



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: **B17002427**

Building Address: **7411 PINDELL SCHOOL RD.**
 City: **FULTON** State: **MD** Zip Code: **20759**
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: **0000**
 Section: _____ Area: _____ Lot: **2**
 Tax Map: **0041** Parcel: **0416** Grid: **0009**
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: **GORDON ELLIS**
 Address: **7411 PINDELL SCHOOL RD**
 City: **FULTON** State: **MD** Zip Code: **20759**
 Phone: **301-526-2380** Fax: _____
 Email: **gellis7411c.comcast.net**

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

Contractor Company: **SUBURBAN PROPANE**
 Contact Person: **BRENT STUBBS**
 Address: **31 DEERWOOD CIR.**
 City: **ROCKVILLE** State: **MD** Zip Code: **20850**
 License No.: **782-63**
 Phone: **301-251-0606** Fax: **301-251-0608**
 Email: **bstubbs@suburbanpropane.com**

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

Existing Use: **SINGLE FAMILY DWELLING**
 Proposed Use: **PROP SUPPLY FOR GEN. COOK, DRYER**
 Estimated Construction Cost: \$ **2900.00**
 Description of Work: **INSTALL ABOVE GROUND PROPANE TANK AND GAS LINE FROM TANK TO GENERATOR + STUB OUT.**
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

250 gallon propane tank

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 st floor: _____	2 nd floor: _____
Area of construction (sq. ft.): _____	Basement: _____	
Use group: _____	<input type="checkbox"/> Finished Basement	
Construction type: _____	<input type="checkbox"/> Unfinished Basement	
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Structural Steel	No. of Bedrooms: _____	
<input type="checkbox"/> Masonry	Multi-family Dwelling	
<input type="checkbox"/> Wood Frame	No. of efficiency units: _____	
<input type="checkbox"/> State Certified Modular	No. of 1 BR units: _____	
	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	
Water Supply	
<input checked="" type="checkbox"/> Public	RECEIVED
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	JUN 21 2017
<input checked="" type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	LICENSES & PERMITS DIVISION
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
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 THERE TO; (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: *[Signature]* Print Name: **Brent Stubbs**
 Email Address: **BSTUBBS@SUBURBANPROPANE.COM** Date: **6/16/17**
 Title/Company: **Suburban Propane Manager**

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	7/6/17	<i>[Signature]</i>

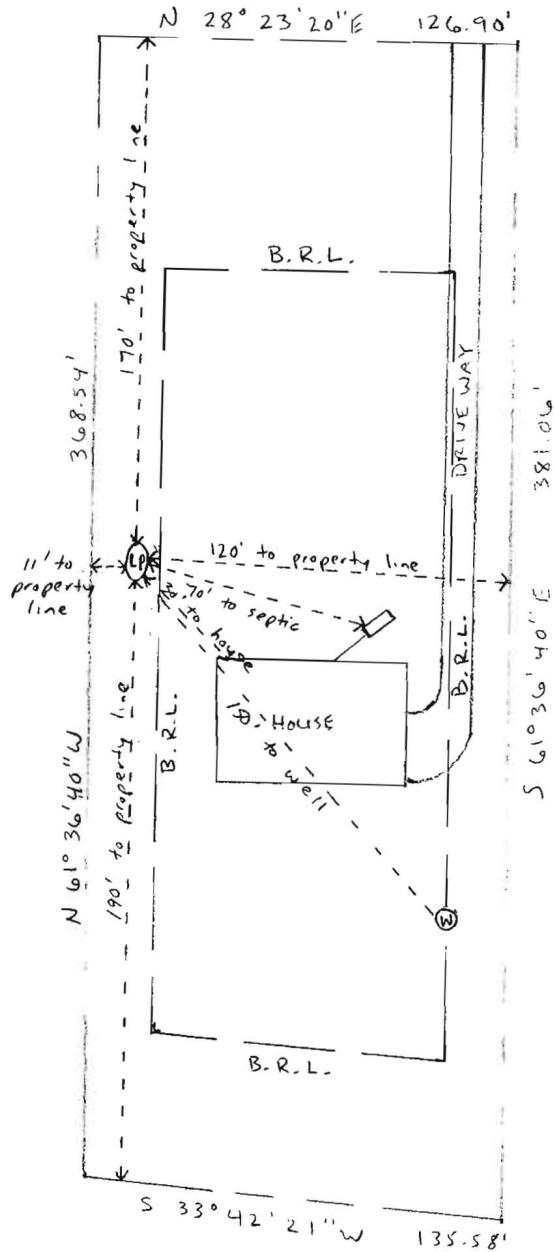
CONTINGENCY CONSTRUCTION START

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:	

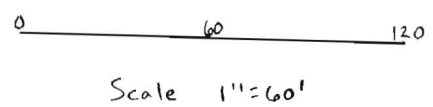
Filing Fee	\$ 110.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	# 17-571202265

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

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KEY	
-----	Property Lines
—————	Permanent Structures & Driveway
-----	Building Restriction Line
←-----→	Measurements
□	Septic Tank
⊙	Well
⊙	250 Gallon Above Ground Propane Tank



Approved B17002427
7/6/17 RAE