



# 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: 6255 Heather Glen Way  
City: CLARKSVILLE State: MD Zip Code: 21029  
Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: PRESERVE AT CLARKSVILLE  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 21  
Tax Map: 0034 Parcel: 0077 Grid: 0011  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 1.10 AC

Existing Use: RESIDENTIAL  
Proposed Use: Inground Pool with spa 21ft x 40ft.  
Estimated Construction Cost: \$ 50,000  
Description of Work: INGROUND SWIMMING POOL AND SPA, FENCE

Occupant or Tenant: \_\_\_\_\_  
Was tenant space previously occupied?  Yes  No  
Contact Name: TIMOTHY ROWAN  
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:	<u>Depth</u>	<u>Width</u>
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 type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Property Owner's Name: HIMAN SHU & Gopi Patel  
Address: 6255 Heather Glen Way  
City: Clarksville 2 State: MD Zip Code: 21029  
Phone: 240-472-6727 Fax: \_\_\_\_\_  
Email: HiCONTACT@401.com

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

Contractor Company: Rowan Landscape and Pool Co.  
Contact Person: Timothy Rowan  
Address: 16643 FREDERICK RD  
City: Mt Airy State: MD Zip Code: 21771  
License No.: 16659  
Phone: 443-398-0987 Fax: \_\_\_\_\_  
Email: Tim@RowanLandscape.com

Engineer/Architect Company: Blackwell Engineers  
Responsible Design Prof.: \_\_\_\_\_  
Address: 8751 BUCKLAND Mill RD  
City: GAINESVILLE State: VA Zip Code: 20155  
Phone: 703-754-9358 Fax: \_\_\_\_\_  
Email: Channing@Blackwell-engineering.com

Utilities	
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Heating System</b>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<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.

Applicant's Signature: Timothy M. Rowan  
Email Address: Tim@RowanLandscape.com  
Title/Company: \_\_\_\_\_

Print Name: Timothy M. Rowan  
Date: 6/8/17

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>6/8/17</u>	<u>Timothy M. Rowan</u>

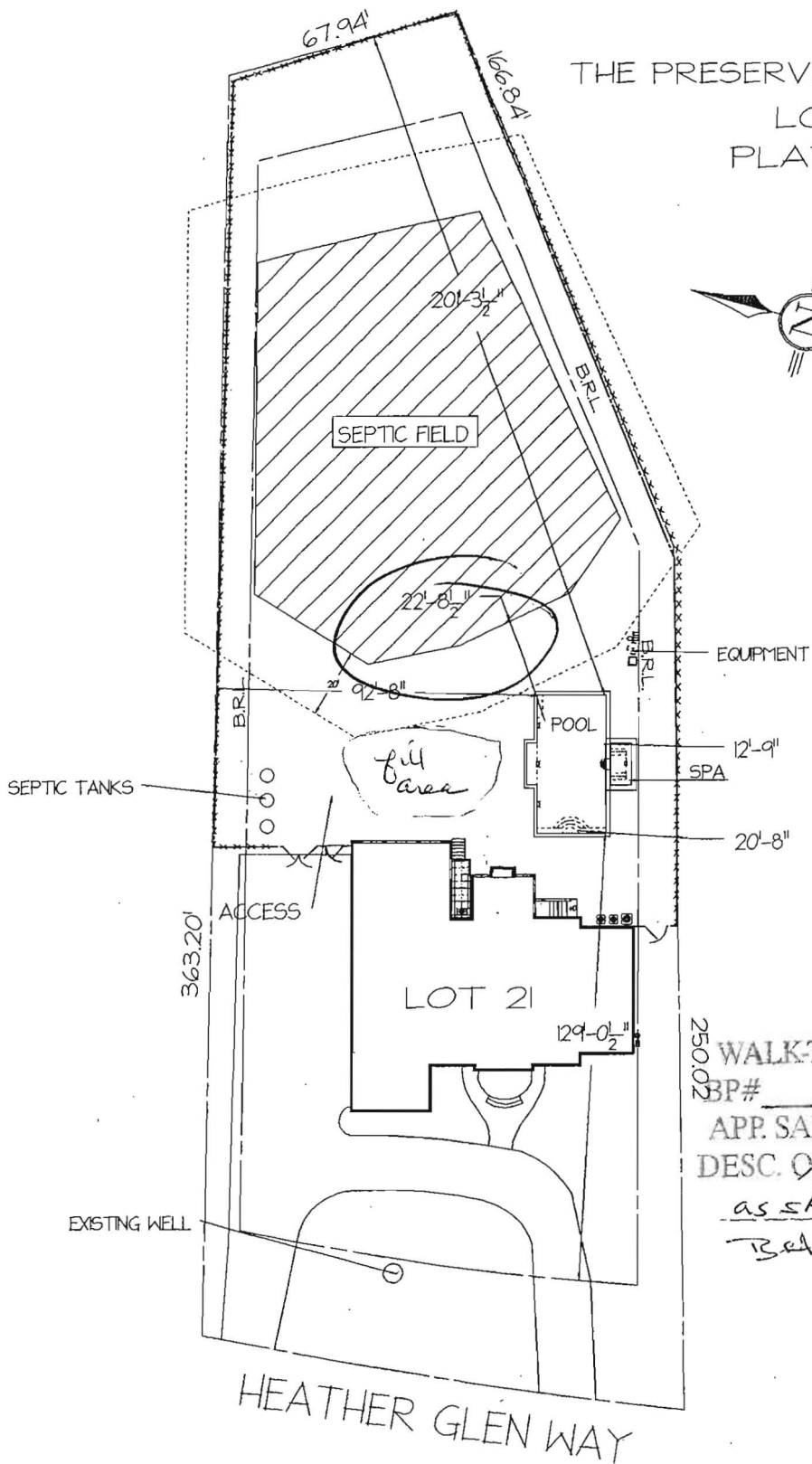
Is Sediment Control approval required for issuance?  Yes  No  
 CONTINGENCY CONSTRUCTION START

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	#

PATEL RESIDENCE  
6255 Heather Glen Way Clarksville MD 21029

THE PRESERVE AT CLARKSVILLE  
LOT 21  
PLAT No. 21



**APPROVED**  
WALK-THRU BUILDING PERMIT  
BP# \_\_\_\_\_ A# \_\_\_\_\_  
APP. SAN *the way* DATE: *6/8/17*  
DESC. OF WORK: *Inground pool*  
*as shown see notes*  
*Below...*



**ROWAN LANDSCAPE Co. INC.**  
16643 FREDERICK ROAD MT. AIRY, MD 21771  
410-489-0707  
TIM@ROWANLANDSCAPE.COM  
WWW.ROWANLANDSCAPE.COM

- ① Pool Contractor to fence off existing septic tank + it's components.
- ② Pool fill will be used for grading and some to be hauled away - see fill...