



# 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: 12343 Preakness Circle Ln.  
 City: Clarksville State: MD Zip Code: 21029  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Subdivision: 7101 Walnut Grove  
 Lot: 4 Tax Map: 0028 Parcel: 0074

Existing Use: unfinish basement  
 Proposed Use: Finish basement  
 Estimated Construction Cost: \$ 150,000.00

Description of Work: Finishing unfinished basement with (1) home office (1) lounge area (1) Billiards room (1) Bar area (1) Arcade area (1) Bunk room (1) Exercise room (1) Sprinkler bath (1) Media room Apx 2,700

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

Property Owner's Name: Mark Pallotta  
 Address: 12343 Preakness Circle Lane  
 City: Clarksville State: MD Zip Code: 21029  
 Phone: (703) 408-6056 Fax: \_\_\_\_\_  
 Email: markpallotta@gmail.com

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

Contractor Company: Shaw Remodeling  
 Contact Person: John Shaw  
 Address: 8901 Baltimore St  
 City: Savage State: MD Zip Code: 20763  
 License No. 040951  
 Phone: 301-395-9619 Fax: \_\_\_\_\_  
 Email: shawjf3@yahoo.com

Engineer/Architect Company: Jonathan Rivera  
 Responsible Design Prof.: \_\_\_\_\_  
 Address: 1240 Morgan Station Rd.  
 City: Woodbine State: \_\_\_\_\_ Zip Code: 21797  
 Phone: 413-266-5745 Fax: \_\_\_\_\_  
 Email: J.Rivera@JonathanRivera.com

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 <sup>st</sup> floor:	
	2 <sup>nd</sup> floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
	<input type="checkbox"/> Slab on Grade	
Construction type:	No. of Bedrooms:	
<input type="checkbox"/> Reinforced Concrete	Multi-family Dwelling	
<input type="checkbox"/> Structural Steel	No. of efficiency units:	
<input type="checkbox"/> Masonry	No. of 1 BR units:	
<input checked="" type="checkbox"/> Wood Frame	No. of 2 BR units:	
<input type="checkbox"/> State Certified Modular	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	
Electric:	<input checked="" 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 checked="" type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" 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 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: \_\_\_\_\_  
 Print Name: John Shaw  
 Email Address: John.Shaw.901@gmail.com  
 Title/Company: OWNER

Print Name: \_\_\_\_\_  
 Date: 8/28/18

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
 -FOR OFFICE USE ONLY-

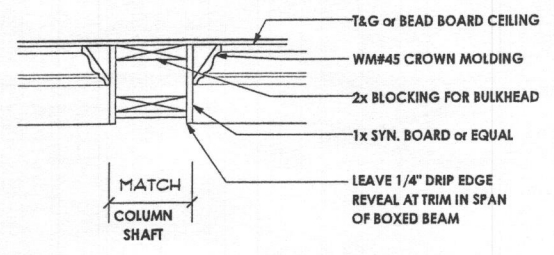
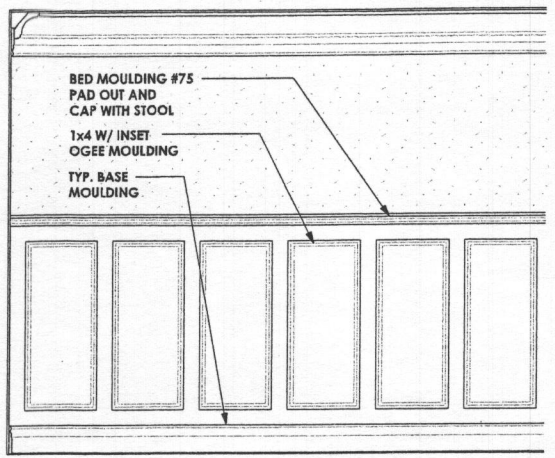
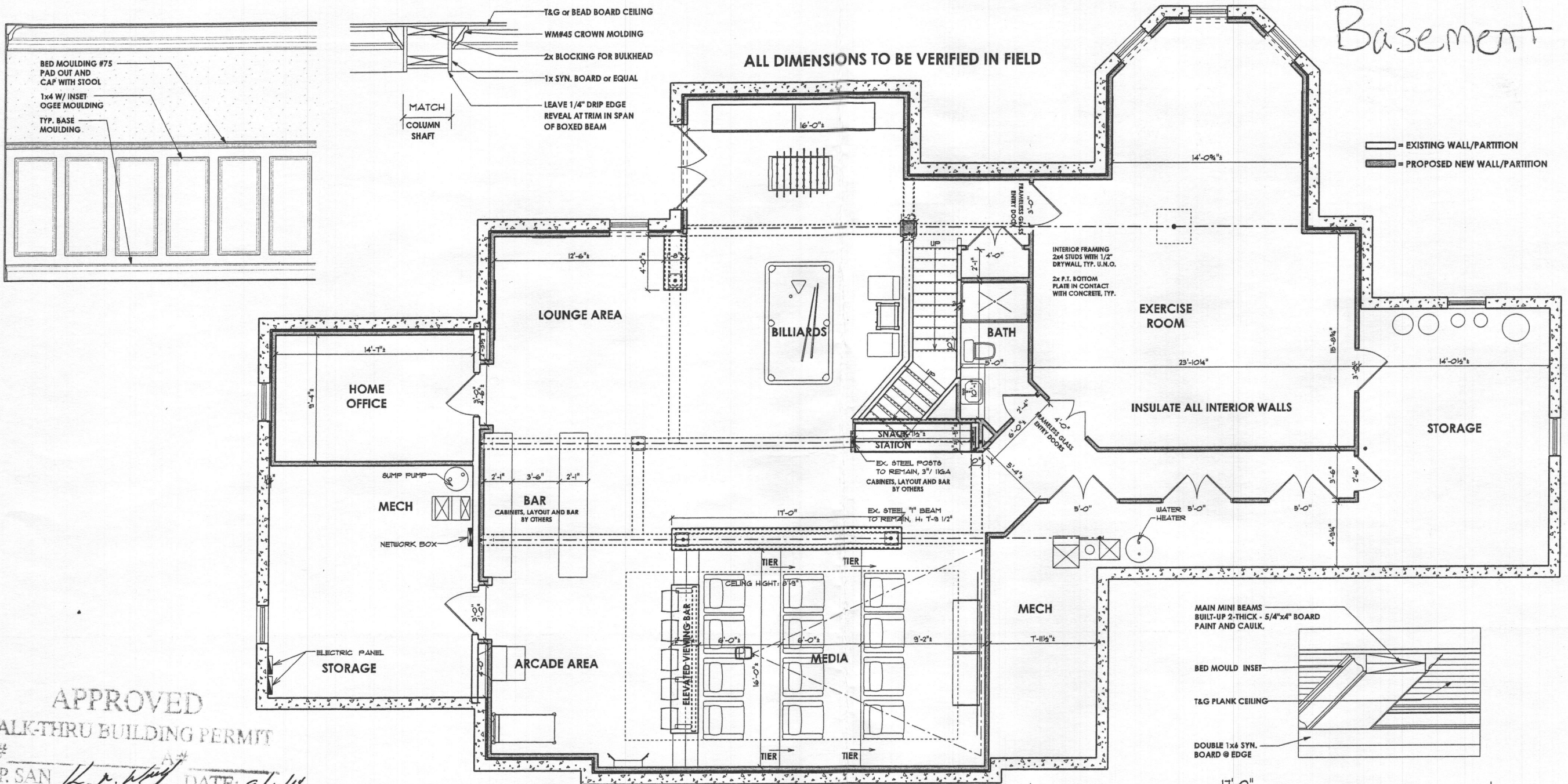
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>9/4/18</u>	<u>[Signature]</u>

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	\$	<u>135.00</u>
Permit Fee	\$	<u>135.00</u>
Tech Fee	\$	
Excise Tax	\$	
PSFS	\$	
Guaranty Fund	\$	
Add'l per Fee	\$	
Total Fees	\$	
Sub-Total Paid	\$	
Balance Due	\$	
Check	#	

Basement



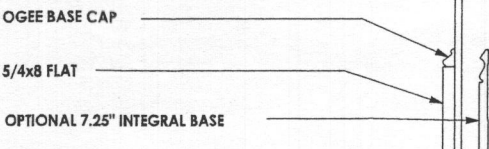
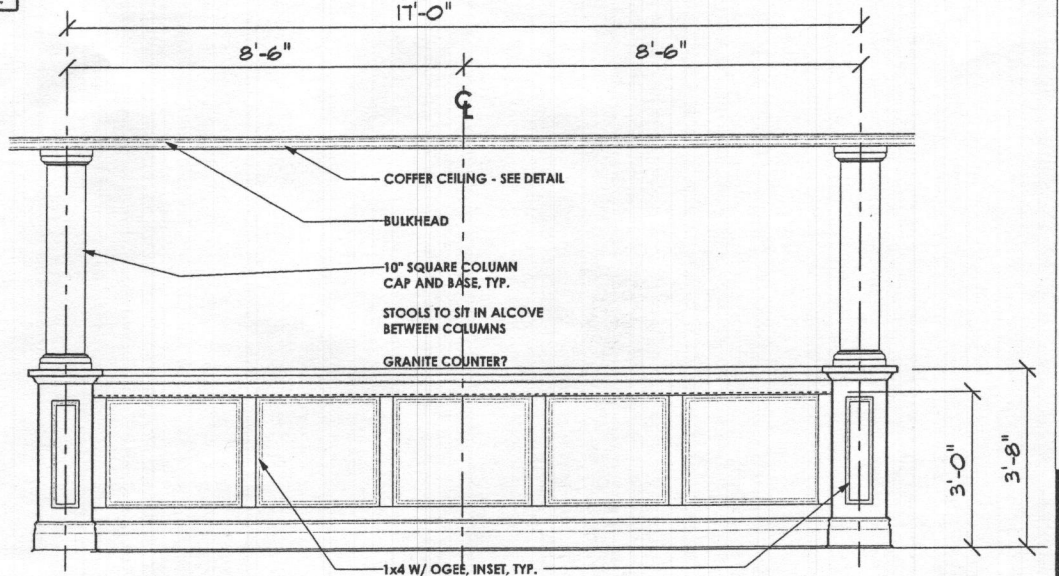
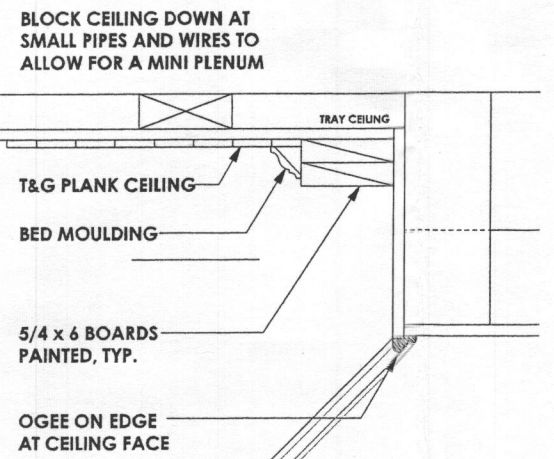
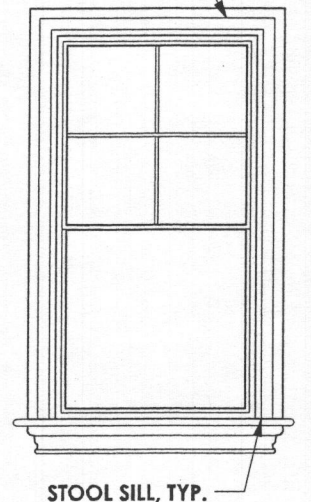
— = EXISTING WALL/PARTITION  
— = PROPOSED NEW WALL/PARTITION

PROFESSIONAL CERTIFICATION  
I certify that these documents were prepared or approved by me, and that I am a duly licensed professional architect under the laws of the State of Maryland, License Number #14678, Expiration Date: 6/30/2020

APPROVED  
WALK-THRU BUILDING PERMIT  
BP#  
APP. SAN *K. R. White* DATE: 9/4/18  
DESC. OF WORK: *Finish basement*

3 1/2" ADAMS CASING or WINDSOR CASING

*as shown.*  
*No additional balconies.*  
*Ex. Total BR = 5*



**Paliotta Residence**  
PROPOSED RENOVATION  
12343 Preakness Circle Lane, Clarksville, Maryland 21029

REVISIONS

1	8-16-18	REVIEW

SCALE: 1/4" = 1'-0"  
FINISHED PLAN  
**A1**  
PRINT DATE: Sunday, September 02, 2018