



Health

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: 13581 Mitchells Way
City: West Friendship State: MD Zip Code: 21790
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: 1
Tax Map: 15 Parcel: 119 Grid: 7
Zoning: _____ Map Coordinates: _____ Lot Size: 1.02 AC

Property Owner's Name: Dusmantha Tennakoon
Address: 13581 Mitchells Way
City: West Friendship State: MD Zip Code: 21790
Phone: _____ Fax: _____
Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: Michelle Clancy
Address: 10 Box 310
City: Comptche State: MD Zip Code: 21228
Phone: 410 610 7574 Fax: _____
Email: _____

Existing Use: SFD
Proposed Use: SFD w/ Screened Porch & Open Deck
Estimated Construction Cost: \$ 26,000 Open Deck
Description of Work: 12x20 Screened Porch
8x20 open deck w/ 2 4x4
Landing & Stairs
Occupant/Tenant Name: Owner
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Contractor Company: North American Deck
Contact Person: Bob Lowrey
Address: 312 Highland Terrace
City: Prince Georges State MD Zip Code: 20678
License No.: 92404
Phone: 410 535 1960 Fax: _____
Email: _____

Engineer/Architect Company: Contractor
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:	
	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	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>	
<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	
Electric:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input checked="" 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 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: [Signature]
Email Address: _____
Title/Company: _____

Print Name: Michelle Clancy
Date: 3/29/17

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>3/30/17</u>	<u>[Signature]</u>

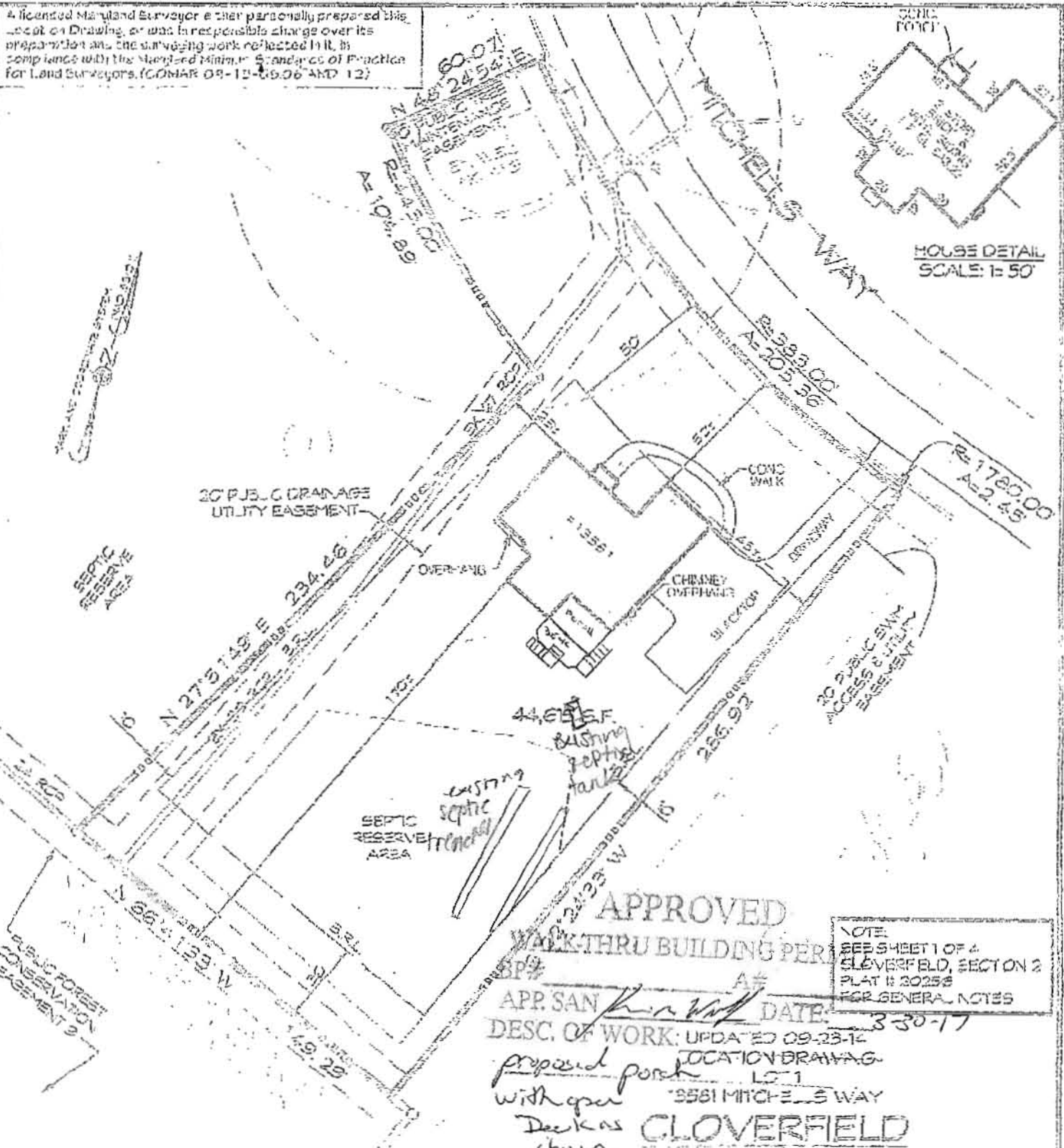
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

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	\$
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

A Licensed Maryland Surveyor either personally prepared this
 Plot or Drawing, or was in responsible charge over its
 preparation and the surveying work reflected in it, in
 compliance with the Maryland Minimum Standards of Practice
 for Land Surveyors, (COMAR 09-13-06.06 AND 12)



HOUSE DETAIL
 SCALE: 1" = 50'

APPROVED

WALK-THRU BUILDING PER
 ASP#

NOTE:
 SEE SHEET 1 OF 4
 CLOVERFIELD, SECTION 2
 PLAT # 20258
 FOR GENERAL NOTES

APR. SAN *for walk thru* DATE: *3-30-17*
 DESC. OF WORK: UPDATED 09-23-14

proposed porch LOCATION DRAWING
with open LOT 1
decks as 5581 MITCHELLS WAY
shown **CLOVERFIELD**

SECTION II

3RD ELECTION DISTRICT - HOWARD COUNTY, MD.
 TAX MAP 15 BLOCK 7 PARCEL 119
 RECORDED MDR PLAT No. 20257



DRAWN BY:	JMB
DESIGN BY:	
REVIEW BY:	DEM
DATE:	09-23-14
SCALE:	1" = 50'
JOB NO.:	2018032
SHEET:	1 OF

I hereby certify that I have surveyed the property shown herein
 for the sole purpose of locating the improvements. This plan is
 a benefit to the customer only in so far as it is required by a
 lender or a title insurance company or to agents in connection
 with contemplated transfer, financing or refinancing. It is not
 to be relied on for the establishment of boundary easements or
 right-of-way lines for any reason, such as the location of fences,
 garages, buildings, or other existing or future improvements
 of lands or buildings to property lines and to the nearest foot.
 (1) unless otherwise noted

By: *[Signature]* Date: *[Date]*
 Dennis E. Meckley Property Line Survey, No. 0844
 License expires March 29, 2018

437 East Main Street, Westminster, MD 21157-8888
 (410) 848-7800 FAX (410) 848-1921