



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: 4030 Candle Light Drive
City: Dayton State: MD Zip Code: 21036
Suite/Apt. # _____ SDP/WP/BA #: *
Census Tract: _____ Subdivision: Castleberry at Ten Oaks
Section: 2 Area: _____ Lot: 4 13
Tax Map: 22 Parcel: 90 Grid: 19
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: _____
Proposed Use: Single Family Dwelling
Estimated Construction Cost: \$ 20,000.00
Description of Work: In-ground pool 41'x21' w/ pool 910'x2'
Deck + sidewalk fence
deck by others
Occupant or Tenant: _____
Was tenant space previously occupied? Yes No
Contact Name: Barbara Schaeffer
Address: 7905 Solley Rd
City: Glen Burnie State: MD Zip Code: 21060
Phone: 410-733-0433 Fax: 410-360-9309
Email: allaboutpermits@hotmail.com

Property Owner's Name: Michael Skandalis
Address: 4030 Candle Light Drive
City: Dayton State: MD Zip Code: 21036
Phone: _____ Fax: _____
Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: All About Permits LLC Barbara Schaeffer
Address: 7905 Solley Rd
City: Glen Burnie State: MD Zip Code: 21060
Phone: 410-733-0433 Fax: 410-360-9309
Email: allaboutpermits@hotmail.com

Contractor Company: Leisure Contracting LLC
Contact Person: Glenn Lail
Address: 210 Clyde Ave
City: Baltimore State: MD Zip Code: 21227
License No.: 85655
Phone: 443-790-3005 Fax: _____
Email: _____

Engineer/Architect Company: _____
Responsible Design Prof.: _____
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: <u>X</u>	
	2 nd floor: <u>X</u>	
Area of construction (sq. ft.):	Basement: <u>'</u>	
	<input type="checkbox"/> Finished Basement	
Use group:	<input 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	

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 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

Barbara Schaeffer
Print Name

allaboutpermits@hotmail.com
Email Address

11-1-2016
Date

Owner / All About Permits
Title/Company

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>11/2/016 RB</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

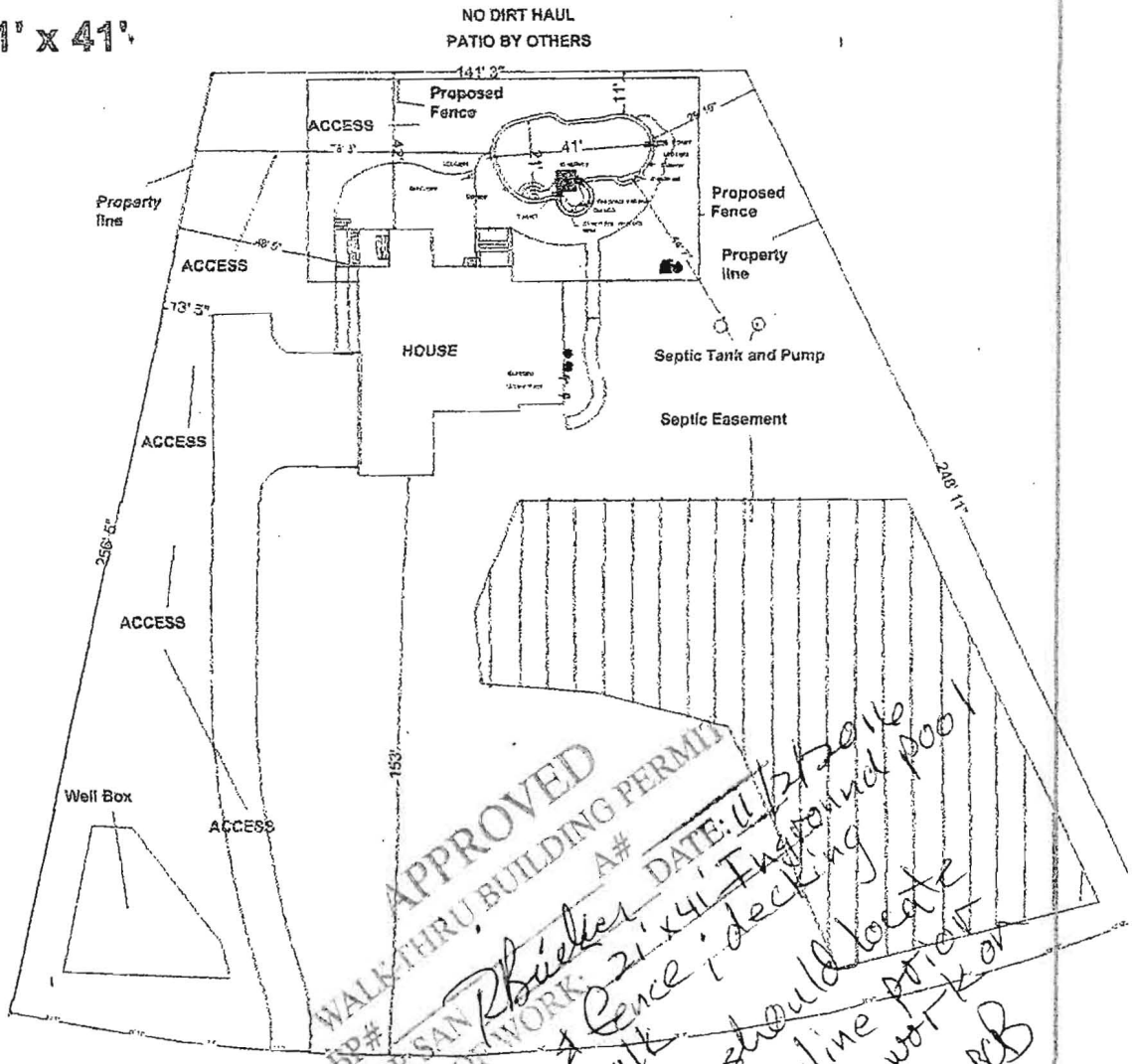
Gold: SHA

Leisure Contracting LLC
 210 Clyde Ave
 Baltimore, MD 21227
 410-242-2264
 MHIC: 85655

Michael & Jackie Skandalis
 4030 Candle Light Drive
 Dayton, MD 21036

Proposed Pool: 21' x 41'

SCALE: 1" = 50'



APPROVED
 WALK-THRU BUILDING PERMIT
 BR# _____ A# _____
 DATE: 11/27/16
 DESC. OF WORK: 21' x 41' In-ground pool
Equip. & sidewalk
 * Contractor should locate house sewer line prior to beginning work on sidewalk. PCB