



# 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 NOV 3 AM 10:51  
 Date Received: \_\_\_\_\_

Permit No.: B17003952

Building Address: 14104 BISON COURT  
 City: GLENELG State: MD Zip Code: 21737  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: SINGLE FAMILY HOME  
 Proposed Use: SINGLE FAMILY HOME  
 Estimated Construction Cost: \$ 75,000.00  
 Description of Work: REMODEL KITCHEN & BATH  
ON FIRST FLOOR, REMOVING 3 WALLS,  
(ONE LOAD BEARING w/ LVL BEAM 2 NON  
OCCUPANT/TENANT NAME: LOAD BEARING 348 SF  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: PLANS TOO LARGE TO  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: INGRID BEARD & JAMES HOWEL  
 Address: 14104 BISON COURT  
 City: GLENELG State: MD Zip Code: 21737  
 Phone: 840-676-1513 Fax: \_\_\_\_\_  
 Email: INGI\_1965@YAHOO.COM

Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Contractor Company: KITCHEN & BATH DEPOT  
 Contact Person: MARK MUELLER  
 Address: 11632 BOILING BROOK PLACE  
 City: ROCKVILLE State: MD Zip Code: 20852  
 License No.: 121143  
 Phone: 301-943-8092 Fax: 301-943-8442  
 Email: MARK@KITCHENBATHDEPOT.COM

Engineer/Architect Company: JONATHAN RIVERA  
 Responsible Design Prof.: (14678) (H)  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: MD Zip Code: \_\_\_\_\_  
 Phone: 443-226-5745 Fax: \_\_\_\_\_  
 Email: JRIVERA@JONATHANRIVERA.COM

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: <u>28'</u>	<u>35'</u>
	2 <sup>nd</sup> floor: <u>12'</u>	<u>13'</u>
Area of construction (sq. ft.):	Basement:	
	<input checked="" type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
<b>Construction type:</b>	Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: <u>5</u>	
<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 checked="" type="checkbox"/> Yes <input 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 checked="" 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: Michael Sanford  
 Print Name: MICHAEL SANFORD  
 Email Address: MICHAEL@KITCHENBATHDEPOT.COM  
 Title/Company: KITCHEN & BATH DEPOT

RECEIVED  
 NOV 03 2017  
 LICENSES & PERMITS DIVISION

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

\*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
 -FOR OFFICE USE ONLY-

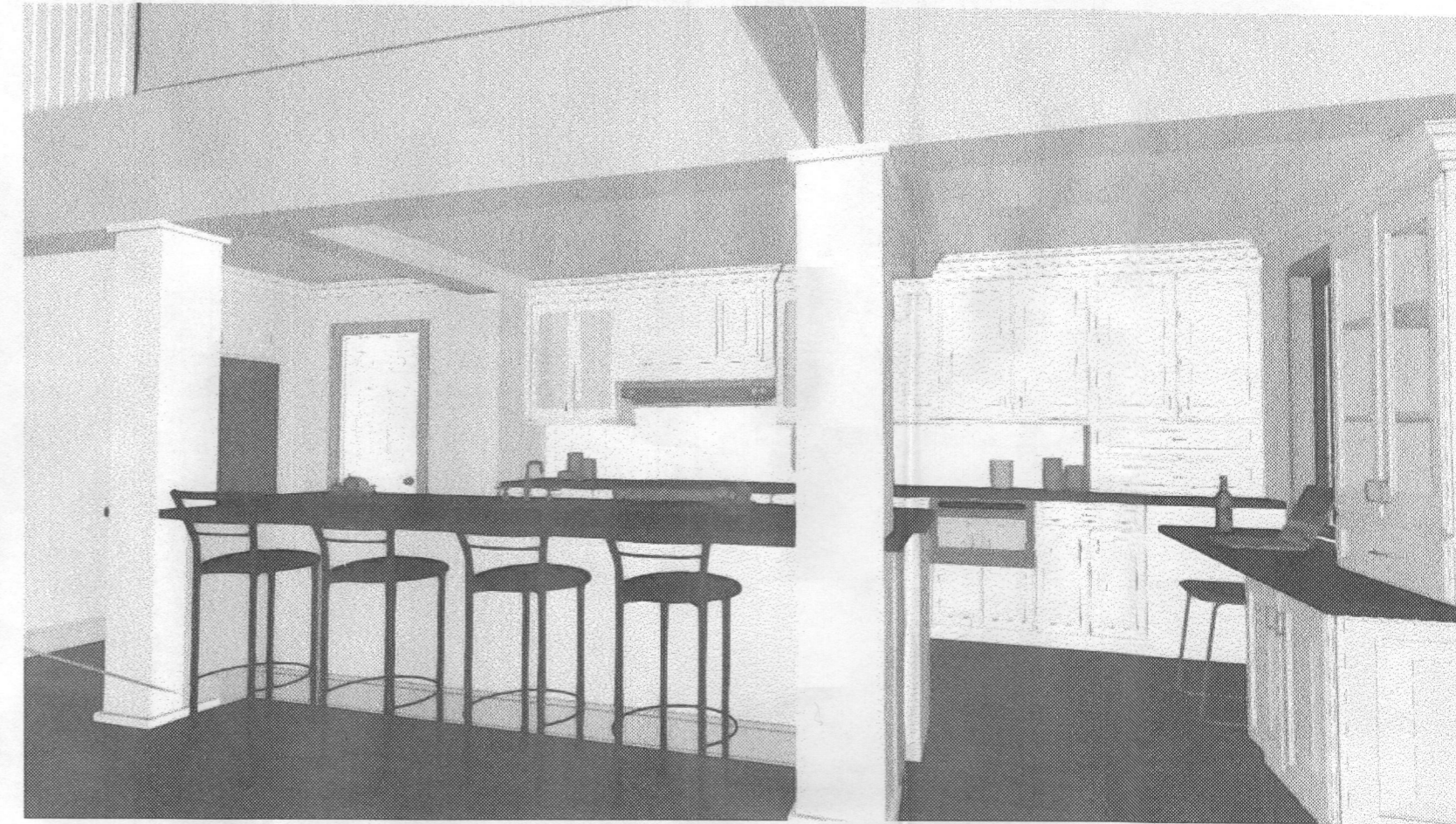
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA ( Zoning )		
PSZA ( Engineering )		
Health	<u>11/6/17</u>	<u>Print Name</u>

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	\$ <u>25</u>
Permit Fee	\$ <u>100</u>
Tech Fee	\$ <u>10</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ <u>135.00</u>
Sub- Total Paid	\$
Balance Due	\$
Check	# <u>28217</u>

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



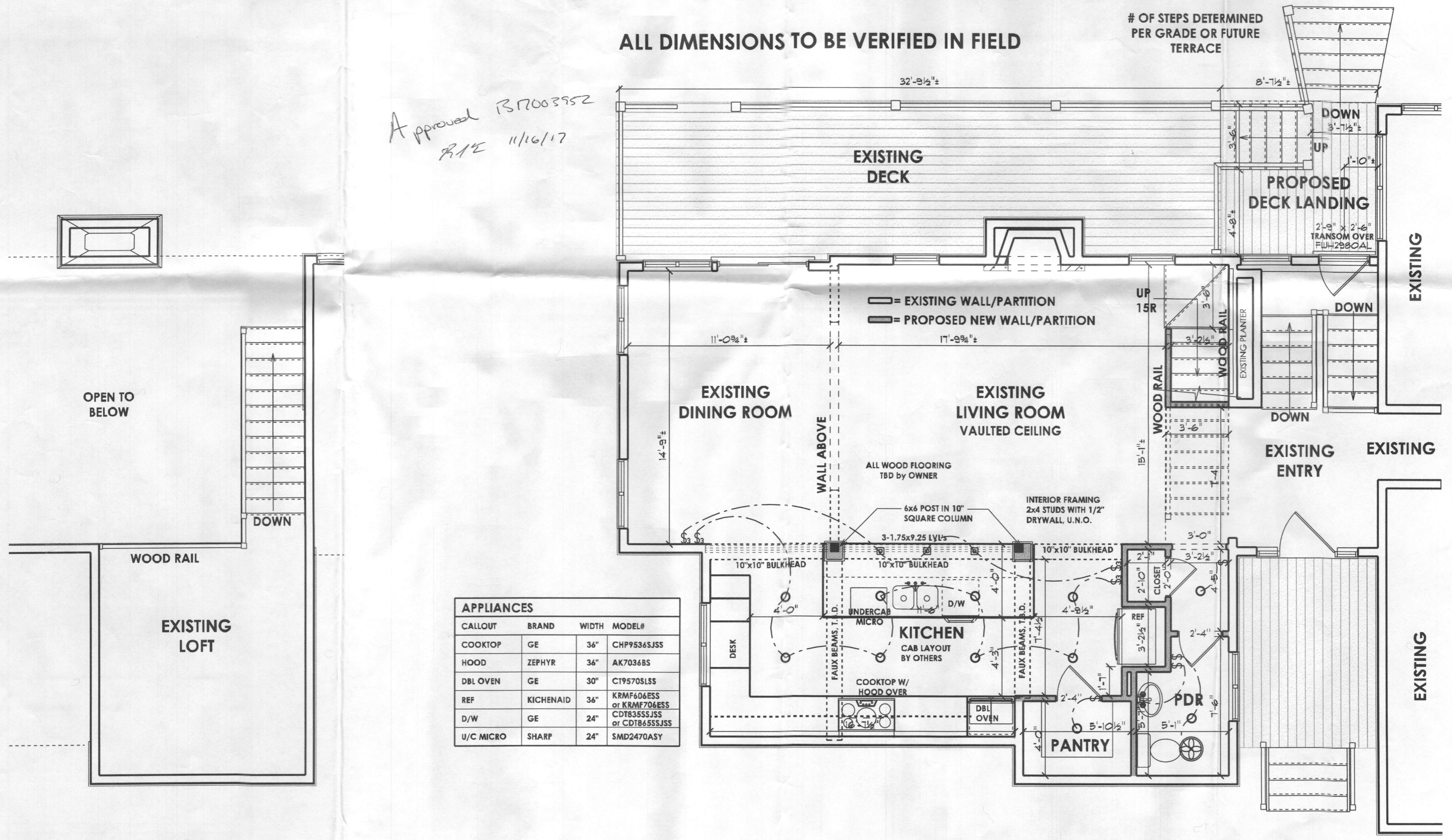
PROFESSIONAL CERTIFICATION  
 I certify that these documents were prepared or approved by me, and that I am a duly licensed professional architect under the laws of the State of Maryland, License Number #14678 Expiration Date: 6/30/2018

Jonathan Rivera  
 License Number #14678

ALL DIMENSIONS TO BE VERIFIED IN FIELD

# OF STEPS DETERMINED PER GRADE OR FUTURE TERRACE

Approved B7003952  
 RAE 11/16/17



APPLIANCES			
CALLOUT	BRAND	WIDTH	MODEL#
COOKTOP	GE	36"	CHP9534SJSS
HOOD	ZEPHYR	36"	AK7034BS
DBL OVEN	GE	30"	C19570SLSS
REF	KICHENAID	36"	KRMF606ESS or KRMF706ESS
D/W	GE	24"	CDT8355SJSS or CDT8655SJSS
U/C MICRO	SHARP	24"	SMD2470ASY

# Beard-Howell Residence

PROPOSED RENOVATION  
 14104 Bison Court, Glenelg, Maryland 21737

ISSUE DATES:  
 09-25-17 REVIEW

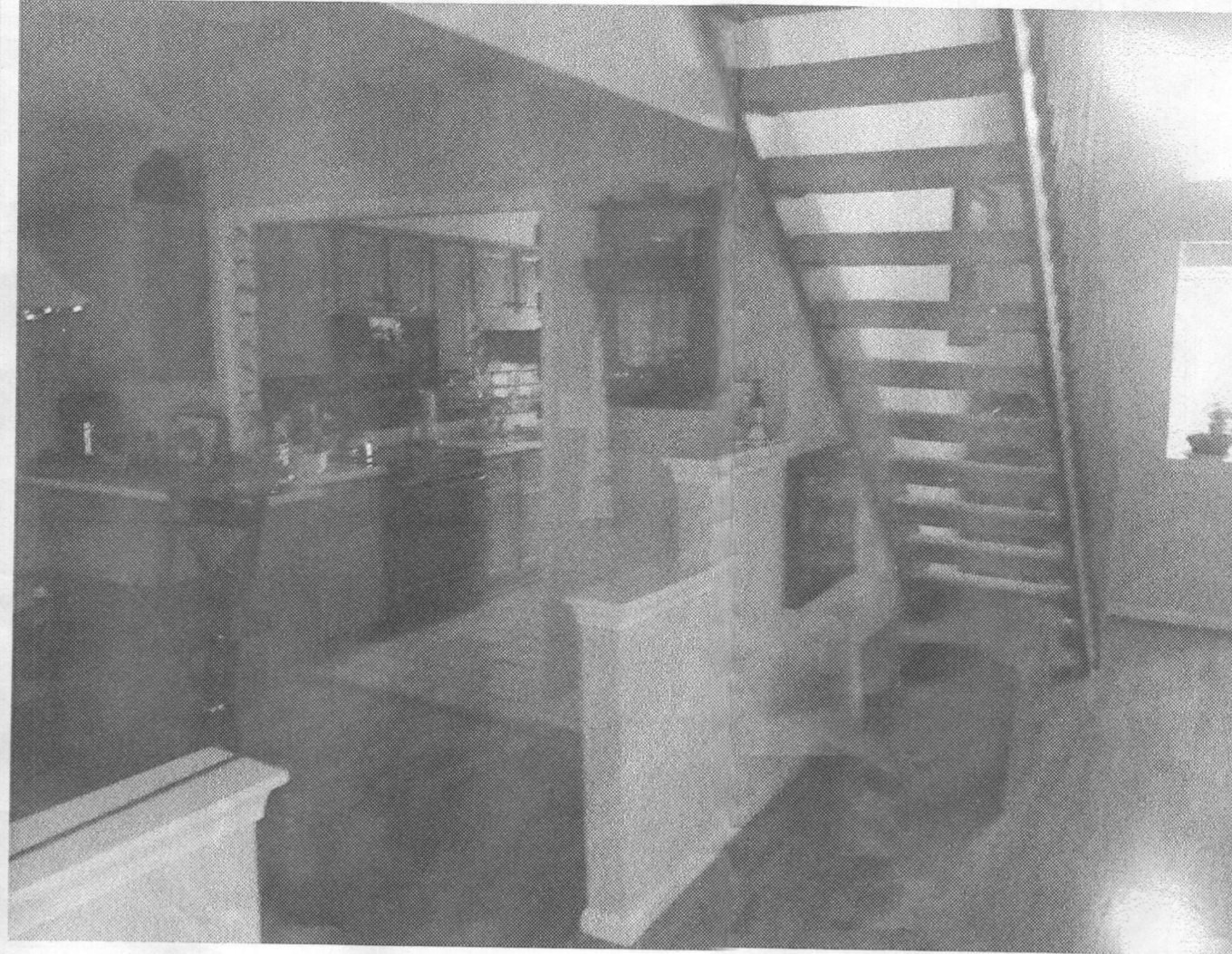
SCALE: 1/4" = 1'-0"

## PLANS 1.01

PRINT DATE:  
 Sunday, October 01, 2017

SECOND FLOOR

RECONFIGURED FIRST FLOOR

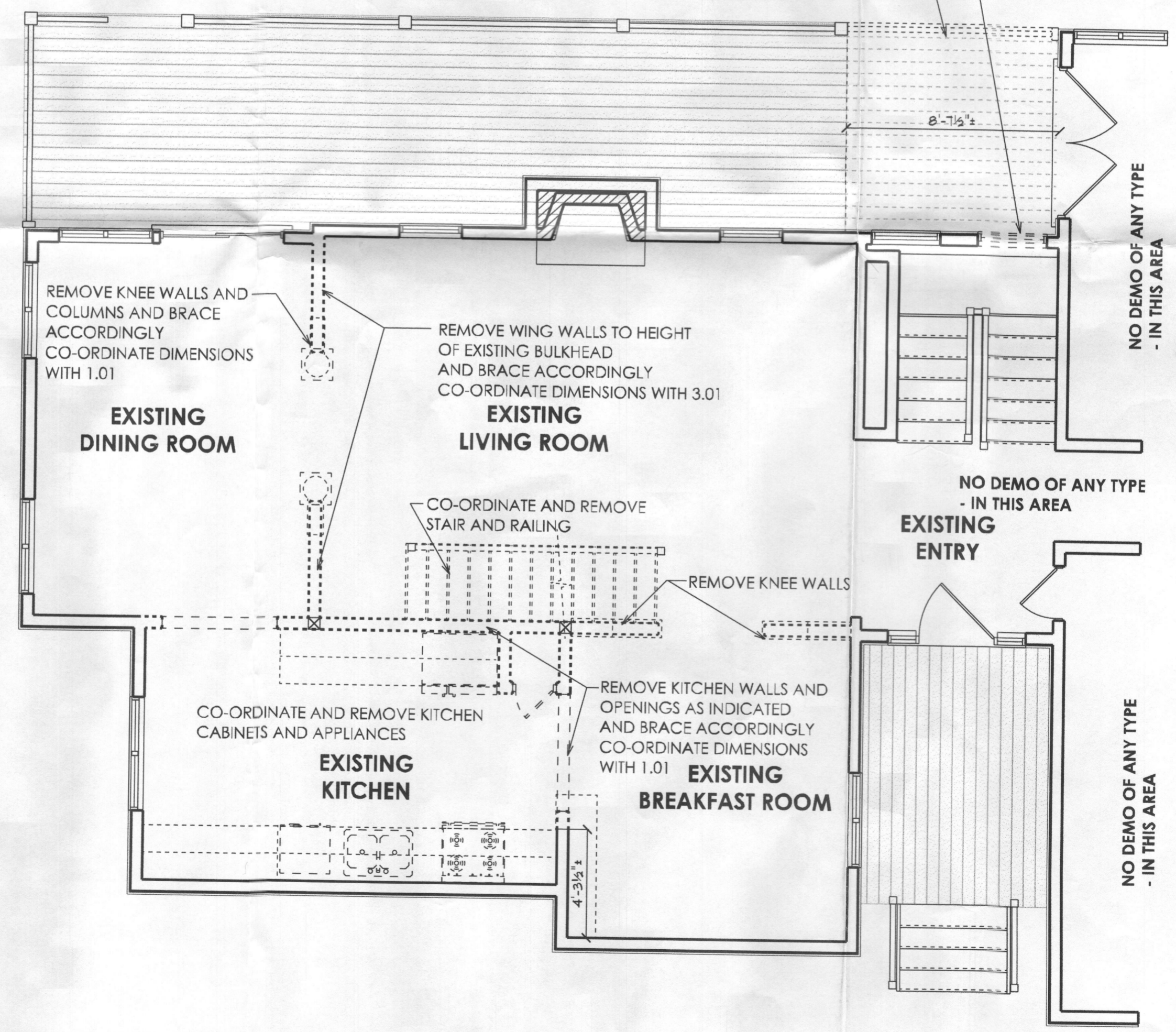


Approved B317002952  
R/R 11/16/17

REMOVE WINDOW AND CO-ORDINATE  
NEW DOOR LOCATION WITH 1.01

REMOVE DECK, RAIL, AND SUPPORT  
AS REQUIRED AND BRACE  
REMAINING DECK ACCORDINGLY

ALL DIMENSIONS TO BE VERIFIED IN FIELD



PROFESSIONAL CERTIFICATION  
I certify that these documents  
were prepared or approved  
by me, and that I am a duly  
licensed professional  
architect under the laws of the  
State of Maryland.  
License Number #14678  
Expiration Date: 6/30/2018

Jonathan Rivera  
License Number #14678

**Beard-Howell Residence**  
P R O P O S E D R E N O V A T I O N  
14104 Bison Court, Glenelg, Maryland 21737

ISSUE DATES:  
09-25-17 REVIEW

SCALE: 1/4" = 1'-0"

DEMO-1st Fl.

**0.51**

PRINT DATE:  
Sunday, October 01, 2017