



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: 6/27/18
Permit No.: B18002230

Building Address: 14115 Clarksville Pike
City: Highland State: Md. Zip Code: 20777
Suite/Apt. #: _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: _____
Section: _____ Area: _____ Lot: P-15
Tax Map: 0040 Parcel: 0454 Grid: 0021
Zoning: _____ Map Coordinates: _____ Lot Size: _____
Existing Use: SFD
Proposed Use: SFD
Estimated Construction Cost: \$ 54,000.00
Description of Work: Install 78 ground mounted Solar Panels, 2.34 KW
Occupant or Tenant: _____
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: Eugenia McCallam
Address: 14115 Clarksville Pike
City: Highland State: Md. Zip Code: 20777
Phone: 202-368-9609 Fax: 301-854-2383
Email: _____
Applicant's Name & Mailing Address (if other than stated herein)
Applicant's Name: _____
Address: 5681 Main St.
City: Elkridge State: Md. Zip Code: 21075
Phone: 410-579-2082 Fax: _____
Email: JStokes@SolarEnergyWorld.com
Contractor Company: Solar Energy World, Inc.
Contact Person: John Stokes
Address: 5681 Main St.
City: Elkridge State: Md. Zip Code: 21075
License No.: 127353
Phone: 410-579-2082 Fax: _____
Email: JStokes@SolarEnergyWorld.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"/> 1-2 SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: _____	<input type="checkbox"/> Death <input type="checkbox"/> Width
Gross area, sq. ft./floor: _____	1 st floor: _____
Area of construction (sq. ft.): _____	2 nd 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"/> Craw 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	<u>Multi-family Dwelling</u>
	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
<u>Water Supply</u>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
<u>Sewer Disposal</u>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Heating System</u>
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
<u>Sprinkler System:</u>
<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 THEREON; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS PERMIT; (5) THAT HE/SHE WILL MAINTAIN ACCESS TO ALL ADJACENT PROPERTIES AND TO ALL PUBLIC UTILITIES AT ALL TIMES; (6) THAT HE/SHE WILL MAINTAIN ACCESS TO ALL ADJACENT PROPERTIES AND TO ALL PUBLIC UTILITIES AT ALL TIMES; (7) THAT HE/SHE WILL MAINTAIN ACCESS TO ALL ADJACENT PROPERTIES AND TO ALL PUBLIC UTILITIES AT ALL TIMES.

Applicant's Signature: JStokes@SolarEnergyWorld.com
Email Address: SolarEnergyWorld.com
Title/Company: _____

Date: 8/16/18

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		
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START		

GPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side SL: _____
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	\$ 50
Tech Fee	\$ 5
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ 55.00
Sub-Total Paid	\$
Balance Due	\$
Check	\$ 0530

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