



# Building Permit Application

Howard County Maryland  
Department of Inspections, Licenses and Permits  
3430 Court House Drive  
Permits: 410-313-2455  
www.howardcountymd.gov

DILP 2016 AUG 16 AM 10:3

Date Received: \_\_\_\_\_

Permit No.: B16003592

Building Address: 12420 Auto DRIVE  
 City: Clarksville State: MD Zip Code: 21029  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Tax Map: 34 Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: Automotive Offices  
 Proposed Use: SAME  
 Estimated Construction Cost: \$ 25,000  
 Description of Work: PERMIT FOR INTERIOR PARTIALS CEILING, ETC.

Occupant or Tenant: ANTOY LLC Automotive Taxated  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: BRIAN DOLAN  
 Address: 12420 Auto DRIVE  
 City: Clarksville State: MD Zip Code: 21029  
 Phone: (443) 831-7609 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: ANTOY LLC  
 Address: 12420 Auto DRIVE  
 City: Clarksville State: MD Zip Code: 21029  
 Phone: (410) 531-5780 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Applicant's Name & Mailing Address, (If other than stated herein)  
 Applicant's Name: STEEL BUILDING SPECIALISTS  
 Address: 3928 WASHINGTON BLVD  
 City: BALTIMORE State: MD Zip Code: 21227  
 Phone: (410) 247-9300 Fax: \_\_\_\_\_  
 Email: ED@SBSMD.COM

Contractor Company: STEEL BUILDING SPECIALISTS  
 Contact Person: ED STILLING  
 Address: 3928 WASHINGTON BLVD  
 City: BALTIMORE State: MD Zip Code: 21227  
 License No.: 03834416  
 Phone: (410) 247-9300 Fax: \_\_\_\_\_  
 Email: ED@SBSMD.COM

Engineer/Architect Company: Paul J. Hobson Architects  
 Responsible Design Prof.: Paul J. Hobson  
 Address: 3928 WASHINGTON BLVD  
 City: BALTIMORE State: MD Zip Code: 21227  
 Phone: (410) 247-8701 Fax: 410-247-9369  
 Email: \_\_\_\_\_

Commercial Building Characteristics	Residential Building Characteristics
Height: <u>26 ft</u>	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: <u>2</u>	Depth _____ Width _____
Gross area, sq. ft./floor: <u>20,800</u>	1 <sup>st</sup> floor: _____
Area of construction (sq. ft.): <u>8400</u>	2 <sup>nd</sup> floor: _____
Use group: <u>S1</u>	Basement: _____
<b>Construction type:</b>	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Wood Frame	No. of Bedrooms: _____
<input type="checkbox"/> State Certified Modular	<b>Multi-family Dwelling</b>
	No. of efficiency units: _____
	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	
<b>Water Supply</b>	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Heating System</b>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other: _____	
<b>Sprinkler System:</b>	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number: _____	
Building Shell Permit Number: <u>#14001511</u>	

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

Ed C. Stilling  
 Applicant's Signature  
Ed C. SBSMD.COM  
 Email Address  
P.Mgr. / Steel Building Specialists Inc  
 Title/Company

Ed Stilling  
 Print Name  
8/8/16  
 Date

**RECEIVED**  
 AUG 16 2016  
 LICENSES & PERMITS  
 DIVISION

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>8/8/16</u>	<u>[Signature]</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	\$ 200.00
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# <u>25564</u>

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

✶OKAY TO TAKE IN PER. J. HOBSON + A. ARNO