



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: 10/11/19

Permit No.: EP900319

Building Address: 3115 Mesa Ct
City: Ellicott City State: MD Zip Code: 21042
Suite/Apt. #: _____ SDP/WP/BA #: _____
Subdivision: Gray Rock Farm Sbc 2
Lot: 36 Tax Map: 24 Parcel: 1178

Existing Use: SFD
Proposed Use: SFD + Deck
Estimated Construction Cost: \$ 108,285
Description of Work: Deck - 18x30 w/ 4x5 landing + steps + concrete 4x5 landing + steps

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

Property Owner's Name: Wally & Margaret H. Turk
Address: 3115 Mesa Ct
City: Ellicott City State: MD Zip Code: 21042
Phone: 410-271-9757 Fax: _____
Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: Montse P. Home Improvement
Address: 14143 Keensterke Dr
City: Woodbridge State: VA Zip Code: 22191
Phone: 571-404-9216 Fax: _____
Email: montse@homeimprovement.com

Contractor Company: Montse P. Home Improvement
Contact Person: Wally Turk
Address: 14143 Keensterke Dr
City: Woodbridge State: VA Zip Code: 22191
License No.: 99971 NTHIC
Phone: 703-2402-1281 Fax: _____
Email: montse@homeimprovement.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:	Depth	Width
Gross area, sq. ft./floor:	1st floor:	
	2nd 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:	
> 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 type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input checked="" type="checkbox"/> Public	
<input 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: Montse P. Home Improvement Print Name: Wally Turk
Email Address: montse@homeimprovement.com Date: 10/11/19
Authorized Agent: _____
Title/Company: _____

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

AGENCY	DATE	SIGNATURE OF APPROVAL	DPZ SETBACK INFORMATION	Filing Fee	\$
State Highways			Front:	Permit Fee	\$
Building Officials			Rear:	Tech Fee	\$
PSZA (Zoning)			Side:	Excise Tax	\$
PSZA (Engineering)			Side St.:	PSFS	\$
Health	<u>10/18/19</u>	<u>review not req'd</u>	All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No	Guaranty Fund	\$
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No			Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Add'l per Fee	\$
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START			Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Fees	\$
			Lot Coverage for New Town Zone:	Sub- Total Paid	\$
			SDP/Red-line approval date:	Balance Due	\$
				Check	#

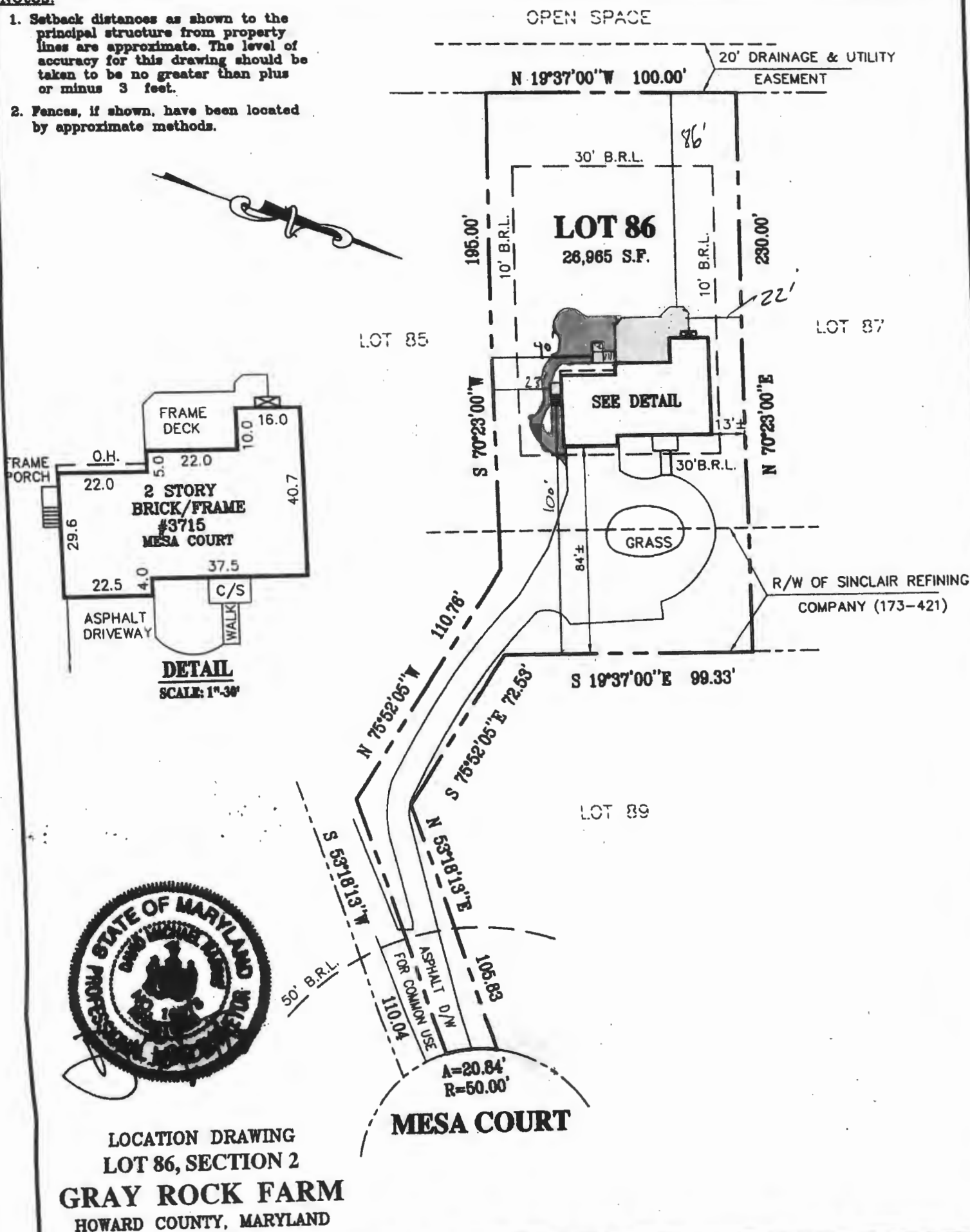
Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA


CONSUMER INFORMATION NOTES:

1. This plan is a benefit to a consumer insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing.
2. This plan is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.
3. This plan does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or re-financing.
4. Building line and/or Flood Zone information is taken from available sources and is subject to interpretation of originator.
5. No Title Report furnished.

Notes:

1. Setback distances as shown to the principal structure from property lines are approximate. The level of accuracy for this drawing should be taken to be no greater than plus or minus 3 feet.
2. Fences, if shown, have been located by approximate methods.



SURVEYOR'S CERTIFICATE		REFERENCES		SNIDER & ASSOCIATES LAND SURVEYORS 19544 Amaranth Drive Germantown, Maryland 20874 301/948-5100 Fax 301/948-1286 WWW.SNIDERSURVEYS.COM	
THE INFORMATION SHOWN HEREON HAS BEEN BASED UPON THE RESULTS OF A FIELD INSPECTION PURSUANT TO THE DEED OR PLAT OF RECORD. EXISTING STRUCTURES SHOWN HAVE BEEN FIELD LOCATED BASED UPON MEASUREMENTS FROM PROPERTY MARKERS FOUND OR FROM EVIDENCE OF LINES OF APPARENT OCCUPATION.		PLAT BK. PLAT NO. 5880		DATE OF LOCATIONS WALL CHECK:	SCALE: 1" = 60' DRAWN BY: D.M.L.
MARYLAND PROFESSIONAL LAND SURVEYOR REG. NO. 10978 Expires: 07-25-2020		LIBER FOLIO	HSE. LOC.: 10-02-19	JOB NO.: 02-4796	