



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: 16241 FREDERICK RD.
 City: WOODBINE State: MD Zip Code: 21797
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Subdivision: STANLEY MILLER PROPERTY
 Lot: 2 Tax Map: 7 Parcel: _____

Existing Use: _____
 Proposed Use: _____
 Estimated Construction Cost: \$ 15,000.00
 Description of Work: ADD DECK 25' x 20' WITH STEPS

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

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" 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	

Property Owner's Name: ROBERT W SURRETTE JR
 Address: 13258 STYER CT.
 City: HIGHLAND State: MD Zip Code: 20777
 Phone: 240-508-1428 Fax: _____
 Email: BOB.AYER@CORPORATION.COM

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

Contractor Company: SHRYOCK CONSTRUCTION
 Contact Person: ROBERT SURRETTE
 Address: 13258 STYER CT.
 City: HIGHLAND State: MD Zip Code: 20777
 License No.: _____
 Phone: 240-508-1428 Fax: _____
 Email: BOB

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

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 type="checkbox"/> Private	
Sewage Disposal	
<input 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: [Signature]
 Print Name: ROBERT W SURRETTE JR
 Email Address: BOB@AYERCORPORATION.COM
 Date: 4-25-19
 Title/Company: AYER CORP PRESIDENT

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

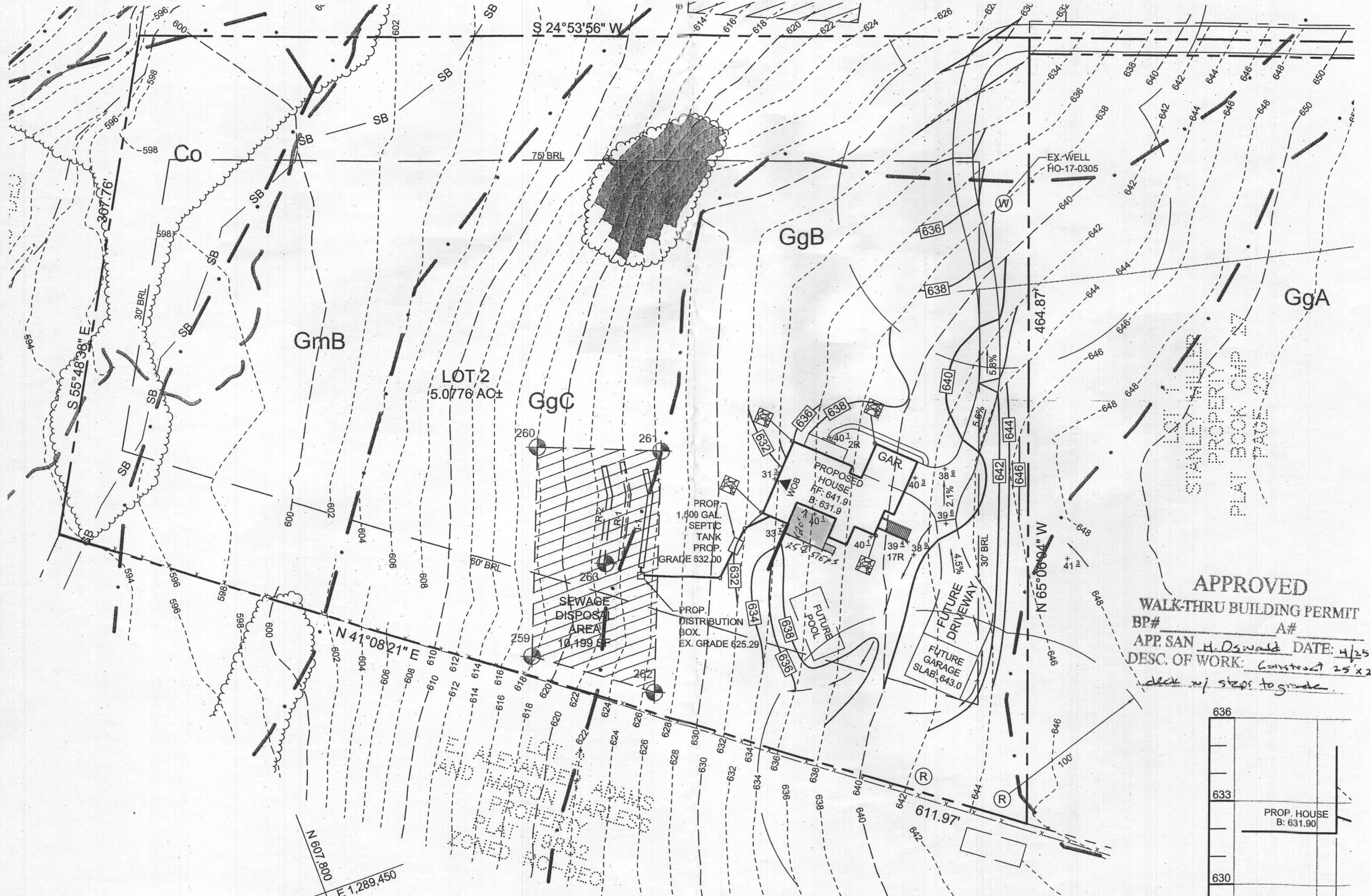
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>4/25/19</u>	<u>[Signature]</u>

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



ALL INFORMATION
 ON THIS MAP IS
 FOR INFORMATION
 ONLY. IT IS NOT
 TO BE USED FOR
 ANY PURPOSE
 WITHOUT THE
 WRITTEN
 PERMISSION OF
 THE
 PLANNING
 DEPARTMENT.

STANLEY HILL
 PROPERTY
 PLAT BOOK CMP
 PAGE 92

APPROVED
 WALK-THRU BUILDING PERMIT
 BP# _____ A# _____
 APP. SAN H. Oswald DATE: 4/25/19
 DESC. OF WORK: Construct 25'x20'
deck w/ steps to grade.

636	
633	PROP. HOUSE B: 631.90
630	

N 607.800
 E 1,289.450

S 24°53'56" W

S 55°48'38" E

N 41°08'21" E

N 65°06'04" W

LOT 2
5.0776 AC±

PROP.
 1,500 GAL.
 SEPTIC
 TANK
 PROP.
 GRADE 632.00

SEWAGE
 DISPOSAL
 AREA
 10,199 S

PROP.
 DISTRIBUTION
 BOX.
 EX. GRADE 625.29

PROPOSED
 HOUSE
 RF: 641.91
 B: 631.9

FUTURE
 GARAGE
 SLAB: 643.0

EX. WELL
 HO-17-0305

611.97'

464.87'

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