

Health

RECEIVED

OCT 13 2020

PERMIT NUMBER: B 20003658

DATE ACCEPTED:

LICENSES & PERMITS DIVISION



RESIDENTIAL BUILDING PERMIT APPLICATION

HOWARD COUNTY DEPARTMENT OF INSPECTIONS, LICENSES, AND PERMITS
3430 COURT HOUSE DRIVE, ELLICOTT CITY, MD 21043 - PHONE: (410) 313-2455 OPTION #4
www.howardcountymd.gov

BUILDING SITE ADDRESS REQUIRED

Street Address: 14125 Howard Road
City: Dayton
State: MD
Zip Code: 21036
Subdivision/Village/Complex Name:
Lot:
Tax Map:
Parcel:
Grading Permit #:

DESCRIPTION OF WORK REQUIRED

Existing Use: SFD
Proposed Use: SFD
Estimated Cost: \$ 4950.00
Trade Work to Be Completed (Separate Permits Required):
Install 1-1000 gallon above ground propane storage tank.

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): John Bartell
Owner's Street Address: 14125 Howard Road
City: Dayton
State: MD
Zip Code: 21036
Phone: 518-775-3079
Email:

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: Thompson Gas
Street Address: 1600 Sparrows Point
City: Baltimore
State: MD
Zip Code: 21249
Phone: 443-826-0506
Email: Aduiso@ThompsonGas.com

CONTRACTOR INFORMATION REQUIRED

Business Name: Thompson Gas
Licensee's Name: Randall Thompson
License #: 60003
Street Address: 5260 Westview drive Suite 200
City: Frederick
State: MD
Zip Code: 21703
Phone: 443-955-5494
Email: Aduiso@ThompsonGas.com

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name:
Name:
Street Address:
City:
State:
Zip Code:
Phone:
Email:

BUILDING CHARACTERISTICS REQUIRED

Primary Structure: SF Dwelling
Utilities: Electric, Gas
Water Supply: Private (Well)
Sewage Disposal: Private (Septic)
Heating System: Propane
Sprinkler System: NFPA 13
Fire Alarm System: No

ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Model Name & Options:
of Bedrooms (SF):
of efficiency units (MF*):
of 1 BR (MF*):
of 2 BR (MF*):
of 3 BR (MF*):
Rooms:
Full Baths:
Half Baths:
Fireplaces:
Garage/Carport Info:
Basement/Foundation Info:
1st Fl Width:
1st Fl Depth:
2nd Fl Width:
2nd Fl Depth:
Bsmt Width:
Bsmt Depth:
Energy Method:
Gross Area:
Occupiable Area:

AGREEMENT/ DISCALIMER REQUIRED

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 ORIGINAL SIGNATURE
DATE SIGNED 10.8.20

FOR OFFICE USE ONLY CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS:
PR, DPZ, DED, Health, SHA, CID
SUBMITTAL FEES:
PAYMENT:
ACCEPTED BY:

