



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: 6732 Cortina Dr
 City: Highland State: MD Zip Code: 20777
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: 0000
 Section: _____ Area: _____ Lot: 1
 Tax Map: 0034 Parcel: 0129 Grid: 0019
 Zoning: _____ Map Coordinates: _____ Lot Size: 1.0800 AC

Property Owner's Name: Charles Norwood
 Address: 6732 Cortina Dr
 City: Ellicott City State: MD Zip Code: 21042
 Phone: _____ Fax: _____
 Email: _____

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

Existing Use: Bath Tub
 Proposed Use: Handicap Shower
 Estimated Construction Cost: \$ 2,000.00
 Description of Work: Converting Existing Tub into handicap shower for Tax Rebate also shower is 2.5 x 5'
 Occupant/Tenant Name: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: Bowie Design & Home Improvement Inc
 Contact Person: Andy Bowie
 Address: 9623 Boundless Shade Terr
 City: Louisa State: MD Zip Code: _____
 License No.: MHC 69276
 Phone: 301 490-9204 Fax: 301 490-5118
 Email: andybowie@bowiedhi.com

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 st floor:
	2 nd floor:
Area of construction (sq. ft.):	Basement:
	<input checked="" 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 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 type="checkbox"/> No
Water Supply	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	<u>WELL</u>
Sewage Disposal	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	<u>SEPTIC</u>
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.

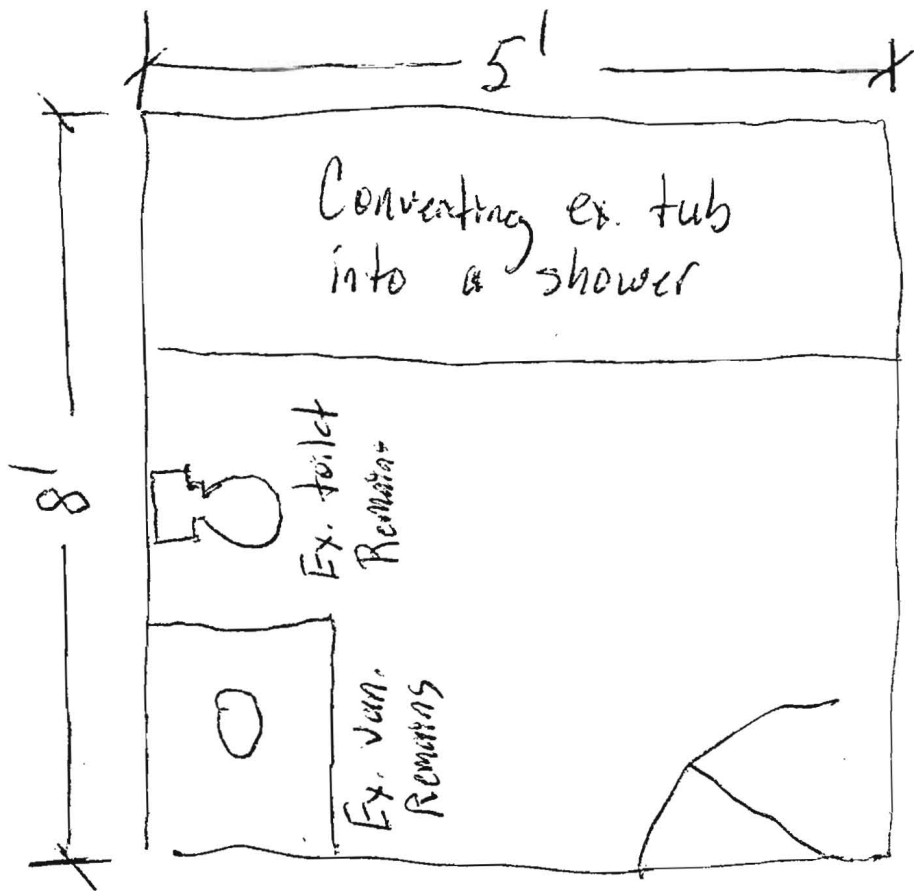
Applicant's Signature: Andy Bowie Print Name: Andy A. Bowie, Jr.
 Email Address: andybowie@bowiedhi.com Date: 6-22-2017
 Title/Company: Owner - Bowie Design & Home Improvement, Inc.

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL	DPZ SETBACK INFORMATION	Filing Fee	\$
State Highways			Front:	Permit Fee	\$
Building Officials			Rear:	Tech Fee	\$
PSZA (Zoning)			Side:	Excise Tax	\$
PSZA (Engineering)			Side St.:	PSFS	\$
Health	<u>6/27/17</u>	<u>H. Osborn</u>	All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No	Guaranty Fund	\$
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No			Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Add'l per Fee	\$
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START			Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fees	\$
			Lot Coverage for New Town Zone:	Sub- Total Paid	\$
			SDP/Red-line approval date:	Balance Due	\$
				Check	#

Norwood

6732 Cortina Dr, Highland



APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____

APP. SAN H. Oswald DATE: 6/22/17
DESC. OF WORK: Convert existing tub into handicap shower