



# 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: 4751 Bernice Branch Rd  
 City: Ellicott City State: MD Zip Code: \_\_\_\_\_  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: \_\_\_\_\_  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: Deck  
 Proposed Use: Re New  
 Estimated Construction Cost: \$ 50,000  
 Description of Work: remove old Deck and Rebuild

Occupant/Tenant Name: Kristen & John Mahoney  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: Kristen P. John Mahoney  
 Address: 4751 Bernice Branch Rd  
 City: Ellicott City State: MD Zip Code: \_\_\_\_\_  
 Phone: 443-467-7679 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

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

Contractor Company: Treasure Landscapes LLC  
 Contact Person: Matt Steves  
 Address: PO Box 424  
 City: Greenville State: MD Zip Code: 21638  
 License No.: MHIC # 130807  
 Phone: 410-490-9234 Fax: 410-827-4244  
 Email: stevesmatt@verizon.net

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: <u>2</u>	Depth	Width
Gross area, sq. ft./floor: _____	1 <sup>st</sup> floor: _____	_____
Area of construction (sq. ft.): <u>940</u>	2 <sup>nd</sup> floor: _____	_____
Use group: _____	Basement:	_____
Construction type:	<input type="checkbox"/> Finished Basement	_____
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement	_____
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Slab on Grade	_____
<input type="checkbox"/> Masonry	No. of Bedrooms: _____	_____
<input checked="" type="checkbox"/> Wood Frame	<b>Multi-family Dwelling</b>	_____
<input type="checkbox"/> State Certified Modular	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 type="checkbox"/> No	Roof: _____	_____
Roadside Tree Project Permit # _____	<input type="checkbox"/> State Certified Modular	_____
	<input type="checkbox"/> Manufactured Home	_____

Utilities	
Electric:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input checked="" type="checkbox"/> Public	_____
<input type="checkbox"/> Private	_____
Sewage Disposal	
<input type="checkbox"/> Public	_____
<input checked="" type="checkbox"/> Private	_____
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 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: stevesmatt@verizon.net  
 Email Address: stevesmatt@verizon.net  
 Title/Company: Owner

Print Name: Matt Steves  
 Date: 4-25-18

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>4/25/18</u>	<u>H. Oswald</u>

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

DFZ 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

**NOTES:**

- 1) B.R.L. information, if shown, was obtained from existing record plat or local agencies and is not guaranteed by NTT, Inc.
- 2) Building line and/or Flood Zone information is subject to the interpretation of the originator.
- 3) NTT, Inc. does not certify to unshown or unrecorded encroachments or overlaps.
- 4) Property markers NOT found, or guaranteed by this location.
- 5) Setback distance accuracy: 2'±

**APPROVED**

**WALK-THRU BUILDING PERMIT**

BP# \_\_\_\_\_ A# \_\_\_\_\_  
 APP. SAN H. Osmold DATE 4/23/18  
 DESC. OF WORK: Remove old deck  
and rebuild

**Bonnie Branch Road**

S 28°30'00" W  
166.00'

N 44°01'37" W  
259.87'

N 29°47'14" E  
190.00'

S 38°47'03" E  
264.10'

2 Story  
Frame + Conc  
Dwelling  
#4751

Wood Deck

Wood Decks

Macadam

BRL

Slope

Clear cut

25±

48±

10.6'

10.2'

10.3'

4.5'

10.3'

10.3'

10.3'

10.3'

10.3'

10.3'

10.3'

10.3'

10.3'

10.3'

10.3'

10.3'

10.3'

10.3'

10.3'

10.3'

Subject property is shown in Zone C on the FIRM Map of Howard County, Maryland on Community Panel Number 2400440029B, Effective 12-4-86

**Building Restriction Lines:**

Front...50'

Sides...20'

Rear...30'

This is to certify that I have surveyed the property shown hereon, being known as 4751 Bonnie Branch Road as described by metes and bounds and recorded among the land records of Howard County, Maryland in Liber 6238 Folio 55 for the purpose of locating the improvements thereon.

- \* This plat is of benefit to the consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing, or refinancing purposes.
- \* This plat is not to be relied upon for the establishment of location of fences, garages, buildings, or other existing or future structures.
- \* This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or for securing financing or refinancing.



J. Carl Hudgins PLS #96  
 Expiration Date: 3/11/14

**LOCATION DRAWING**

4751 BONNIE BRANCH ROAD  
 ELECTION DISTRICT No. 1  
 HOWARD COUNTY, MARYLAND

**NTT Associates, Inc.**  
 16205 Old Frederick Rd.  
 Mt. Airy, Maryland 21771  
 Phone: (410)442-2031  
 Fax: (410)442-1315  
 Website: www.nttsurveyors.com

Scale: 1" = 60'  
 Date: 4-5-12  
 Field By: DR JLM  
 Drawn By: DR  
 Drawing # MD120514

