



# 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: 12040 OLD FREDERICK RD.  
City: ELICOTT CITY State: MD Zip Code: 21043  
Suite/Apt. # 0 SDP/WP/BA #: \_\_\_\_\_  
Subdivision: \_\_\_\_\_  
Lot: \_\_\_\_\_ Tax Map: 10 Parcel: 175

Existing Use: SFH w/ BARN + POOL  
Proposed Use: SFH w/ BARN + POOL AND POOL PAV.  
Estimated Construction Cost: \$ 39,000  
Description of Work: 18x30 PAVILION FOR POOL AREA SUN PROTECTION OPEN SIDES

Occupant/Tenant Name: SOUTH POLIC ENT.  
Was tenant space previously occupied?  Yes  No  
Contact Name: SHAWN BITTORIE  
Address: 12040 OLD FREDERICK RD  
City: ELICOTT CITY State: MD Zip Code: 21043  
Phone: 443.286.1491 Fax: \_\_\_\_\_  
Email: shawnbittorie@gmail.com

Property Owner's Name: SOUTH POLIC ENT.  
Address: 12040 OLD FREDERICK RD  
City: ELICOTT CITY State: MD Zip Code: 21043  
Phone: 443.286.1491 Fax: \_\_\_\_\_  
Email: shawnbittorie@gmail.com

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

Contractor Company: SAME AS OWNER  
Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
License No. : \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Engineer/Architect Company: JB HOME DESIGN  
Responsible Design Prof.: JOHN BUETS  
Address: 9416 CONCORD CT.  
City: BALT State: MD Zip Code: 21234  
Phone: 410.599.9587 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input 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	
<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>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	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input 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	
Electric	<input checked="" type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas	<input type="checkbox"/> Propane Gas
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: [Signature]  
Email Address: \_\_\_\_\_  
Title/Company: \_\_\_\_\_

Print Name: J. CHRIS PIPER  
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>9/25/19</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	\$
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

N 603450

ANTHONY W. HARRELL  
LAURA S. CORCORAN  
TM: 10 PARCEL: 179  
L. 16354 / F. 391  
5.91 AC.  
USE: RESIDENTIAL  
ZONED: RR-DEO

JOHN H. HEBNER  
SALLY S. HEBNER  
TM: 10 PARCEL: 297  
PEDDICORD PROPERTY  
L. 4098 / F. 102  
PLAT: 4339  
LOT: 4  
5.95 AC.  
USE: RESIDENTIAL  
ZONED: RR-DEO

SOUTH POLK  
ENTERPRISES, LLC.  
TM: 10 PARCEL: 175  
L. 16375 / F. 332  
5.53 AC.  
USE: RESIDENTIAL  
ZONED: RR-DEO

APPROVED  
WALK-THRU BUILDING PERMIT

BP# \_\_\_\_\_ A# \_\_\_\_\_  
APP. SAN \_\_\_\_\_ DATE: \_\_\_\_\_  
DESC. OF WORK: *Proposed 18' x 30' pool as shown*

ALTERNATIVE PRIVATE SDA #2  
12,087 SF

0.74 AC. DA TO DIVERSION FENCE  
 $Q_2 = 0.63$  cfs  
 $V_2 = 1.49$  fps

3.37 AC. DA TO EARTH DIKE  
 $Q_2 = 2.88$  cfs  
 $V_2 = 1.94$  fps

EX. 50' USE-IN-COMMON ACCESS RIGHT-OF-WAY  
L. 15300 / F. 67

APPROX. LOCATION OF EX. SEPTIC TRENCHES & DISPOSAL FIELD

EX. BARN

PROPOSED TENNIS COURT  
\*SPECIFICATIONS BY OTHERS

CLASS I MSHA RIPRAP OVER FILTER CLOTH  
L=10', W=10', d50=9"  
MIN. THICK=19"

APPROX. LOCATION OF EX. SEPTIC TANK (TO BE REMOVED)

APPROX. LOCATION OF EX. SEPTIC DRY WELL (TO BE ABANDONED)

