



# 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: 12180 Hall Shop Rd  
 City: Clarkville State: MD Zip Code: 21029  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: Clarkville  
 Section: \_\_\_\_\_ Area: 1.28 AC Lot: \_\_\_\_\_  
 Tax Map: 0041 Parcel: 0133 Grid: 03001  
 Zoning: RR-DEO Map Coordinates: \_\_\_\_\_ Lot Size: 1.28 AC

Property Owner's Name: James Murphy  
 Address: 12180 Hall Shop Rd  
 City: Clarkville State: MD Zip Code: 21029  
 Phone: 301-252-1665 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated herein)  
 Applicant's Name: Gerardo Perez  
 Address: 501 McCormick Dr Ste D-F  
 City: Glen Burnie State: MD Zip Code: 21061  
 Phone: 410-760-1919 Fax: \_\_\_\_\_  
 Email: GFPEREZ@live.com

Existing Use: Covered Porch  
 Proposed Use: Sunroom  
 Estimated Construction Cost: \$ 22,000  
 Description of Work: Install windows with screens on an ex. covered porch  
 Occupant/Tenant Name: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Contractor Company: Great Day Improvements  
 Contact Person: Sparkle Fox  
 Address: 501 McCormick Dr Ste D-F  
 City: Glen Burnie State: MD Zip Code: 21061  
 License No.: 109193  
 Phone: 410-760-1919 Fax: \_\_\_\_\_  
 Email: Sparkle.Fox@greatdayimprovements.com

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 <sup>st</sup> floor:	
	2 <sup>nd</sup> floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	<b>Multi-family Dwelling</b>	
<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 type="checkbox"/> No	Roof:	
<b>Roadside Tree Project Permit #</b>	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

<b>Utilities</b>	
Electric:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Heating System</b>	
<input 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 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: Gerardo Perez  
 Email Address: GFPEREZ@live.com  
 Title/Company: \_\_\_\_\_

Print Name: Gerardo Perez  
 Date: 5/10/17

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>5/18/17</u>

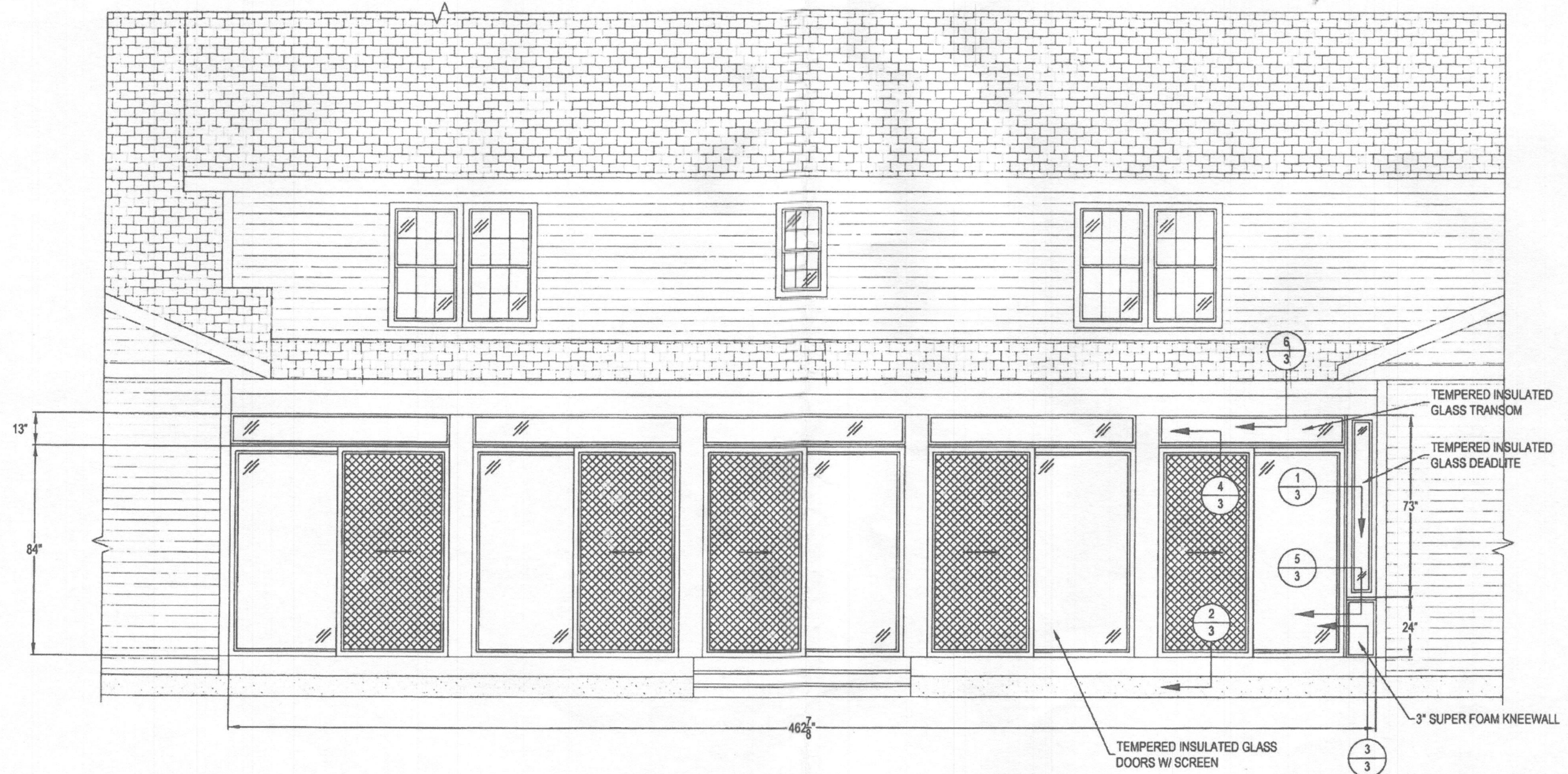
Is Sediment Control approval required for issuance?  Yes  No  
 CONTINGENCY CONSTRUCTION START

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	#



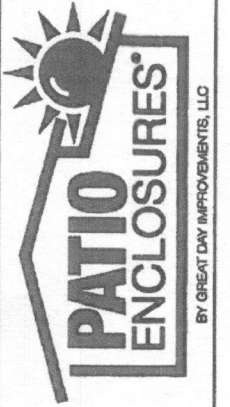
DRAWING TO SCALE IF THIS DIMENSION MEASURES 3"



ELEVATION - "A" WALL

NOTES:

1. ALLVIEW (CA5) ROOM; WHITE IN COLOR
2. CONSTRUCT ENCLOSURE ON EXISTING CONCRETE FOUNDATION
3. NO HEAT OR PLUMBING BY GDI, ELECTRICAL BY GDI
4. GUTTERS AND DOWNSPOUTS BY GDI
5. ALL CONCRETE TO BE 3000 PSI MINIMUM
6. ALL LUMBER TO BE SPF #2 OR BETTER, PRESSURE TREATED WHERE REQUIRED
7. WHERE REQUIRED, METALS IN CONTACT WITH PRESSURE TREATED LUMBER MUST BE ADEQUATELY PROTECTED.
8. ROOM CONSIDERED AS NON-CONDITIONED SPACE, EXEMPT FROM ENERGY EFFICIENCY REQUIREMENTS (PER CHAPTER 11 OF IRC)



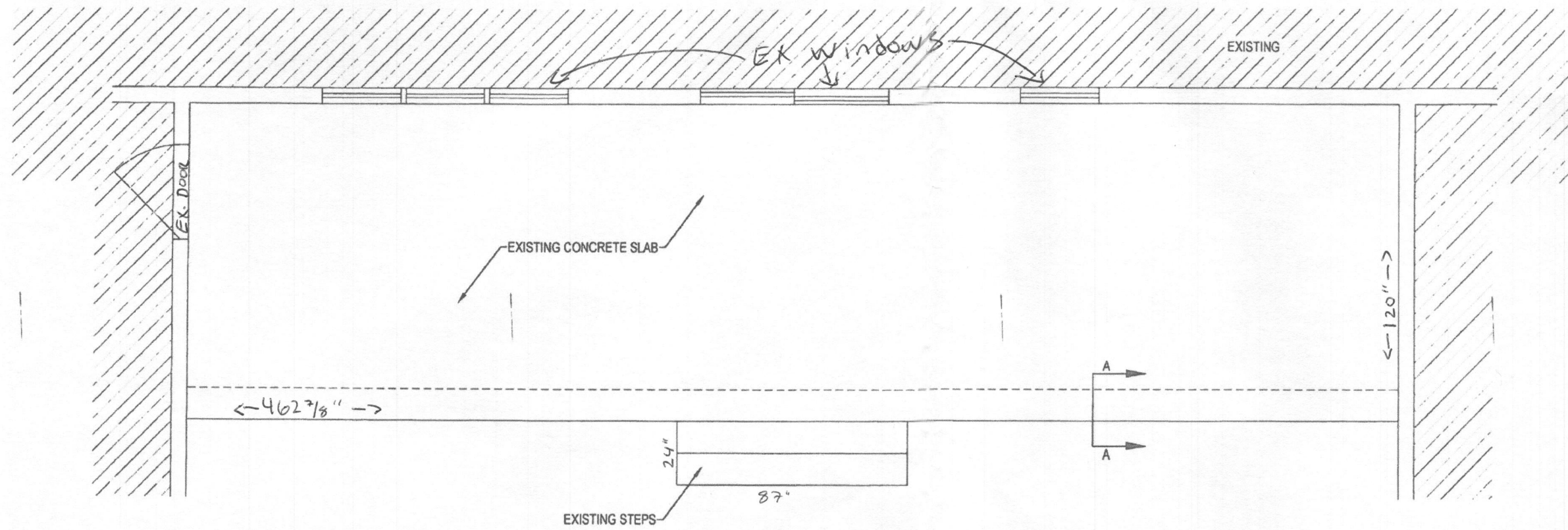
LOCATION  
 GDI - BALTIMORE  
 501 McCORMICK DRIVE, SUITES D-F  
 GLEN BURNIE, MD 21061  
 410-760-1919

JIM & MONICA MURPHY  
 12180 HALL SHOP RD  
 CLARKSVILLE, MD 21029  
 JOB #40016

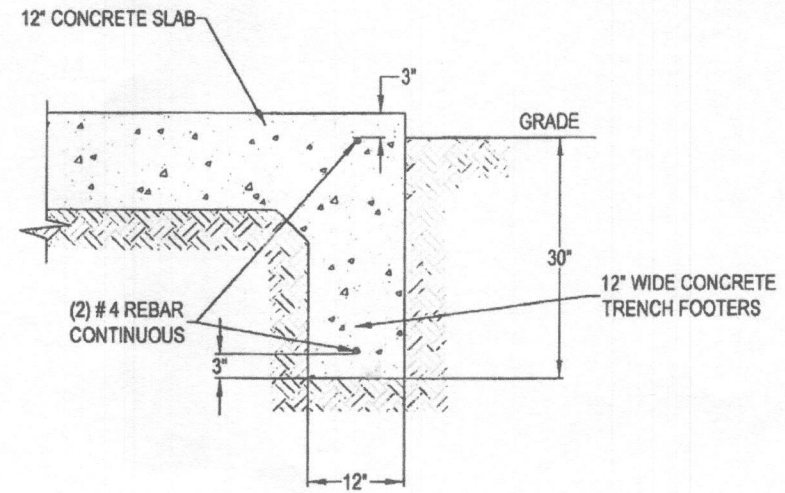
DATE  
 4/21/17  
 DRAWN  
 RDN  
 SCALE  
 1/4" = 1'-0"  
 SHEET  
 1 OF 3

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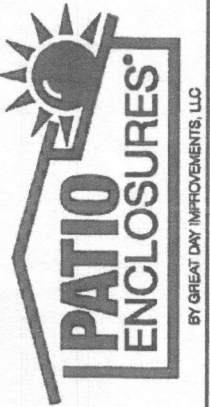
DRAWING TO SCALE IF THIS DIMENSION MEASURES 3"



EXISTING FOUNDATION PLAN  
SCALE: 1/4" = 1'-0"



SECTION A-A  
SCALE: 1/2" = 1'-0"



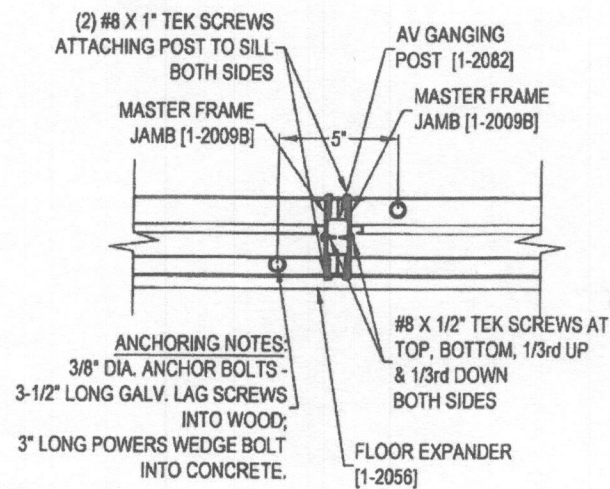
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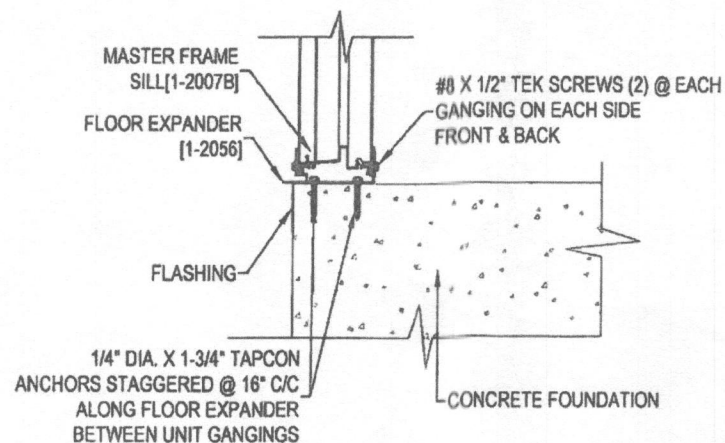
DATE	4/21/17
DRAWN	RDN
SCALE	1/4" = 1'-0"
SHEET	2 OF 3

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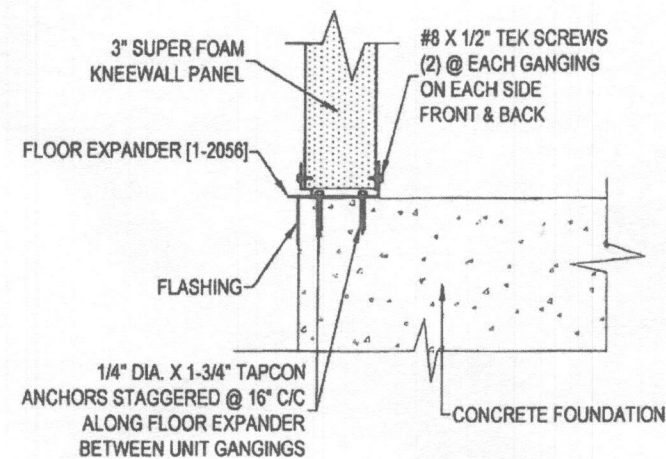
DRAWING TO SCALE IF THIS DIMENSION MEASURES 3"



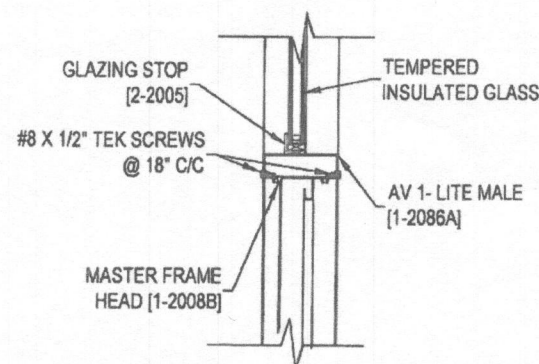
1 PLAN VIEW OF MASTER FRAME JAMBS  
3 CONNECTION @ GANGING POST



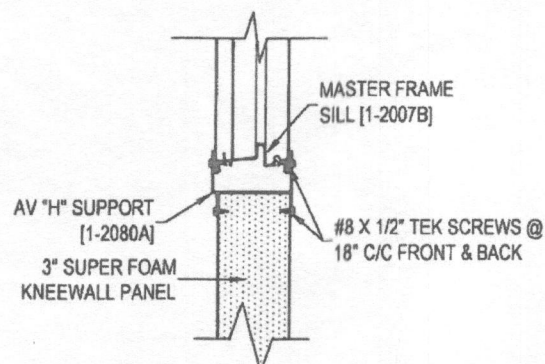
2 SECTION THROUGH MASTER FRAME SILL  
3 CONNECTION @ CONCRETE FOUNDATION



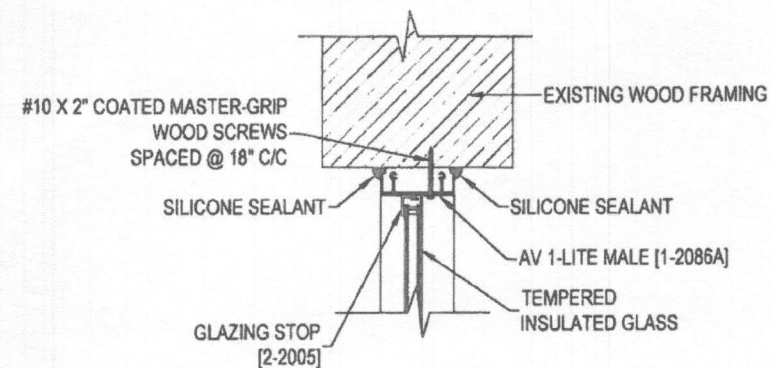
3 SECTION THROUGH FOAM KNEEWALL  
3 CONNECTION @ CONCRETE FOUNDATION



4 SECTION THROUGH MASTER FRAME HEAD  
3 CONNECTION @ GLASS TRANSOM



5 SECTION THROUGH MASTER FRAME SILL  
3 CONNECTION @ FOAM KNEEWALL



6 SECTION THROUGH GLASS TRANSOM / DEAD LITE  
3 CONNECTION @ EXISTING HEADER



BY GREAT DAY IMPROVEMENTS, LLC

LOCATION

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1 1/2" = 1'-0"  
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3 OF 3

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