



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.: B19003495

Building Address: 13107 All Doughtons Ln
 City: Columbia State: MD Zip Code: 21077
 Suite/Apt. #: HIGHLAND SDP/WP/BA #: _____
 Subdivision: _____
 Lot: _____ Tax Map: _____ Parcel: _____

Property Owner's Name: Zohra Asad Syed Asad
 Address: 17407 All Doughtons Ln
 City: Columbia State: MD Zip Code: _____
 Phone: 301-950-1558 Fax: _____
 Email: _____

Existing Use: Single Family Detached
 Proposed Use: SFD with Sport Court with Fence
 Estimated Construction Cost: \$ 15,000
 Description of Work: Install a 40' x 56' Sport court out of Asphalt with 10' High Fence

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

Contractor Company: OUTDOOR SOLUTIONS
 Contact Person: AL HUBER
 Address: 909 BEEFEST RD
 City: SPRINGS State: MD Zip Code: 21152
 License No.: 23872 MHIC
 Phone: 410-227-1510 Fax: _____
 Email: AL@OS-PAUS.COM

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

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:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<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:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<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 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 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 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: AL@OS-PAUS.COM
 Email Address: AL@OS-PAUS.COM
 Title/Company: PRESIDENT

Print Name: AL HUBER
 Date: 10/16/19

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>N. H. 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	\$ <u>50</u>
Tech Fee	\$ <u>5</u>
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$ <u>55.00</u>
Sub- Total Paid	\$
Balance Due	\$
Check	# <u>10132</u>

Distribution of Copies: White: Building Officials

Green: PSZA, Zoning

Yellow: PSZA, Engineering

Pink: Health

Gold: SHA

12407 All Daughters

Permit #
B19001322

MIKE
DAVIS

1 inch = 30 feet

THE EXISTING WELL SHOWN ON THIS PLAN (IDENTIFIED WITH THE WELL TAG NUMBER HO-95-1309) HAS BEEN FIELD LOCATED BY G.L.W. (PROFESSIONAL LAND SURVEYORS) AND IS ACCURATELY SHOWN ON THIS PLAN.

8' PUBLIC DRAINAGE & UTILITY ESMT. (P.N. 19877)

Approved Septic System Plan Howard County Health Department

Plan
Signature
Date 10-24-98

*Approved as shown
hold sent to contractor
try to adjust but cover the
So it is not but cover the
Clear out for septic line*

INITIAL SEPTIC AREA:
NO GRADING IN SEWAGE DISPOSAL
AREA. LOD SHOWN IS FOR THE
INSTALLATION OF THE INITIAL SEPTIC
SYSTEM ONLY.

3-CAR GARAGE
508.57± (B)
508.23± (F)

ASHBROOKE
ELV. F (rev.)
FFE=509.74±
BSE=499.90±
PORCH=509.24±
TOW=508.57±

spaced
4x4s
Cant
ALTERNATE 500' WELL CIRCLE

