

RECEIVED

PERMIT NUMBER: B20003886

DATE ACCEPTED:

OCT 27 2020

**RESIDENTIAL BUILDING PERMIT APPLICATION** LICENSES & PERMITS DIVISION  
 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: **11030 Dorsch Farm Road** Unit: \_\_\_\_\_  
 City: **Ellicott City** State: **MD** Zip Code: **21042**  
 Subdivision/Village/Complex Name: **Gaither Hunt** SDP/WP/BA #: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Tax Map: \_\_\_\_\_ Parcel: **03337995** Grading Permit #: \_\_\_\_\_

**DESCRIPTION OF WORK** REQUIRED

Existing Use: **Unfinished Basement** Proposed Use: **Finished Basement** Estimated Cost: **\$25,000.00**  
 Trade Work to Be Completed (Separate Permits Required):  Mechanical (HVACR)  Electrical  Plumbing  None  
**1,400 square feet. Bedroom 14.5' x 12', New Egress will be added to the bedroom, Closet attached to the bedroom 5' x 7', Bathroom 5' x 11', Media Room 15' x 16', Game Room 29' x 24', Storage Closet 5' x 10', Wet Bar 11' x 12'**

**PROPERTY OWNER INFORMATION** REQUIRED

Owner(s) Name(s) (As it appears on tax records): **Michael and Beverly Brennan** Primary Residence:  Yes  No  
 Owner's Street Address: **11030 Dorsch Farm Road**  
 City: **Ellicott City** State: **MD** Zip Code: **21042**  
 Phone: **(410) 493-8640** Email: **mb35412@gmail.com**

**APPLICANT NAME** REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: **n/a** Contact Name: **Michael Brennan**  
 Street Address: **11030 Dorsch Farm Road**  
 City: **Ellicott City** State: **MD** Zip Code: **21042**  
 Phone: **(410) 493-8640** Email: **mb35412@gmail.com**

**CONTRACTOR INFORMATION** REQUIRED

Business Name: **Owner acting as the general contractor - it is my property and my primary residence.**  
 Licensee's Name: \_\_\_\_\_ License #: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**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  SF Townhouse  SF Duplex  Mobile Home  Multi-Family Dwelling (MF\*) Condo:  Yes  No  
 Utilities:  Electric  Gas Water Supply:  Public  Private (Well) Sewage Disposal:  Public  Private (Septic)  
 Heating System:  Electric  Natural Gas  Propane  Other: \_\_\_\_\_ Roadside Tree Project:  No  Yes: # \_\_\_\_\_  
 Sprinkler System:  NFPA 13  NFPA 13R  NFPA 13D  None Fire Alarm System:  Yes  No  Voice Evac

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

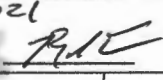
Model Name & Options: **Ryan - Highgrove**  
 # of Bedrooms (SF): **4** # of efficiency units (MF\*): \_\_\_\_\_ # of 1 BR (MF\*): \_\_\_\_\_ # of 2 BR (MF\*): \_\_\_\_\_ # of 3 BR (MF\*): \_\_\_\_\_  
 # Rooms: **12** # Full Baths: **3** # Half Baths: **1** # Fireplaces: **1**  
 Garage/Carport Info:  Attached Garage  Detached Garage  Integral Garage  Carport  None  
 Basement/Foundation Info:  Slab on Grade  Post & Pier  Unfinished Basement  Finished Basement:  Full or  Partial  
 1<sup>st</sup> Fl Width: \_\_\_\_\_ 1<sup>st</sup> Fl Depth: \_\_\_\_\_ 2<sup>nd</sup> Fl Width: \_\_\_\_\_ 2<sup>nd</sup> Fl Depth: \_\_\_\_\_ Bsmt Width: **60** Bsmt Depth: **40**  
 Energy Method:  Prescriptive  Performance  UA Alternative  ERI Gross Area: \_\_\_\_\_ sq ft Occupiable Area: **4,478** sq ft

**AGREEMENT/ DISCALIMER** REQUIRED

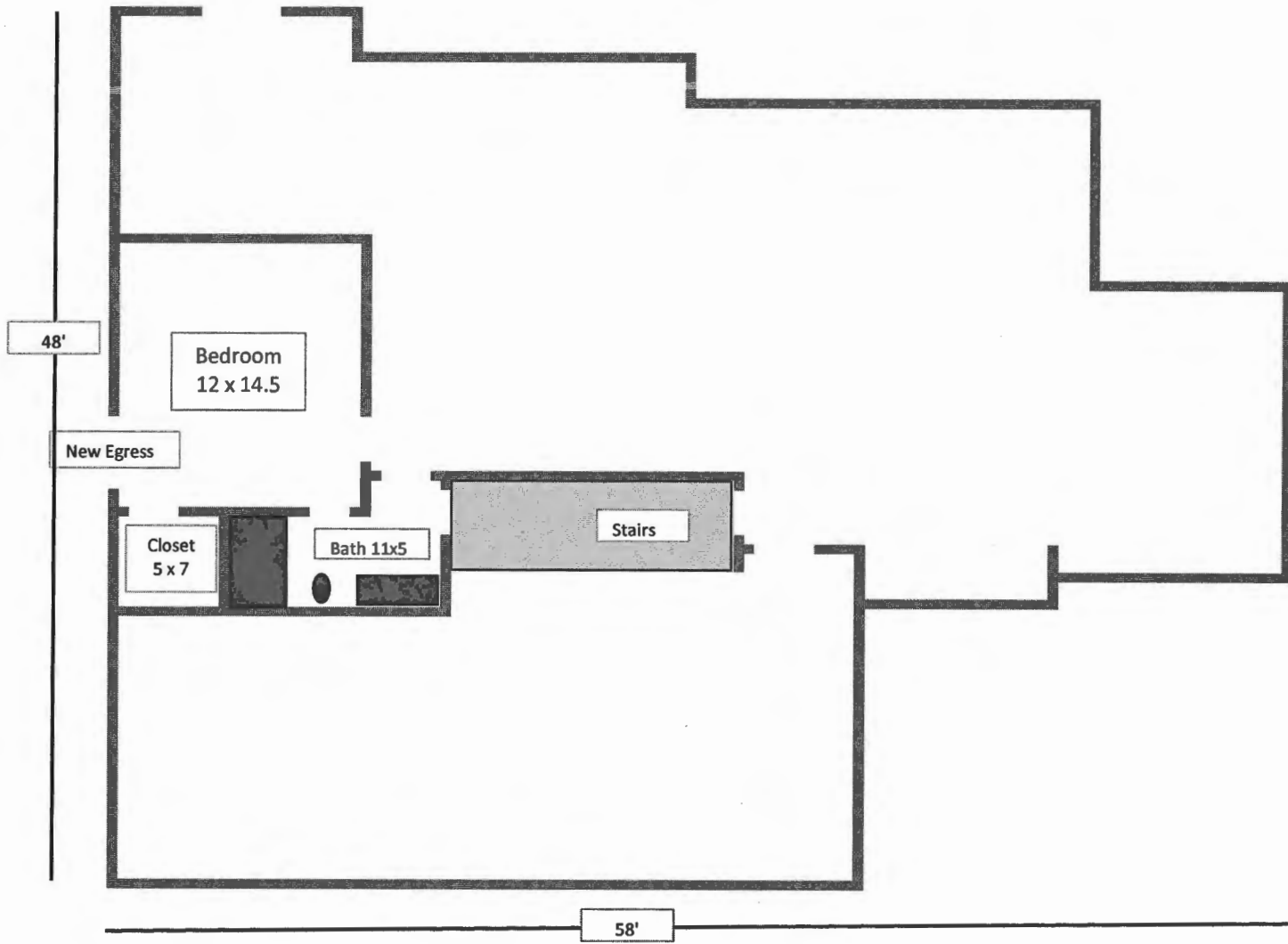
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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.

 10/27/2020  
 APPLICANT'S ORIGINAL SIGNATURE DATE SIGNED

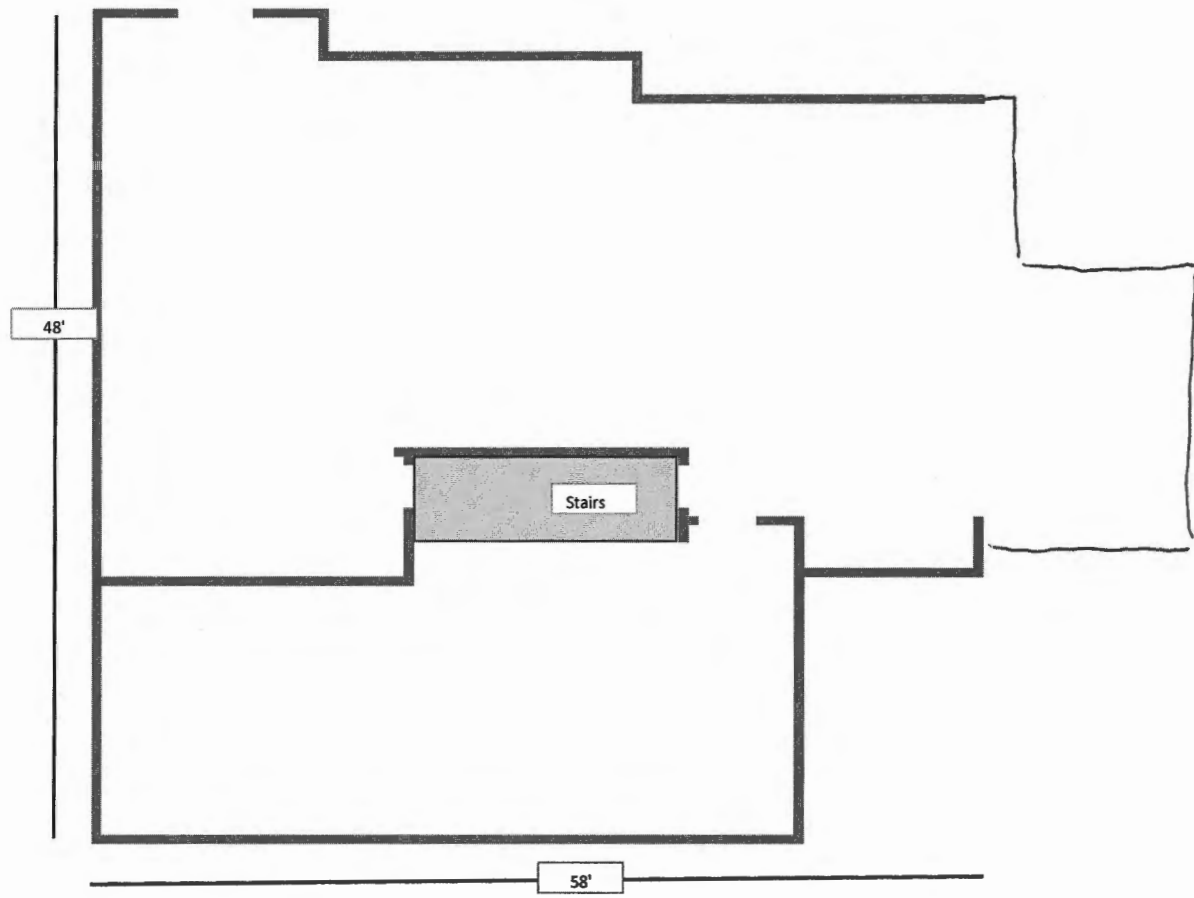
**FOR OFFICE USE ONLY** CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

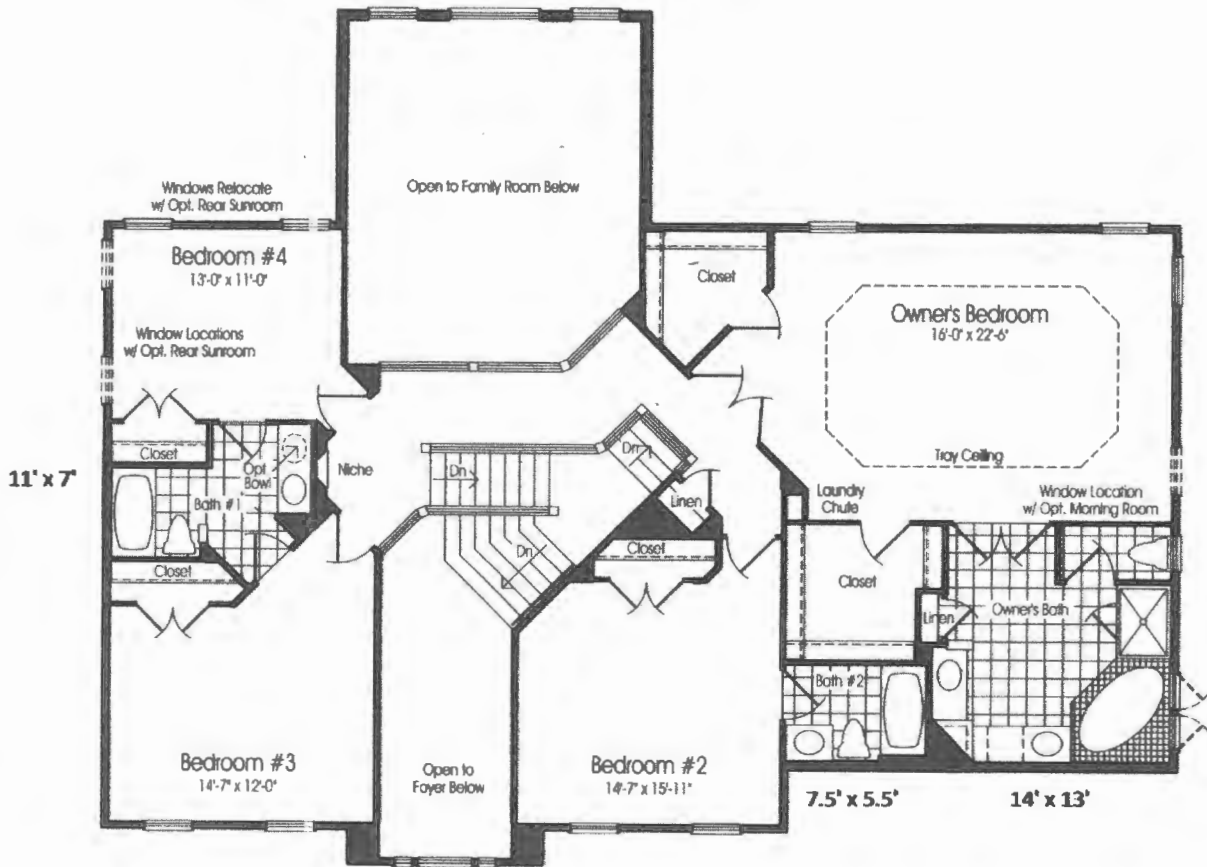
**AGENCIES REQUIRED/APPROVALS:**  
 PR \_\_\_\_\_  DPZ \_\_\_\_\_  DED \_\_\_\_\_  Health 3/16/2021   SHA \_\_\_\_\_  CID \_\_\_\_\_  
 SUBMITTAL FEES: \_\_\_\_\_ PAYMENT: \_\_\_\_\_ ACCEPTED BY: \_\_\_\_\_

Michael Brennan  
11030 Dorsch Farm Road, Ellicott City, 21042  
Basement  
Floorplan - Proposed Bedroom and Bath



Michael Brennan  
11030 Dorsch Farm Road, Ellicott City, 21042  
Basement  
Floorplan - Unfinished





Second Floor

Michael Brennan  
11030 Dorsch Farm Road, Ellicott City, 21042  
Basement  
Floorplan

B20003886  
Approved R/E  
3/16/2021

