



# 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: 11524 STARDUST LN  
 City: ELLCOTT CITY State: MD Zip Code: 20742  
 Suite/Apt. # \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 16  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: 40,073sf

Existing Use: SINGLE FAMILY  
 Proposed Use: SINGLE FAMILY  
 Estimated Construction Cost: \$ 70K  
 Description of Work: 16'x16' SUNROOM WITH ATTACHED SUNDECK  
 Occupant or Tenant: \_\_\_\_\_  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: DAVE BRENNAN  
 Address: 11524 STARDUST LN  
 City: ELLCOTT CITY State: MD Zip Code: 20742  
 Phone: 410-371-5970 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Applicant's Name & Mailing Address, (if other than stated herein)**  
 Applicant's Name: CHRISTOPHER KELLY  
 Address: 8472 HEATHERWOLD DR  
 City: LAUREL State: MD Zip Code: 20723  
 Phone: 301-219-4299 Fax: \_\_\_\_\_  
 Email: CHRIS@DESIGNBUILDERSMD.COM

Contractor Company: DESIGN BUILDERS  
 Contact Person: JAMES MOYLAN  
 Address: 8472 HEATHERWOLD DR  
 City: LAUREL State: MD Zip Code: 20723  
 License No.: 124396  
 Phone: 301-219-0453 Fax: \_\_\_\_\_  
 Email: JAMES@DESIGNBUILDERSMD.COM

Engineer/Architect Company: \_\_\_\_\_  
 Responsible Design Prof.: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	<u>Depth</u>	<u>Width</u>
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	
<b>Construction type:</b>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	<b>Multi-family Dwelling</b>	
<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:	
<b>&gt; Roadside Tree Project Permit</b>	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
<b>Roadside Tree Project Permit #</b>	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<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	
<b>Heating System</b>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Grading Permit Number:</b>	
<b>Building Shell Permit Number:</b>	

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.

Chris Kelly  
 Applicant's Signature  
CHRIS@DESIGNBUILDERSMD.COM  
 Email Address  
PROJECT MANAGER / DESIGN BUILDERS  
 Title/Company

CHRISTOPHER KELLY  
 Print Name  
8/8/2013  
 Date

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>8-13-13</u>	<u>Dana Bernard</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	\$
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



CK 6120  
50.00  
CR 25530

PK



The Roots for Development

**BUILDING  
PERMIT  
SERVICES  
INC.**

2602 Parallel Path • Abingdon, Maryland 21009

(410) 515-1717 • FAX (410) 515-2213

September 1, 1999

**RECEIVED**

SEP 13 1999

LICENSES & PERMITS  
DIVISION

Howard County  
Inspections & Permits  
3430 Court House Dr.  
Ellicott City, Md. 21043

Attn: Avis Corbin

Re: Amendment  
Permit# B000118680  
11524 Stardust Ln. Lot# 16

Dear Avis,

Please amend the above referenced permit to include a **3 car garage**. I have attached site plans and a copy of the worksheets showing this option along with a rear sunroom.  
Thank you.

Sincerely,

Patricia A. Orla  
Agent for NVHomes

cc: Juli Berardeli  
File

cc: Health Dept  
DPZ

Brennam Res

APPROVED AS PROPOSED  
WITH NOTATION TO  
CLIENT THAT  
TERRACE OR DECK  
IS "CLEARER THAN"  
15" CLEARANCE  
TO SEPTIC  
TANK BACK  
IF YOU  
CAN  
REJECT  
8/2/00

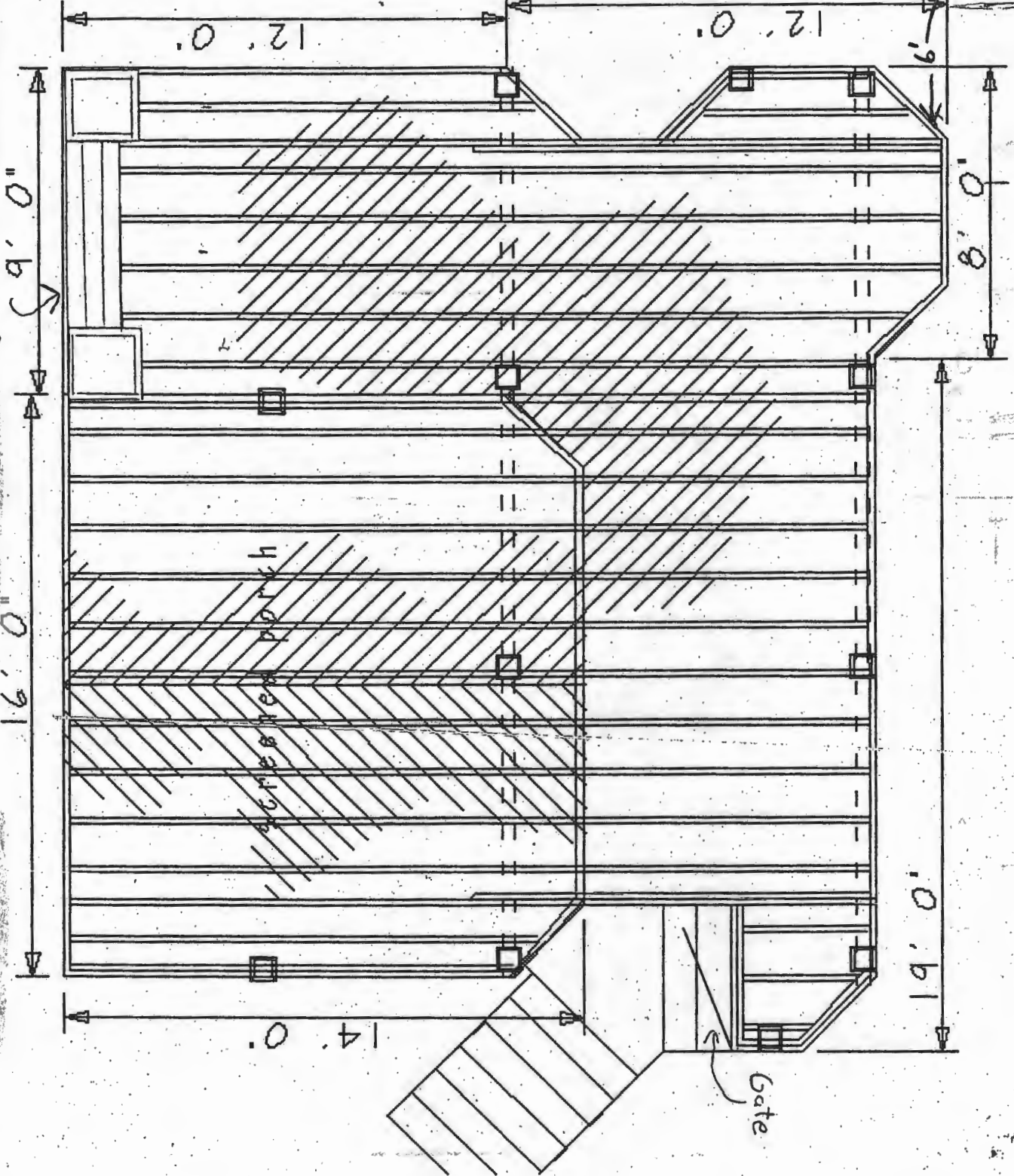
FILED  
MEMORANDUM  
8/17/00

FROM "PAINTED"  
DECK

2nd  
LAYER  
C2

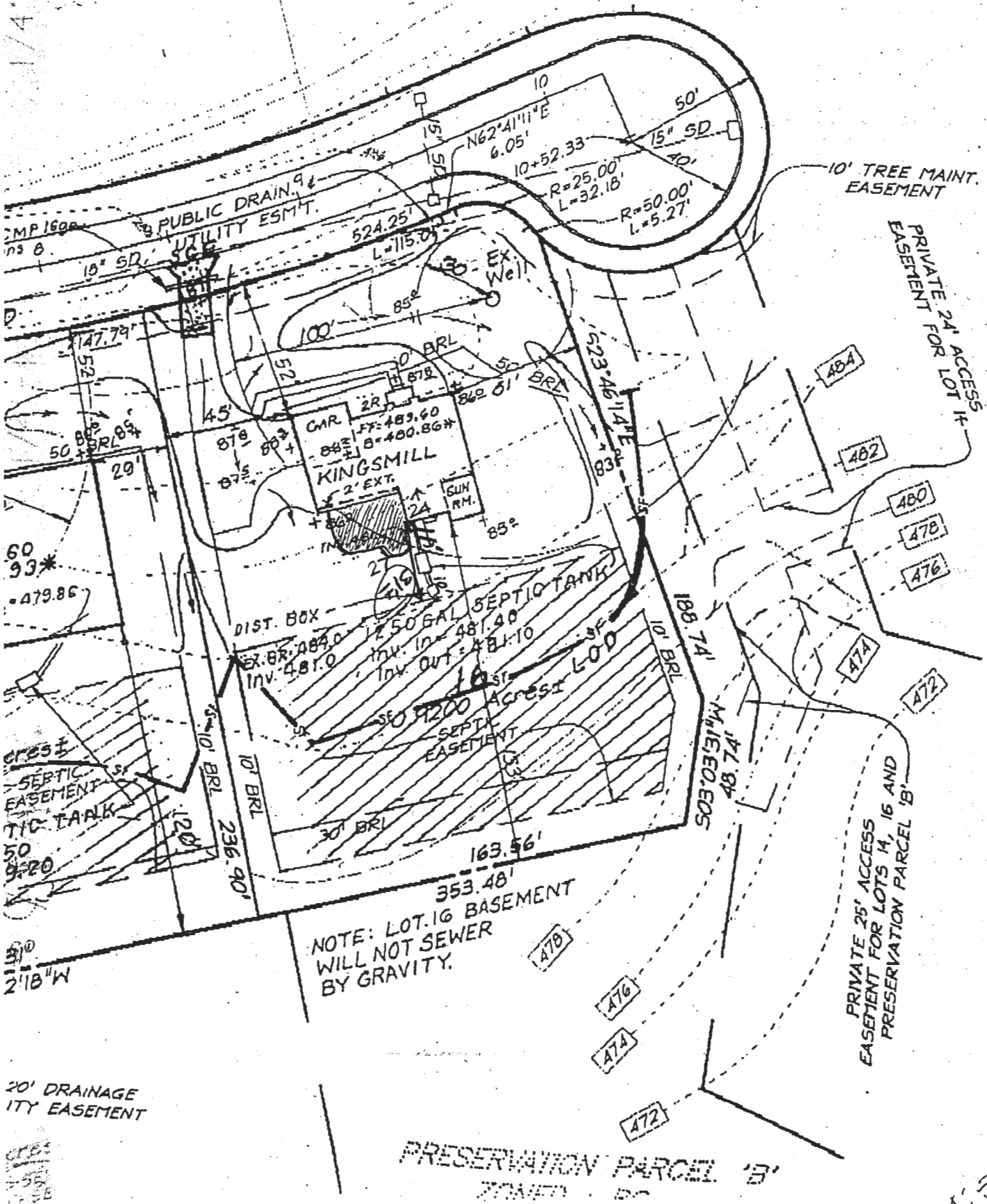
SEPTIC  
TANK

Bench, fl, 0.0



Brantwood 4x10  
 11524 Standard Lane  
 Septic Tank May be too close  
 to proposed Deck - Needs Full Ver  
 AP 8/10/00

Post-it® Fax Note	7671	Date	5-21-99 # of PAGES
To	AYNE FLAK	From	K.I.B.
Co./Dept.	N.V.	Co.	C.F.S. INC
Phone	BRANTWOOD	Phone #	
Fax #	LOT 16	Fax #	



NOTE: LOT. 16 BASEMENT  
 WILL NOT SEWER  
 BY GRAVITY.

PRESERVATION PARCEL 'B'

1:50