



# 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: 13701 Pasture Green  
 City: Clarksville State: MD Zip Code: 21029  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: Dunfretten Estates  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 14  
 Tax Map: 34 Parcel: 01 Grid: 01  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Property Owner's Name: Craig Bass  
 Address: 13701 Pasture Green  
 City: Clarksville State: MD Zip Code: 21029  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Existing Use: SFD  
 Proposed Use: SFD  
 Estimated Construction Cost: \$ 1,300  
 Description of Work: Remove & Replace existing fencing 32LF of 7.5" H fencing.

Applicant's Name & Mailing Address, (if other than stated herein)  
 Applicant's Name: Josh Simpson  
 Address: 8057 Veterans Hwy  
 City: Millersville State: MD Zip Code: 21108  
 Phone: 410-962-4444 Fax: \_\_\_\_\_  
 Email: permits@fencedeek.com

Occupant/Tenant Name: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Contractor Company: Fence & Deck Connection  
 Contact Person: Josh Simpson  
 Address: SAA  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No.: 45780  
 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:
	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 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 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: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Title/Company: \_\_\_\_\_

Print Name: Josh Simpson  
 Date: 11/9/17

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>11/16/17</u>	<u>H. O'Sullivan</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	#

APPROVED

WALK-THRU BUILDING PERMIT

BP# \_\_\_\_\_ A# \_\_\_\_\_

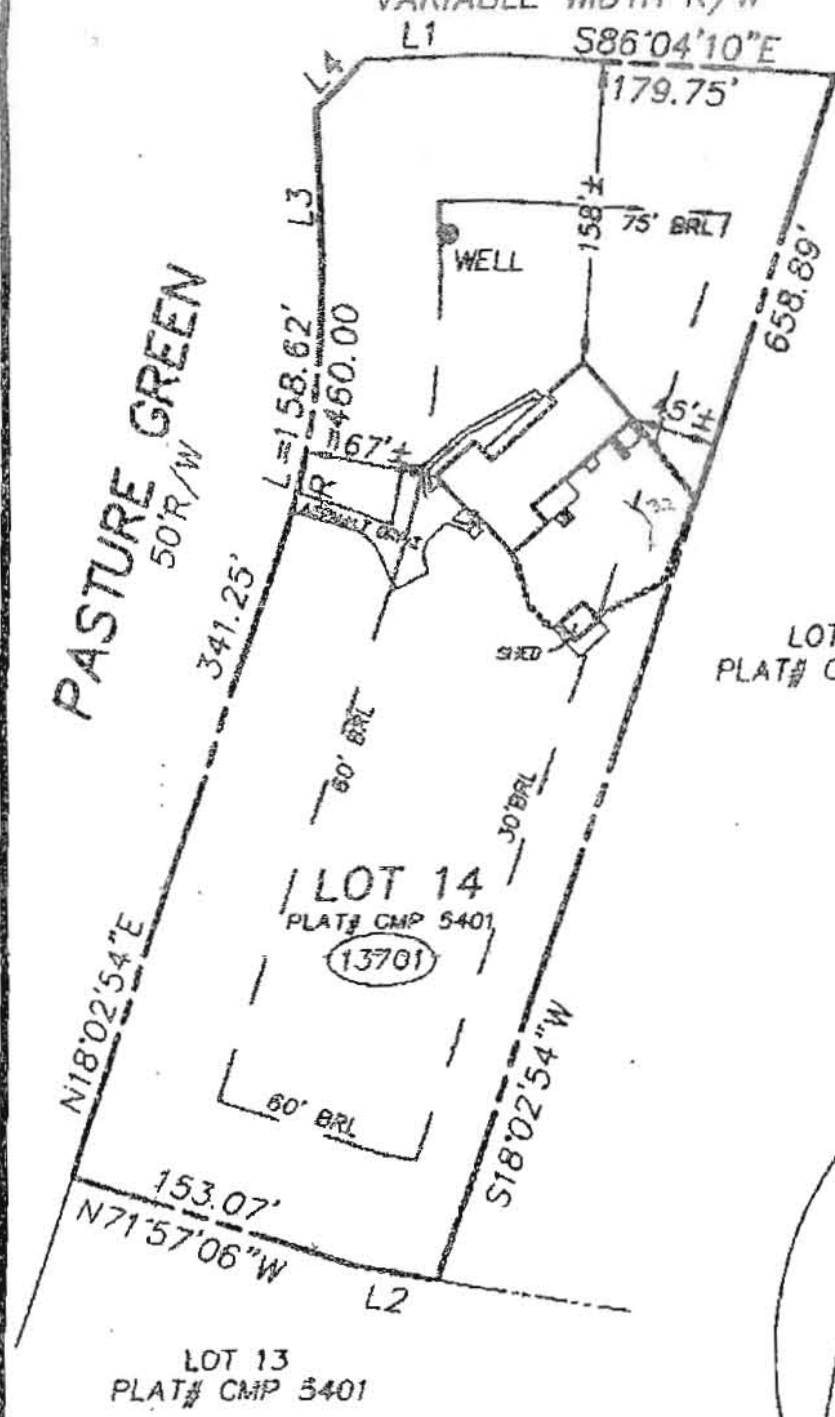
APP. SAN u. Osuna DATE: 11/16/17

DESC. OF WORK: Removal & Replace

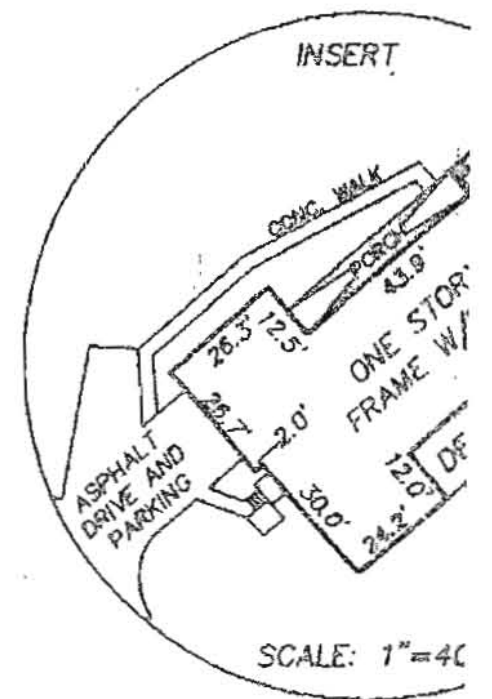
existing fencing 3.2 LF of 1.5 H fencing.

# TRIADELPHIA MILL

VARIABLE WIDTH R/W



LINE	BEARING
L1	N58°17'27"E
L2	N79°49'28"W
L3	N01°42'33"W
L4	N43°17'27"E



- NOTES:
1. THIS PLAT WAS PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT, WHICH MAY REVEAL ADDITIONAL CONVEYANCES, EASEMENTS, RIGHTS-OF-WAY, OR EASEMENT RESTRICTIONS NOT SHOWN, NOR IS IT TO BE USED TO LOCATE PROPERTY LINES.
  2. LOT CORNERS HAVE NOT BEEN SET BY THIS SURVEY UNLESS OTHERWISE INDICATED.
  3. THE ACCURACY OF APPARENT SETBACK DISTANCES ARE WITHIN 2". POSSIBLE ENCROACHMENTS SHALL BE SHOWN IF VISIBLY OBSERVED TO EXIST AT THE TIME OF SURVEY.
  4. THE PLAT IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR RE-FINANCING.
  5. THE PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS.
  6. THE PLAT DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR RE-FINANCING.
  7. NOTES 4, 5 AND 6 ARE REQUIRED TO BE SHOWN AS PER THE STATE OF MARYLAND MINIMUM STANDARDS OF PRACTICE (S.C.(7)A.

I HEREBY CERTIFY THAT THE LOCATION OF ALL THE IMPROVEMENTS AS SHOWN ON THE ABOVE DESCRIBED PROPERTY HAVE BEEN CAREFULLY ESTABLISHED BY TRANSIT SURVEY. THIS SURVEY IS TO CERTIFY TO HOUSE, DRIVEWAY AND ANY OTHER IMPROVEMENTS PLAT, ONLY TO THE EXTENT AS REQUIRED BY THE MINIMUM STANDARDS OF PRACTICE. THE IMPROVEMENT ZONE "C" AS DESIGNATED BY THE APPLICABLE H. J. BOUNDARY MAP PANEL NO. 240011 C0120 AND ARE NOT WITHIN THE FLOOD HAZARD AREA.

7/5/02 *C. W. Ziller*