



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: 11449 Hunt Crossing Lt
 City: ELLICOTT State: MD Zip Code: 21042
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Hornetwood Cr.
 Section: _____ Area: _____ Lot: 80
 Tax Map: 29 Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: 60,548 sq ft

Property Owner's Name: Diana Mikrait
 Address: 11449 Hunt Crossing
 City: ELLICOTT State: MD Zip Code: 21042
 Phone: 410-703-9225 Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Scott Sykes
 Address: 2808 Baldwin Mill Rd
 City: Baldwin State: MD Zip Code: 21013
 Phone: 410-241-1965 Fax: 410-692-9791
 Email: Silverchall@Contractor.net

Contractor Company: Silverchall Contracting
 Contact Person: Scott Sykes
 Address: 2808 Baldwin Mill Rd
 City: Baldwin State: MD Zip Code: 21013
 License No.: 36291
 Phone: 410-241-1965 Fax: 410-692-9791
 Email: Silverchall@Contractor.net

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

Existing Use: Single Family
 Proposed Use: Single Family
 Estimated Construction Cost: \$ 70,000.00
 Description of Work: Finish more of the basement, treating of the corner room, gym, wet bar
 Occupant/Tenant Name: _____
 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 type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
	<input type="checkbox"/> Slab on Grade	
Construction type:		
<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:	
<u>Finish basement</u>	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	

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

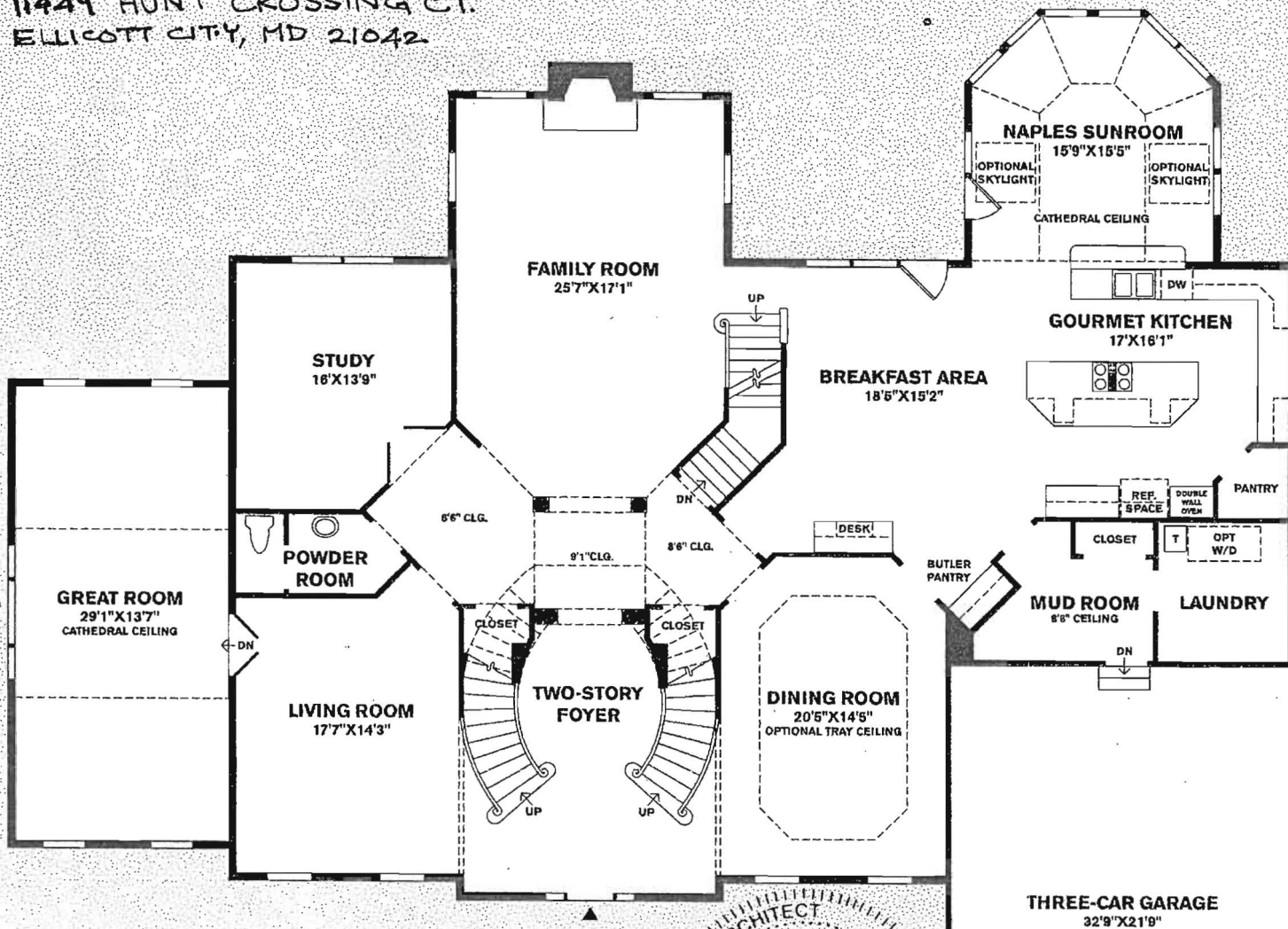
Applicant's Signature: Scott Sykes Print Name: Scott Sykes
 Email Address: Silverchall@Contractor.net Date: 3-8-17
 Title/Company: Dinner

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:	\$ 25.00
Building Officials			Rear:	\$ 100.00
PSZA (Zoning)			Side:	\$ 10.00
PSZA (Engineering)			Side St.:	
Health		<u>39145 [Signature]</u>	All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No	Excise Tax \$
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	PSFS \$
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START			Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No	Guaranty Fund \$
			Lot Coverage for New Town Zone:	Add'l per Fee \$
			SDP/Red-line approval date:	Total Fees \$ 135.00
				Sub-Total Paid \$
				Balance Due \$
				Check #

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

11449 HUNT CROSSING CT.
 ELLICOTT CITY, MD 21042

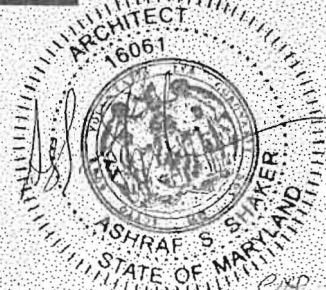


FIRST FLOOR PLAN

NO SCALE

AS-BUILT / EXISTING

Ashraf Shaker, Architect



3/8/2017

THREE-CAR GARAGE
 32'9" X 21'8"

APPROVED

WALK-THRU BUILDING PERMIT

BP# _____
 APP. SAND Beerwald DATE: 3-9-17
 DESC. OF WORK: First Basement
Approved As Shown