
Baltimore, MD 21207

Phone: 410-570-1938  
Fax: 888-444-7248



**MUHAMMAD PROPERTY**  
11790 OLD FREDERICK ROAD  
TAX MAP 10 GRID 20 PARCEL 45  
3RD ELECTION DISTRICT

Revisions:	Date:
Drawn by:	RAS 6/29/14
Designed by:	RAS 6/29/14

Sheet Title:  
**SITE PLAN**

Scale: AS SHOWN

**C-1**

