



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: 7-22-15

Permit No.: B15003178

Building Address: 13590 MITCHELLS WAY
City: _____ State: _____ Zip Code: 21114
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: CLAYTON II
Section: II Area: _____ Lot: 14
Tax Map: 15 Parcel: 111 Grid: 7
Zoning: _____ Map Coordinates: _____ Lot Size: 14.40

Existing Use: _____
Proposed Use: _____
Estimated Construction Cost: \$ _____
Description of Work: _____
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 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 checked="" 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: SPRING HILL LLC
Address: _____
City: _____ State: _____ Zip Code: 21114
Phone: 410-422-4244 Fax: 410-750-3747
Email: _____
Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: SPRING HILL LLC
Address: _____
City: _____ State: _____ Zip Code: 21114
Phone: 410-422-4244 Fax: 410-750-3747
Email: _____

Contractor Company: SPRING HILL LLC
Contact Person: _____
Address: _____
City: _____ State: _____ Zip Code: 21114
License No.: B045177 Perm. # 990
Phone: 410-422-4244 Fax: 410-750-3747
Email: _____

Engineer/Architect Company: INVENION
Responsible Design Prof.: _____
Address: _____
City: SPRINGFIELD State: _____ Zip Code: 21120
Phone: 410-780-1111 Fax: 410-780-1111
Email: _____

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	<u>G15000243</u>
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: _____
Email Address: _____
Title/Company: _____

Print Name: _____
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>8/25/15</u>	<u>R. Bricker</u>

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

439 East Main Street
Westminster, MD 21157-5539



(410) 848-1790 • (301) 662-1799
FAX (410) 848-1791

Transmit To:

Bureau of Environmental Health
Howard County Health Department
8930 Stanford Boulevard
Columbia, MD 21046

Project Info:

LOT 14
CLOVERFIELD II
West Friendship, Maryland

B 1500 3178

Project No: 2013039

Date: Jul 15, 2015

We are Transmitting:

- | | | | | | |
|---|--|---|--|---|--------------------------|
| <input checked="" type="checkbox"/> Here with | <input type="checkbox"/> Originals | <input type="checkbox"/> Computer Media | <input type="checkbox"/> Shop Drawings | <input type="checkbox"/> Via Messenger | <input type="checkbox"/> |
| <input type="checkbox"/> Our | <input checked="" type="checkbox"/> Prints | <input type="checkbox"/> Project Manuals | <input type="checkbox"/> Payment Cert. | <input type="checkbox"/> Express Mail | <input type="checkbox"/> |
| <input type="checkbox"/> Your | <input type="checkbox"/> Copies | <input type="checkbox"/> Product Literature | <input type="checkbox"/> Change Order | <input type="checkbox"/> 1st Class Mail | <input type="checkbox"/> |

Sets	Type	Dwg No	Dated	Description
2	D Size Bond Copies	2013039	07/15/15	* Site Plan & Plot Plan for Bat Installation, Lot 14 Cloverfield 1- FLOORPLAN 2- O + M agreement

- | | | | | |
|---|--|--------------------------------------|---------------------------------------|--------------------------|
| <input type="checkbox"/> As Requested | <input type="checkbox"/> For Your Use | <input type="checkbox"/> For Filing | <input type="checkbox"/> For Approval | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> As Required | <input type="checkbox"/> For Your Review | <input type="checkbox"/> For Bidding | <input type="checkbox"/> As Discussed | <input type="checkbox"/> |

Remarks:

(Delivery by Catonsville Homes)

* REVISED PP DELIVERED TO HEALTH DEPT
7/17/15

If enclosures are not as noted,
please notify us immediately.

Copy To

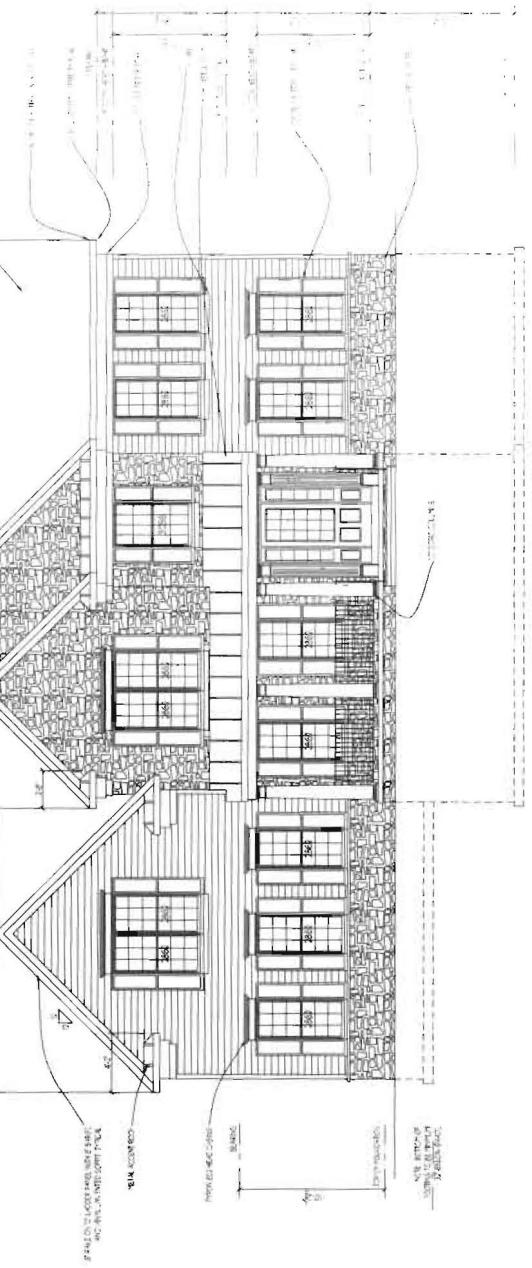
Linda D. Alexander

Project No.: C15.08
Date: 7/13
Sheet No. B

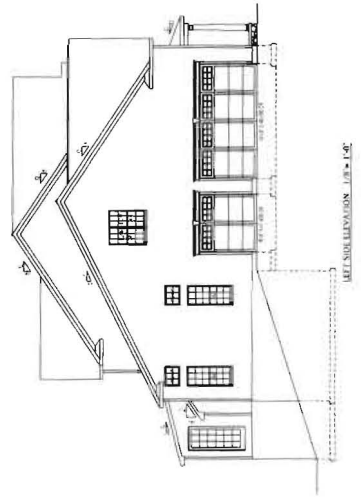
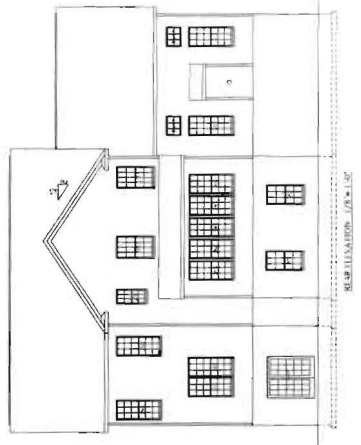
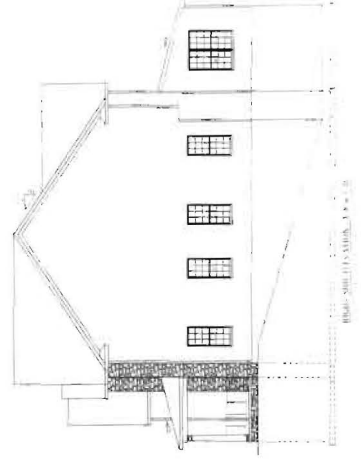
Drawing: ELEVATIONS
Project: CATONSVILLE HOMES
Location: GLENVIEW HEIGHTS

111 SOUTH 207
12 801 11 4319
Scale:

Plymouth Road Architects
 640 Plymouth Road, Baltimore, MD 21229, 410-788-0281
 plymouthroadarchitects.com



FRONT ELEVATION 1/4" = 1'-0"

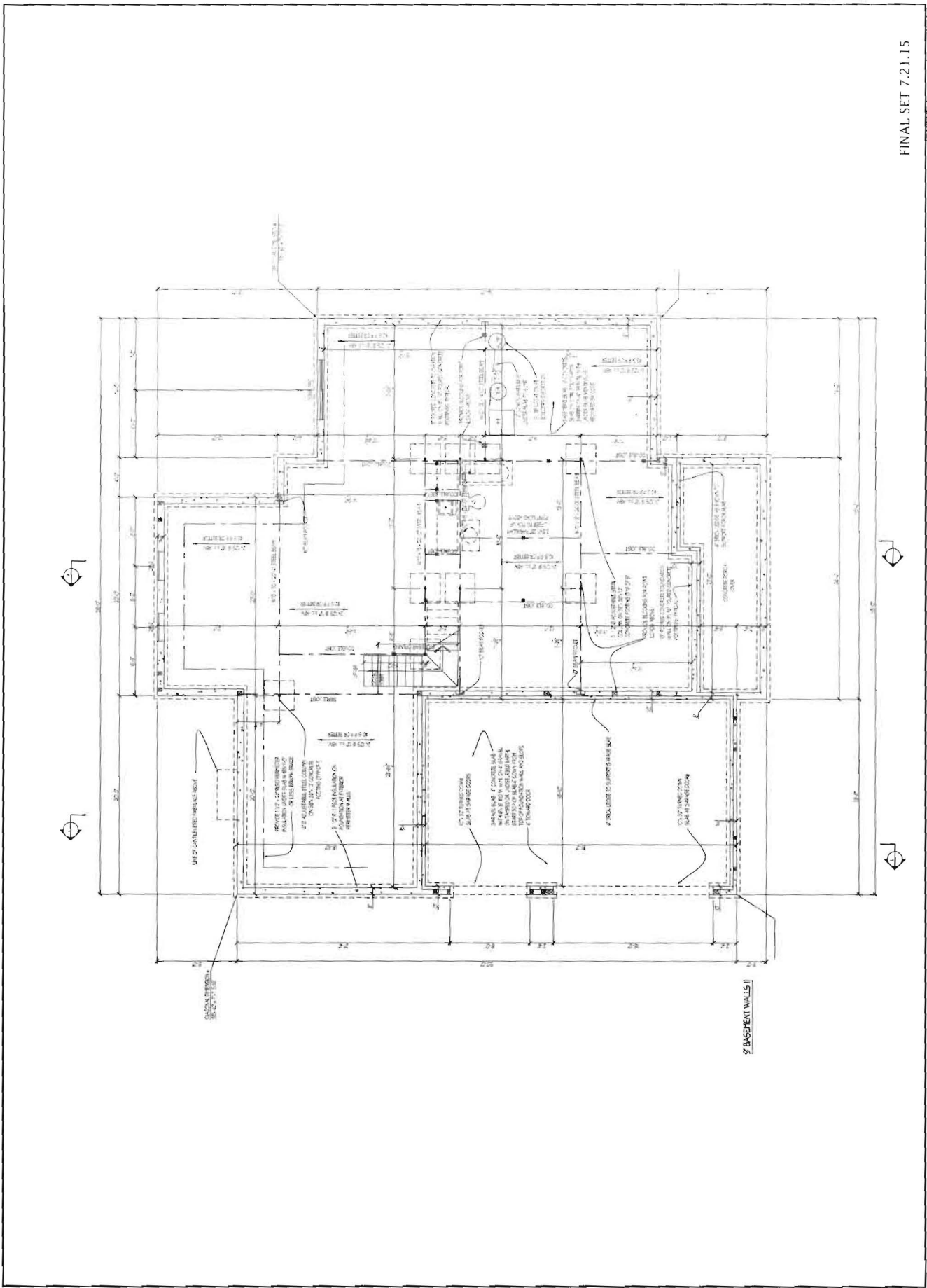


Project No: C15.08
Date: 7/13
Scale: 1/4" = 1'-0"

Drawing: BASEMENT/ FOUNDATION PLAN
Project: CATONSVILLE HOMES
LENGTONTON
CLEVERFIELD II LOT 14

Notes

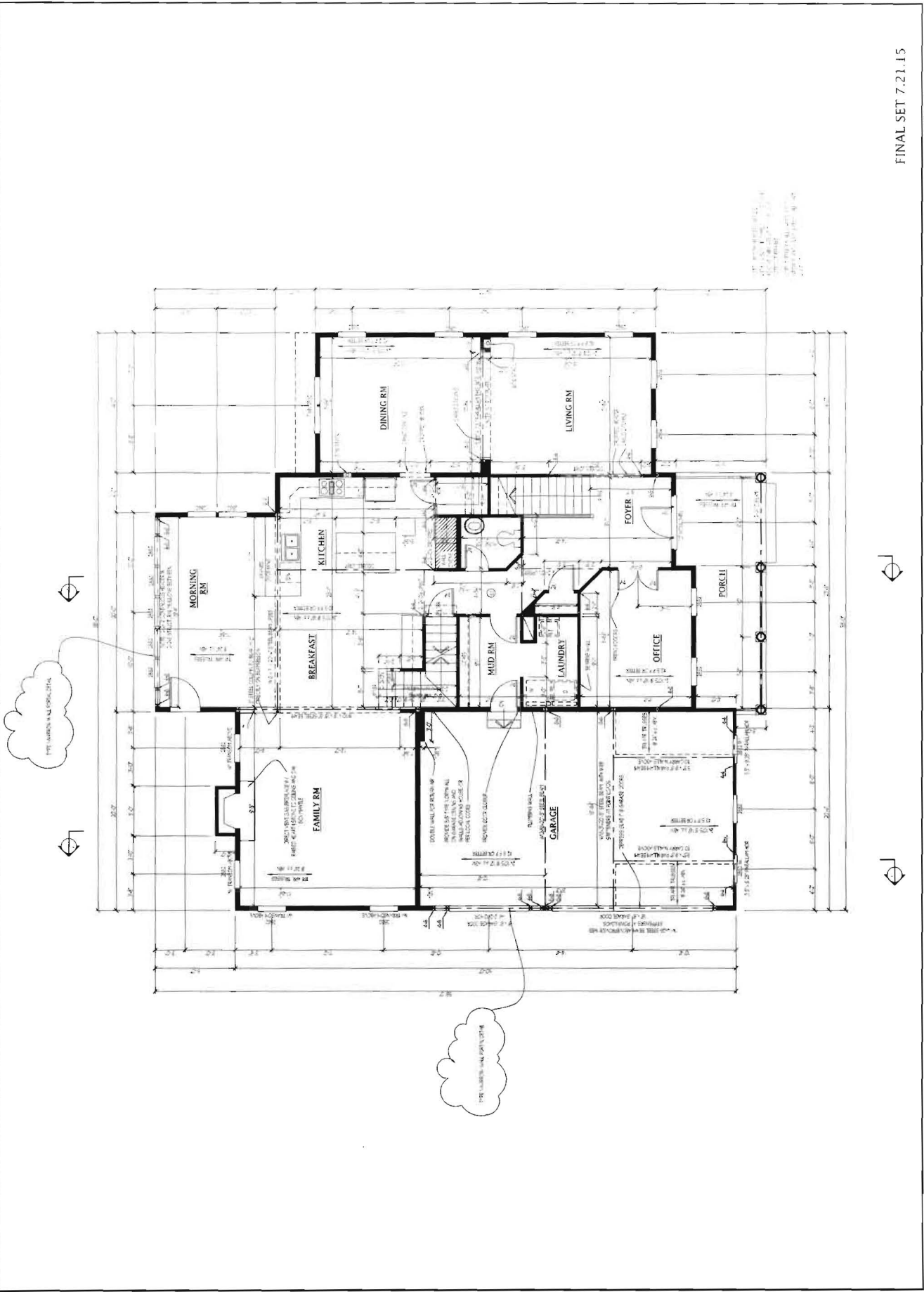
Plymouth Road Architects
640 Plymouth Road, Baltimore, MD 21229, 410-788-0281
PlymouthRoadArchitects.com

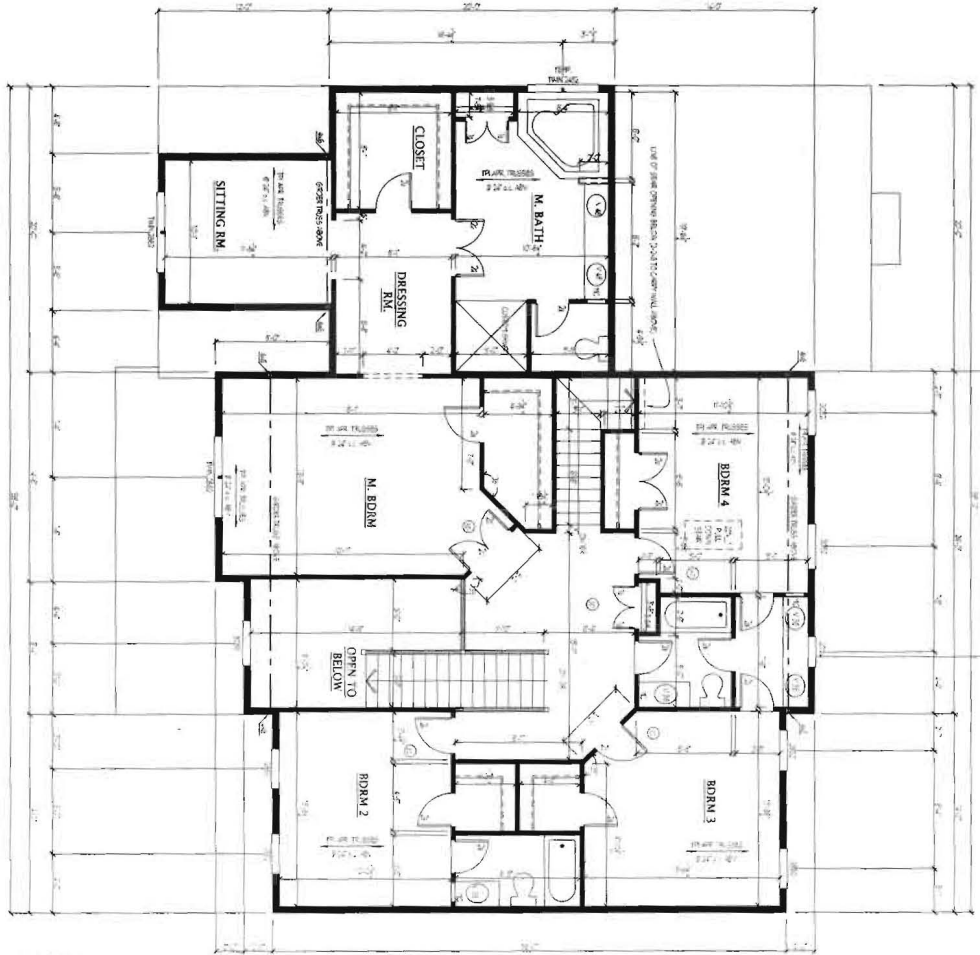


DATE: 7/15
PROJECT NO.: C15.08
DRAWING NO.: FIRST FLOOR PLAN
PROJECT: CATONSVILLE HOMES
LOCATION: CATONSVILLE, MD
OWNER: CATONSVILLE HOMES

Notes:
Project: CATONSVILLE HOMES
Location: CATONSVILLE, MD

Plymouth Road Architects
640 Plymouth Road, Baltimore, MD 21279 - 410-758-0281
PlymouthRoadArchitects.com





ALL DIMENSIONS ARE TO FACE UNLESS NOTED OTHERWISE.
 ALL WALLS ARE 1/2\"/>

FINAL SET 7.21.15

4

Project No.: C15.08
 Date: 7/15
 Scale: 1/4"=1'-0"

Drawing: SECOND FLOOR PLAN
 Project: CATONSVILLE HOMES
 LEXINGTON
 CLOVERBUSH LANE 201, 14

Notes:

Plymouth Road Architects
 640 Plymouth Road, Baltimore, MD 21229, 410-788-0281
 PlymouthRoadArchitects.com