



EC/OK
AKH 9/30/19

Building Permit Application

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

DILP 2019 SEP 30 PM 12:5

Date Received: _____

Permit No.: B19003274

Building Address: 12601 Folly & Quarter Rd
 City: Ellicott City State: MD Zip Code: 21042
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Subdivision: Skeneley Manor Pm
 Lot: 1 Tax Map: 22 Parcel: 273

Existing Use: SFD
 Proposed Use: same
 Estimated Construction Cost: \$ 33,900.00
 Description of Work: Update exist. laundry room to include powder room and make storage area
powder room = 2'4" x 6'3/4" = 17.51
closet = 2' x 6' = 13.24

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

Property Owner's Name: John & Margaret Gallagher
 Address: 12601 Folly & Quarter Rd
 City: Ellicott City State: MD Zip Code: 21042
 Phone: 217-727-4313 Fax: _____
 Email: _____

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

Contractor Company: Starcom Design Build
 Contact Person: Betty Weichgenannt
 Address: 8825 M Columbia 100 Pkwy
 City: Columbia State: MD Zip Code: 21047
 License No.: 24247-01
 Phone: 410 997 7700 Fax: 410 997 7338
 Email: betty@

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:	Depth 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"/> Crawl 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	Multi-family Dwelling
<input checked="" type="checkbox"/> Roadside Tree Project Permit	No. of efficiency units:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	No. of 1 BR units:
Roadside Tree Project Permit #	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 type="checkbox"/> Yes <input checked="" 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 checked="" 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 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: Betty L Weichgenannt Print Name: Betty L Weichgenannt
 Email Address: betty@starcomdesignbuild.com Date: 9-30-19
 Title/Company: Starcom Design Build Corp

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>10/4/19</u>	<u>[Signature]</u>

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

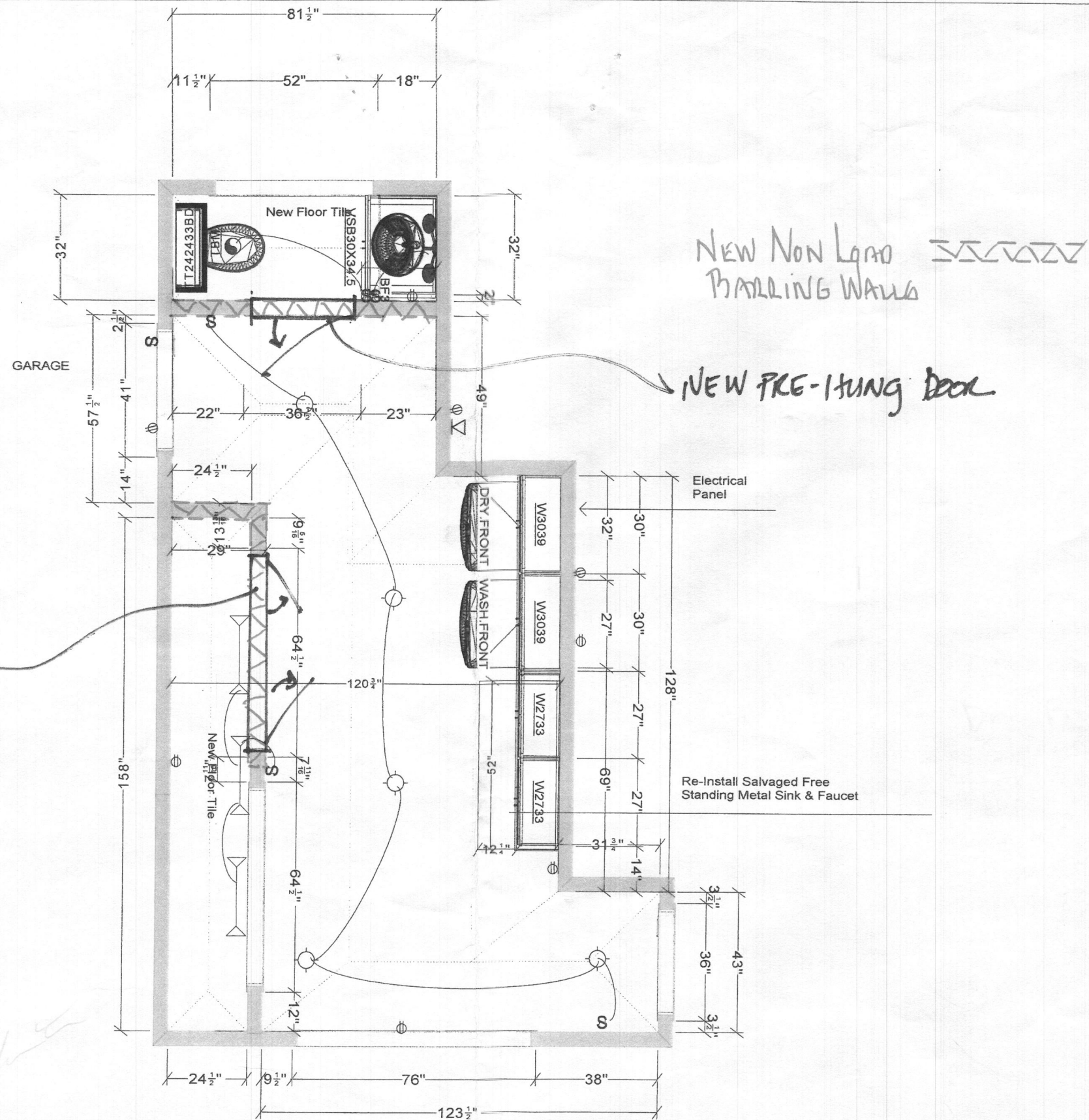
DPZ SETBACK INFORMATION	
Front:	
Rear:	
Side:	
Side St.:	
All minimum setbacks met?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:	
SDP/Red-line approval date:	

Filing Fee	\$ <u>25</u>
Permit Fee	\$ <u>50</u>
Tech Fee	\$ <u>5</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ <u>80.00</u>
Sub- Total Paid	\$
Balance Due	\$
Check	# <u>41998</u>

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

* PICK UP *

Approved R1E 10/4/19
 B19003274



NEW PRE-HUNG Double Door

All dimensions size designations given are subject to verification on job site and adjustment to fit job conditions.



This is an original design and must not be released or copied unless applicable fee has been paid or job order placed.

Designed: 7/17/2019
 Printed: 7/17/2019