



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: 4050 Candlelight Drive
 City: Darlington State: MD Zip Code: 21036
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Castleberry
 Section: _____ Area: _____ Lot: 18
 Tax Map: 0022 Parcel: _____ Grid: 0019
 Zoning: _____ Map Coordinates: _____ Lot Size: 41940
sq ft

Existing Use: SFH
 Proposed Use: SFH
 Estimated Construction Cost: \$ 65,000
 Description of Work: Attached Garage
14' x 33'

Occupant/Tenant Name: Arizon Fish
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: 4050 Candlelight Drive
 City: Darlington State: MD Zip Code: 21036
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Arizon Fish
 Address: 4050 Candlelight Drive
 City: Darlington State: MD Zip Code: 21036
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: Trevor Poquette
 Address: 1100 St. Michaels Rd
 City: Mt. Airy State: MD Zip Code: 21771
 Phone: 443 336 7690 Fax: _____
 Email: tripoquette@gmail.com

Contractor Company: Poquette Construction Mgmt
 Contact Person: Trevor Poquette
 Address: 1200 St. Michaels Rd
 City: Mt. Airy State: MD Zip Code: 21771
 License No.: MUIC 91628
 Phone: 443 336 7690 Fax: _____
 Email: tripoquette@hotmail.com

Engineer/Architect Company: JRA Architect
 Responsible Design Prof.: Jonathan R. R. R.
 Address: _____
 City: _____ State: MD Zip Code: _____
 Phone: 443 226 5745 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:	
Area of construction (sq. ft.):	2 nd floor:	
Use group:	Basement:	
	<input type="checkbox"/> Finished Basement	
	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input checked="" type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>	
<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:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Dimensions: <u>14x33</u>	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Footings:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit #	Roof:	
	<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 checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Heating System	
<input checked="" type="checkbox"/> Electric	<input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas	<input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" 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: Trevor Poquette Print Name: Trevor Poquette
 Email Address: tripoquette@hotmail.com Date: 1/25/18
 Title/Company: owner

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)		<u>Justin R. R. R.</u>
Health		

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

