



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: 4709 Ashby Ct
 City: Elliott City State: MD Zip Code: 21042
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: HomeWood Crossing
 Section: _____ Area: _____ Lot: 76
 Tax Map: 29 Parcel: 28 Grid: 9
 Zoning: _____ Map Coordinates: _____ Lot Size: 1.15 @

Existing Use: SFD
 Proposed Use: SFD w/ Deck
 Estimated Construction Cost: \$ 10,000
 Description of Work:
Const. 28x32 Irregular shape open deck
w/ landing steps and 10x15 open upper deck
box 4 angled lrg ABOVE
 Occupant/Tenant Name: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: owner
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Sunil Sinha
 Address: 4709 Ashby Ct
 City: Elliott City State: MD Zip Code: 21042
 Phone: 410-465-1670 Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Michelle Clary
 Address: PO Box 310
 City: Perry Hall State: MD Zip Code: 21128
 Phone: 410-610-7514 Fax: _____
 Email: Michelle @ AppliedAndApproved.com

Contractor Company: Custom works
 Contact Person: Galen Wilson
 Address: PO Box 175
 City: Rwa State: MD Zip Code: 21140
 License No.: 91395
 Phone: 410-963-1119 Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: Contractor
 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	Multi-family Dwelling
<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.

Michelle Clary
 Applicant's Signature
Michelle @ AppliedAndApproved.com
 Email Address
permits
 Title/Company

Michelle Clary
 Print Name
10/2/17
 Date

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>10/4/17</u>	<u>Dana Berwick</u>

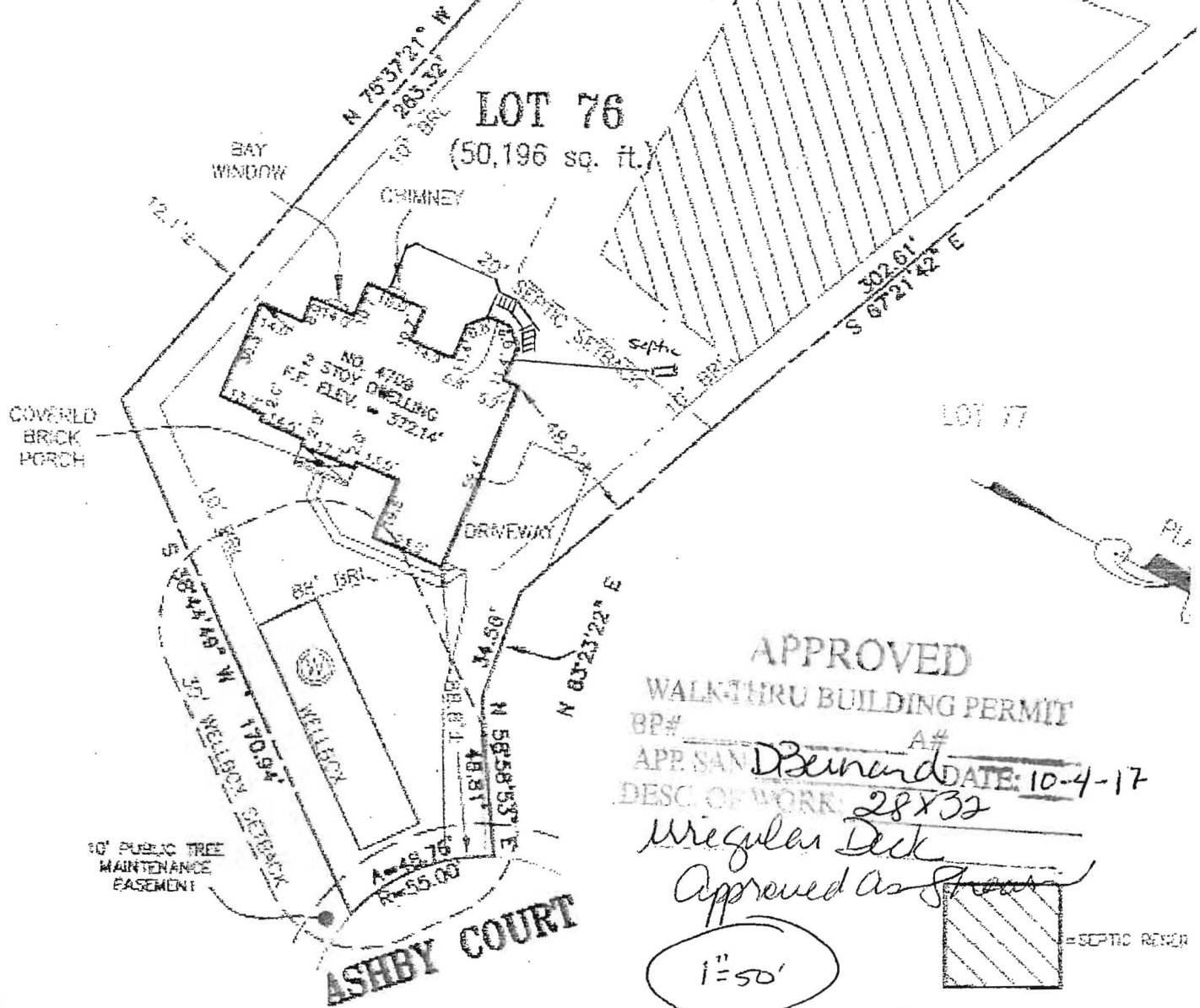
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

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

NON-BUILDABLE
PRESERVATION
PARCEL K
OWNER: HOMEOWNER'S ASSOCIATION
JOSEPH H. HOLDER, HOWARD COUNTY



APPROVED
WALKTIRU BUILDING PERMIT
BP# _____ A# _____
APP. SAN Bernard DATE: 10-4-17
DESC. OF WORK: 28X32
Irregular Deck
Approved as shown

GEN. PLAN
OF LOT 76

SURVEYOR'S CERTIFICATE
THAT THE POSITION OF THE EXISTING IMPROVEMENTS SHOWN HEREON
WAS ESTABLISHED BY ACCEPTED LAND SURVEYING PRACTICES AND
THAT THERE ARE NO VISIBLE ENCROACHMENTS EITHER WAY ACROSS
THE PLANS IS OF BENEFIT TO A CONSUMER ONLY INsofar AS
A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN
CONTEMPLATED TRANSFER, FINANCING, OR REFINANCING THE PLAN
UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES,
OR OTHER EXISTING OR FUTURE IMPROVEMENTS. THE PLAN DOES
NOT ACCURATELY IDENTIFY PROPERTY BOUNDARY LINES, BUT
MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR
FOR REFINANCING. THIS DRAWING WAS PREPARED W/O THE
REPORT.

[Signature]
71245
01/11/2014

LOCATION DRAWING
LOT 76
HOMWOOD CROSSING
CLIPPER 9808, TOWN 204
PLAT NO. 18241
FIFTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

E

DATE: 07
QTR: 5