



# Building Permit Application

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Permits: 410-313-2455  
www.howardcountymd.gov

DILP 2017 APR 18 AM 10:11

Date Received: \_\_\_\_\_

Permit No.: **B17001508**

Building Address: 9671 Oak Hill Drive  
 City: Ellicott City State: MD Zip Code: 21042  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: 0006  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 1.704 ac  
 Tax Map: 0630 Parcel: 0368 Grid: 0003  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 30,753 SF

Existing Use: SFD  
 Proposed Use: SFD  
 Estimated Construction Cost: \$ 10,000.00  
 Description of Work: Install 219' of 4'H/6'H vinyl fence with (1) 4'x4H walk gate - (1) 10'x4'H drive gate all in rear  
 Occupant/Tenant Name: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: Bradly Sheard  
 Address: 9671 Oak Hill Dr.  
 City: Ellicott City State: MD Zip Code: 21042  
 Phone: 443-818-4547 Fax: \_\_\_\_\_  
 Email: bradshoord@comcast.net

Applicant's Name & Mailing Address, (if other than stated herein)  
 Applicant's Name: Gabriele Council  
 Address: 3909 Pinadala Dr.  
 City: Nottingham State: MD Zip Code: 21236  
 Phone: 443-760-5822 Fax: \_\_\_\_\_  
 Email: gabrielecouncil@msn.com

Contractor Company: Freedom Fence Inc  
 Contact Person: Candy Newman  
 Address: 514 Back River Neck Rd  
 City: Essex State: MD Zip Code: 21221  
 License No.: 87413  
 Phone: 443-271-6847 Fax: 410-686-2139  
 Email: info@freedomfenceanddeck.com

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

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:	
Area of construction (sq. ft.):	2 <sup>nd</sup> floor:	
Use group:	Basement:	
	<input type="checkbox"/> Finished Basement	
	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
	<input type="checkbox"/> Slab on Grade	
<b>Construction type:</b>	<b>Multi-family Dwelling</b>	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	No. of efficiency units:	
<input type="checkbox"/> Masonry	No. of 1 BR units:	
<input type="checkbox"/> Wood Frame	No. of 2 BR units:	
<input type="checkbox"/> State Certified Modular	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 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.

Gabriele Council  
 Applicant's Signature  
gabrielecouncil@msn.com  
 Email Address  
Permits by Gabriele  
 Title/Company

Gabriele Council  
 Print Name  
4/18/17  
 Date  
mail to contractor

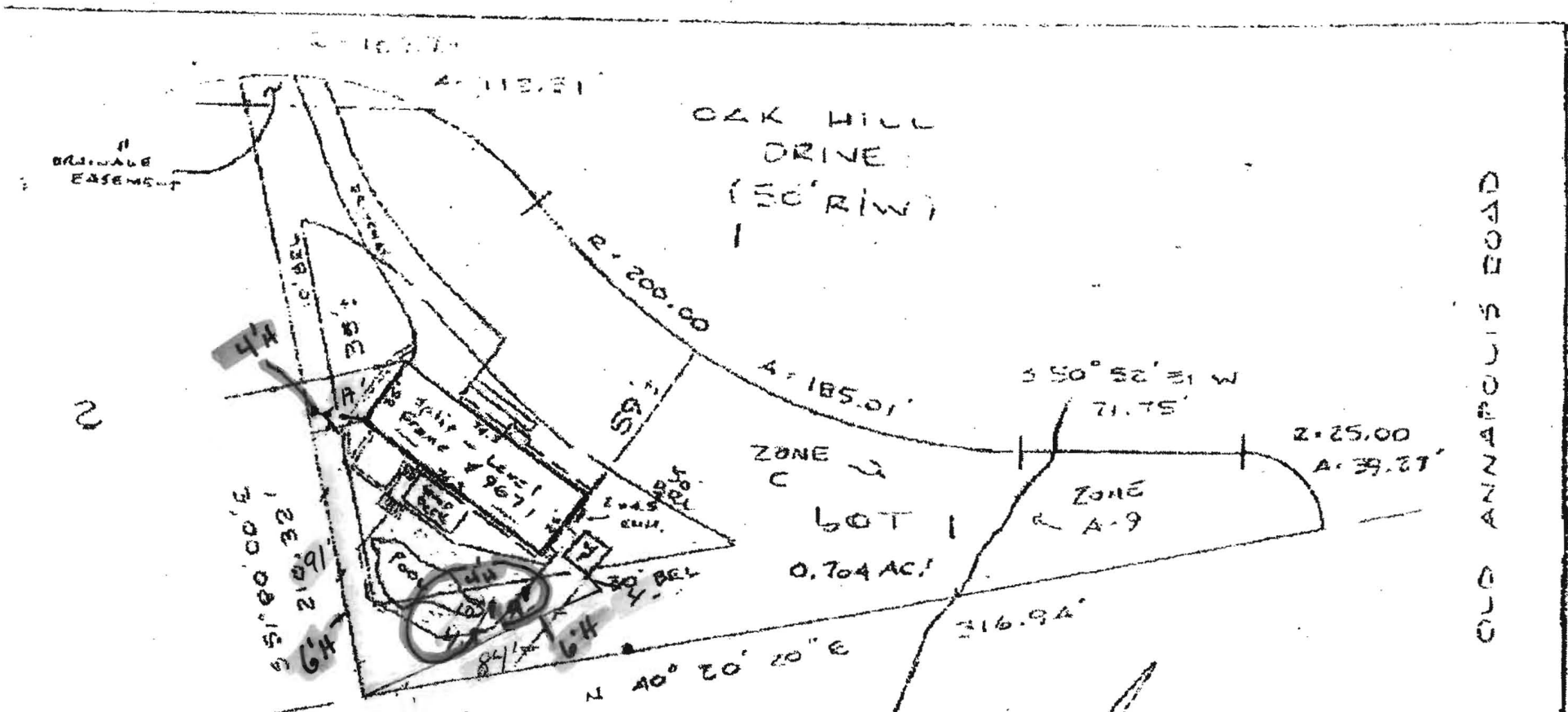
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
\*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		

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	\$	55.00
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	
Guaranty Fund	\$	
Add'l per Fee	\$	
Total Fees	\$	
Sub- Total Paid	\$	
Balance Due	\$	
Check	#	1966



Subject property is shown in Zone A9-C  
 on the National Flood Insurance Program  
 Flood Insurance Rate Map of HOWARD  
 County, Maryland. Panel 28 of 45  
 Community Panel 240044-0028 B  
 Effective Date: DEC 4, 1986

This is to certify that I have surveyed the property  
 known as LOT 1  
 9671 OAK HILL DRIVE  
 Sheet of recorded PLAT NO. 4278 among the  
 Land Records of HOWARD County, Maryland for the  
 purpose of locating the improvements thereon.

THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE  
 CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS  
 NOT TO BE USED TO ESTABLISH PROPERTY LINES.



LOCATION SURVEY  
 9671 OAK HILL DRIVE  
 OAK HILL ESTATES  
 5th ELECTION DISTRICT  
 HOWARD COUNTY, MD

NTI ASSOCIATES, INC.  
 16205 Old Frederick Road  
 Mt. Airy, Maryland 21771

Scale	1" = 50'
Date	MARCH 5, 1992
Field By	JUM
Drawn By	JUM



# Building Permit Application

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Permits: 410-313-2455  
www.howardcountymd.gov

DLP 2017 APR 18 PM 03:3

Date Received: \_\_\_\_\_

Permit No.: **B17001509**

Building Address: **9671 Oak Hill Drive**  
City: **Ellicott City** State: **MD** Zip Code: **21042**  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: **0000**  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: **L704AR**  
Tax Map: **0030** Parcel: **0368** Grid: **0003**  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: **30,753 SF**

Property Owner's Name: **Bradly Sheard**  
Address: **9671 Oak Hill Dr.**  
City: **Ellicott City** State: **MD** Zip Code: **21042**  
Phone: **443 8120 4547** Fax: \_\_\_\_\_  
Email: **bradshoard@comcast.net**

Applicant's Name & Mailing Address, (if other than stated herein)  
Applicant's Name: **Gabriele Council**  
Address: **3909 Pinedale Dr.**  
City: **North Hyattsville** State: **MD** Zip Code: **21236**  
Phone: **443 760 5826** Fax: \_\_\_\_\_  
Email: **gabriele.council@msn.com**

Contractor Company: **Freedom Fence Inc**  
Contact Person: **Candy Newman**  
Address: **414 Back River Neck Rd**  
City: **Essex** State: **MD** Zip Code: **21221**  
License No.: **87413**  
Phone: **443-271-6894** Fax: **410-686-2139**  
Email: **info@freedomfenceanddeck.com**

Existing Use: **SFD**  
Proposed Use: **SFD**  
Estimated Construction Cost: \$ **20,087.00**  
Description of Work: **Replace existing Decks**  
**(a) 225' of 0'4" H w 8" steps**  
**(b) 140' groundlevel all PVC Wolf**  
Occupant/Tenant Name: **1 step**  
Was tenant space previously occupied?  Yes  No  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ 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 <sup>st</sup> floor:	
Area of construction (sq. ft.):	2 <sup>nd</sup> floor:	
Use group:	Basement:	
	<input type="checkbox"/> Finished Basement	
	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
	<input type="checkbox"/> Slab on Grade	
<b>Construction type:</b>	<b>Multi-family Dwelling</b>	
<input type="checkbox"/> Reinforced Concrete	No. of efficiency units:	
<input type="checkbox"/> Structural Steel	No. of 1 BR units:	
<input type="checkbox"/> Masonry	No. of 2 BR units:	
<input type="checkbox"/> Wood Frame	No. of 3 BR units:	
<input type="checkbox"/> State Certified Modular	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 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 checked="" 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: **Gabriele Council**  
Print Name: **Gabriele Council**  
Email Address: **gabrielecouncil@msn.com**  
Date: **4/18/17**  
Title/Company: **Permits by Gabriele**

Print Name: **Gabriele Council**  
Date: **4/18/17**  
**\* mail to Contractor \***

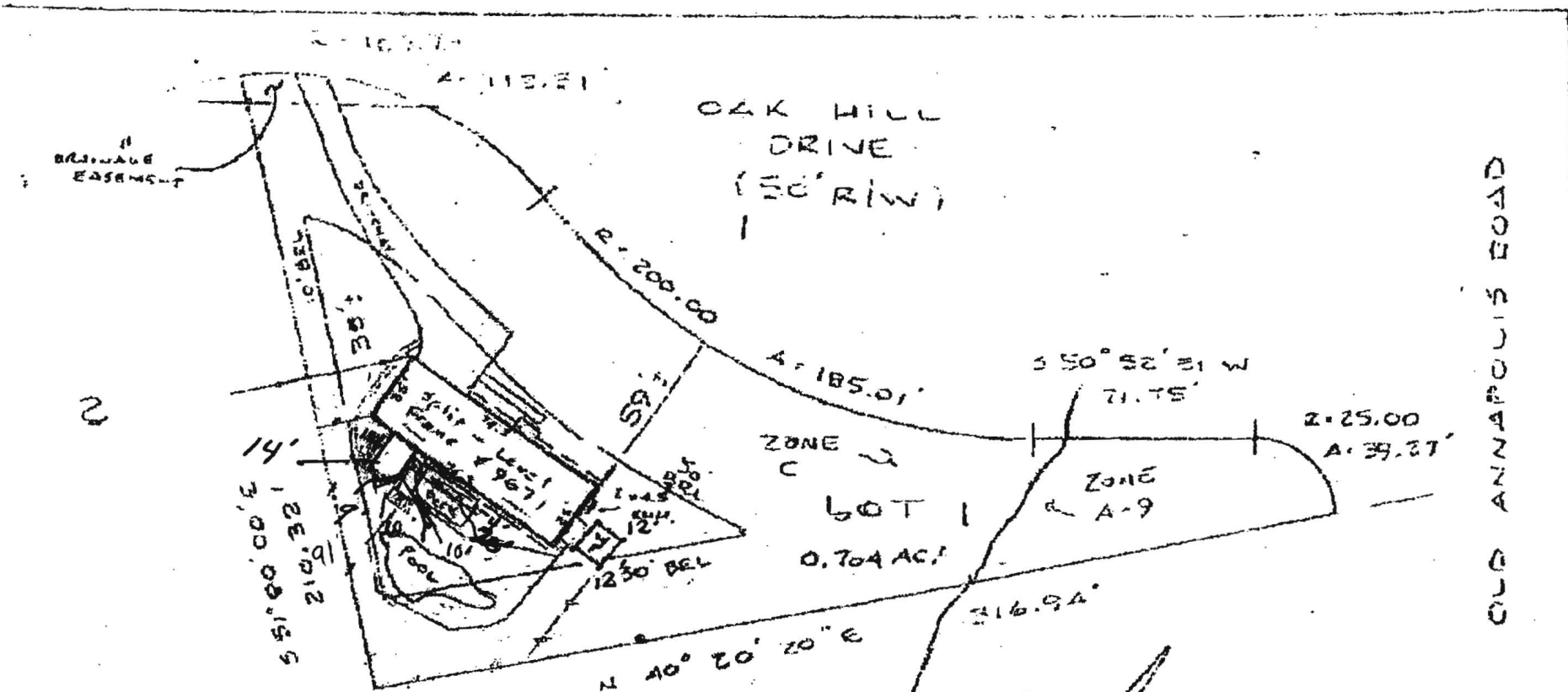
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
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AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Planning Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START		

SDP 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	\$	<b>55.00</b>
Permit Fee	\$	
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Check	#	<b>1966</b>





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 Community Panel Z40044-0028B  
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<b>LOCATION SURVEY</b> 9671 OAK HILL DRIVE OAK HILL ESTATES 5th ELECTION DISTRICT HOWARD COUNTY, MD	
NTT ASSOCIATES, INC. 16205 Old Frederick Road Rt. 417y, Maryland 21771	Scale 1" = 50' Date MARCH 5, 1992 Field By JLM Drawn By JLM



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(1) 140' ground level all PVC Welf  
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 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
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 Email: info@freedomfenceanddeck.com

Engineer/Architect Company: \_\_\_\_\_  
 Responsible Design Prof.: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
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No. of stories:	Depth	Width
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	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 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 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 checked="" 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:	

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Gabriele Council  
 Applicant's Signature  
gabrielecouncil@msn.com  
 Email Address  
Permits by Gabriele  
 Title/Company

Gabriele Council  
 Print Name  
4/18/17  
 Date  
to Contractor

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		

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

DP2 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:	

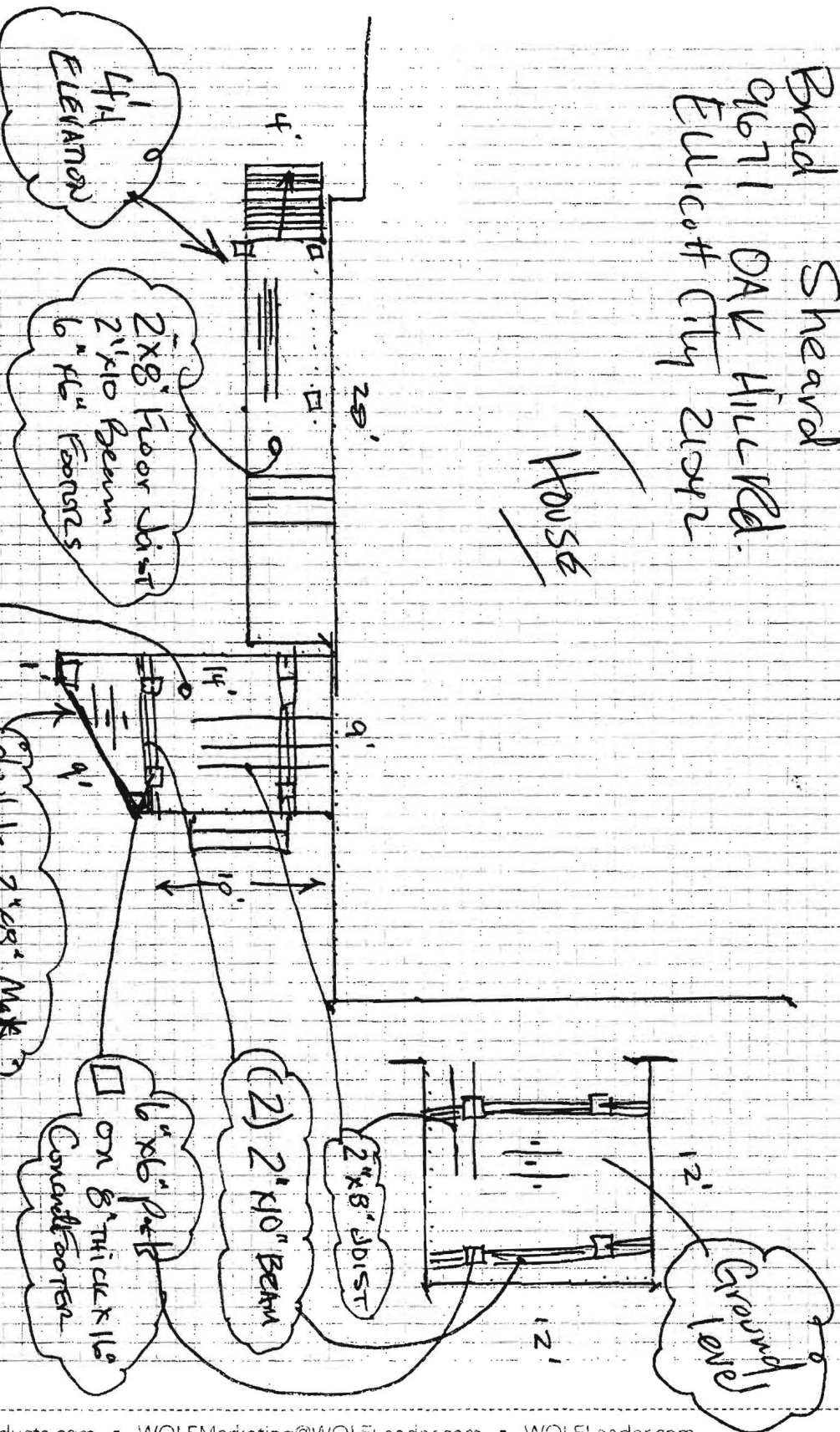
Filing Fee	\$	<u>55.00</u>
Permit Fee	\$	
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	
Guaranty Fund	\$	
Add'l per Fee	\$	
Total Fees	\$	
Sub-Total Paid	\$	
Balance Due	\$	<u>1966</u>
Check	#	

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

Brad Sheard  
 9671 DAVE HILL RD.  
 ELLICOTT CITY 21032

HOUSE

All Joist 16" o/c



GROUND LEVEL

GROUND LEVEL

APR 16