



Health

Building Permit Application

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

DILP 2018 AUG 30 AM 11:5

Date Received: _____

Permit No.: B18003084

Building Address: 2250 MCKENDREE DRIVE
 City: W.FRIENDSHIP State: MD Zip Code: 21794
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: PAR A
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: 10 AC

Existing Use: SFD
 Proposed Use: SFD W/TANK
 Estimated Construction Cost: \$ 4000
 Description of Work: INSTALL A 1000 GAL *underground* PROPANE TANK
 Occupant/Tenant Name: OWNER
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: JUSTIN WATTS & ROBIN SCERATI
 Address: 2250 MCKENDREE DRIVE
 City: WEST FRIENDSHIP State: MD Zip Code: 21794
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: APPLIED & APPROVED PERMITS
 Address: PO BOX 310
 City: PERRY HALL State: MD Zip Code: 21128
 Phone: 443-610-7514 Fax: _____
 Email: MICHELLE@APPLIEDANDAPPROVED.COM

Contractor Company: TEVIS OIL
 Contact Person: C NEVIN HAINES
 Address: 1618 N MAIN STREET
 City: HAMPSTEAD State: MD Zip Code: 21074
 License No.: 468
 Phone: 410-984-0399 Fax: _____
 Email: _____

Engineer/Architect Company: CONTRACTOR
 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 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:	
	Footings:	
	Roof:	
	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
Electric:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input checked="" 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 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 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: [Signature]
 MICHELLE@APPLIEDANDAPPROVED.COM
 Email Address
 PERMITS
 Title/Company

Print Name: MICHELLE CLANCY
 Date: 8/30/18

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

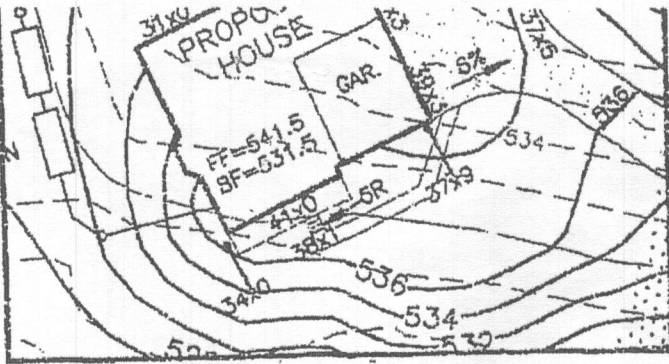
PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>9/18/2018</u>	<u>[Signature]</u>

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	\$ <u>110.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# <u>6766</u>

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



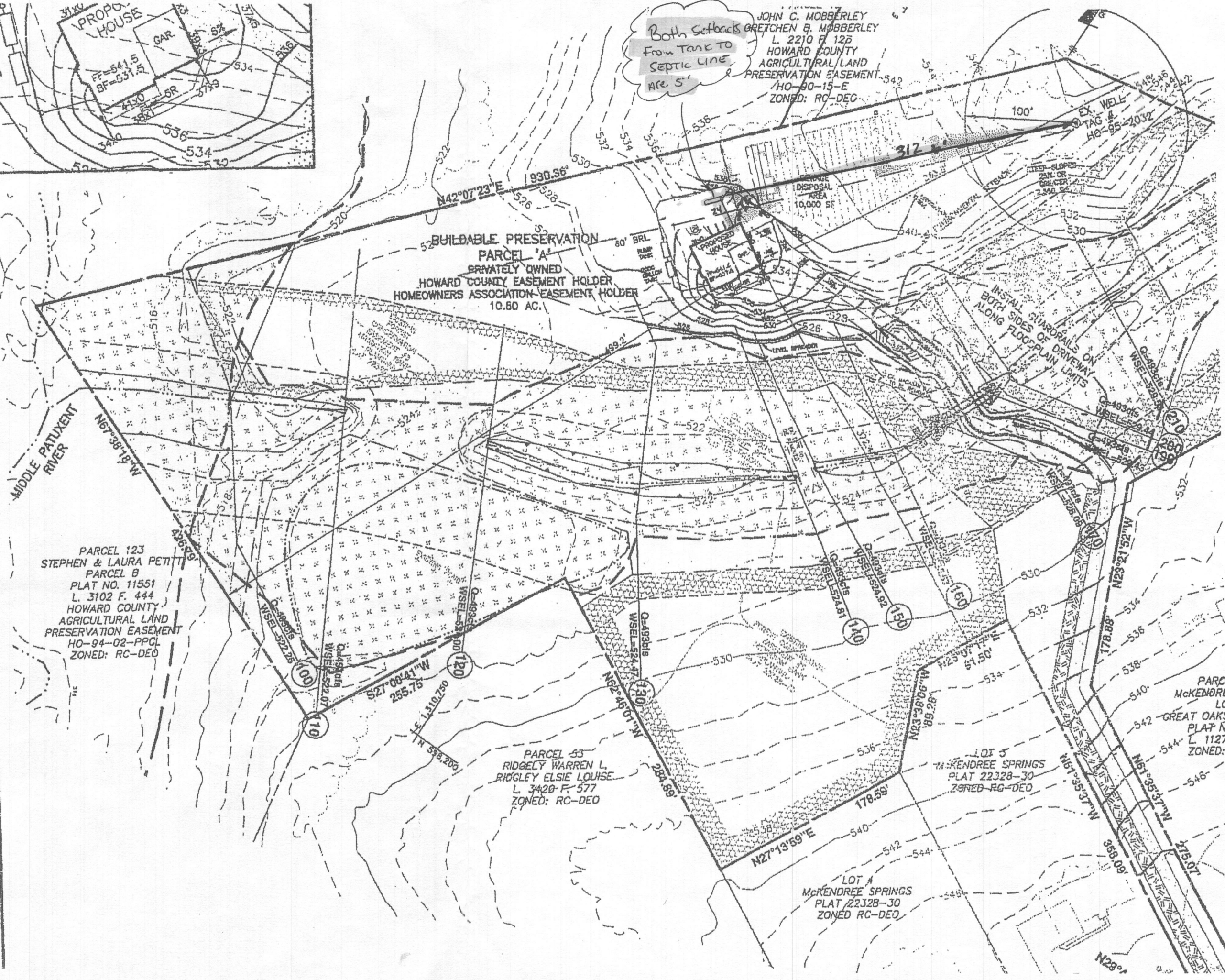
Both setbacks
From Tank to
Septic Line
are 5'

JOHN C. MOBBERLEY
GRETCHEN B. MOBBERLEY
L. 2210 F. 125
HOWARD COUNTY
AGRICULTURAL/LAND
PRESERVATION EASEMENT
HO-90-15-E
ZONED: RC-DEO

Scale 1"=80'

1250
McKendree Ion
w. Friendship Rd
21794

Approved 1318003084
9/18/2018 RAE



BUILDABLE PRESERVATION
PARCEL A
PRIVATELY OWNED
HOWARD COUNTY EASEMENT HOLDER
HOMEOWNERS ASSOCIATION EASEMENT HOLDER
10.60 AC.

PARCEL 123
STEPHEN & LAURA PETTIT
PARCEL B
PLAT NO. 11551
L. 3102 F. 444
HOWARD COUNTY
AGRICULTURAL LAND
PRESERVATION EASEMENT
HO-94-02-PPCL
ZONED: RC-DEO

PARCEL 53
RIDGELY WARREN L.
RIDGELY ELSIE LOUISE
L. 3420 F. 577
ZONED: RC-DEO

LOT #
MCKENDREE SPRINGS
PLAT 22328-30
ZONED RC-DEO

PARC
MCKENDREE
LC
GREAT OAKS
PLAT N
L. 1127
ZONED: