



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: 11318 OLD HOPKINS RD
City: CLARKSVILLE State: MD Zip Code: 21029
Suite/Apt. # _____ SDP/WP/BA #: _____
Subdivision: 'HALLMARK' SECTION ONE
Lot: 16 Tax Map: PLA CMT 5868 Parcel: _____

Property Owner's Name: SUSAN LEE
Address: 11318 OLD HOPKINS RD
City: CLARKSVILLE State: MD Zip Code: 21029
Phone: 410-948-1113 Fax: _____
Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
Applicant's Name: EVERGREEN Fence + Deck
Address: PO Box 274
City: BROOKVILLE State: MD Zip Code: 20835
Phone: 301.774.2211 Fax: 301.774.3028
Email: evergreenfence@verizon.net

Contractor Company: Same as appl. above
Contact Person: Natalie and Mark Dillon
Address: _____
City: _____ State: _____ Zip Code: _____
License No.: 49311
Phone: _____ Fax: _____
Email: _____

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

Existing Use: SF. WIDECK
Proposed Use: SCREENED PORCH
Estimated Construction Cost: \$ 29,000-
Description of Work: 24' X 10' A-FRAME PORCH
ATTACHED TO EXISTING HOUSE/ADDITION; ALSO
ALSO SQUARE OFF EXISTING DECK, RELOCATING
STEPS + REPLACE RAIL
Occupant/Tenant Name: _____
Was tenant space previously occupied? Yes No
Contact Name: SEE APPL
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 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: _____	

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:	
	Footings:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Roof:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> State Certified Modular	
Roadside Tree Project Permit #	<input type="checkbox"/> Manufactured Home	

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.

Natalie X. Dillon
Applicant's Signature
evergreenfence@verizon.net
Email Address
EVERGREEN Fence + Deck
Title/Company

NATALIE DILLON
Print Name
1/31/19
Date

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>1/31/19</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	#

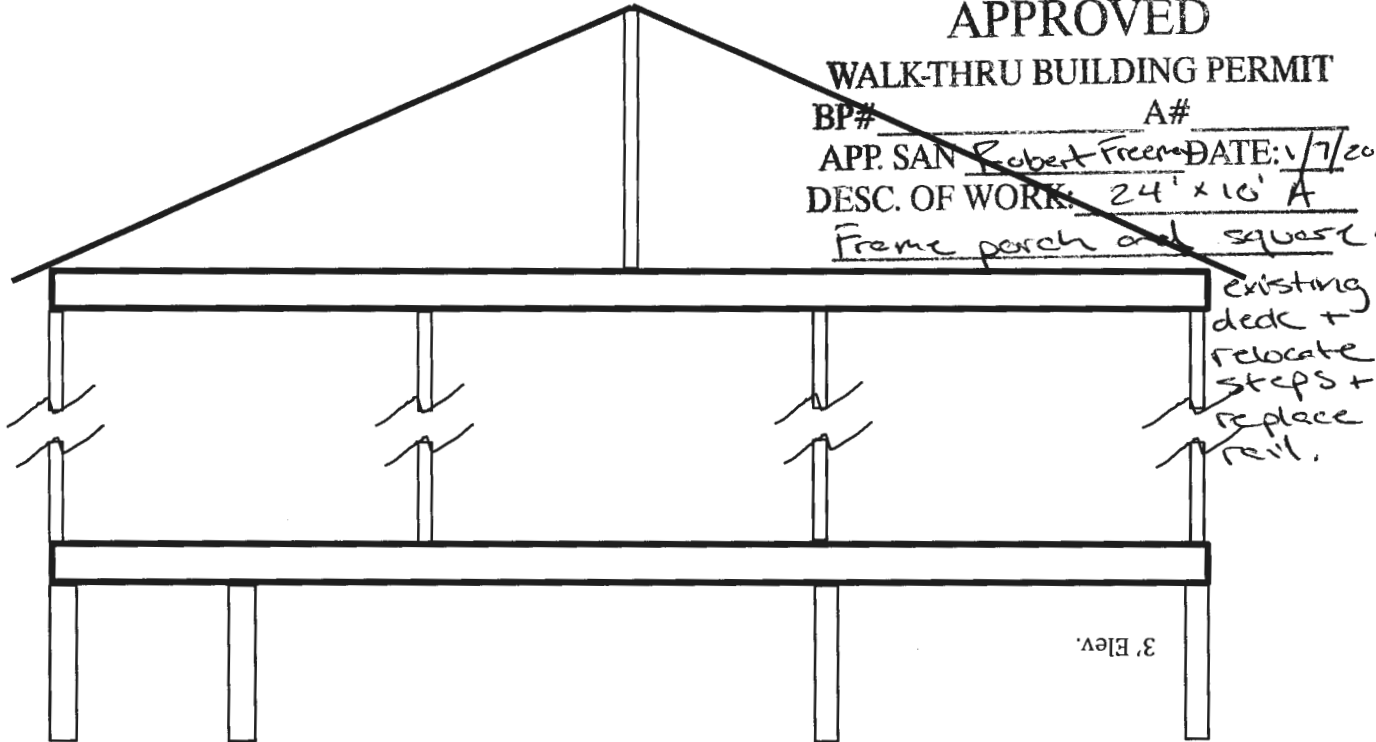
Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

SUSAN LEE PORCH
11318 Old Hopkins Rd, Clarksville, MD 21029

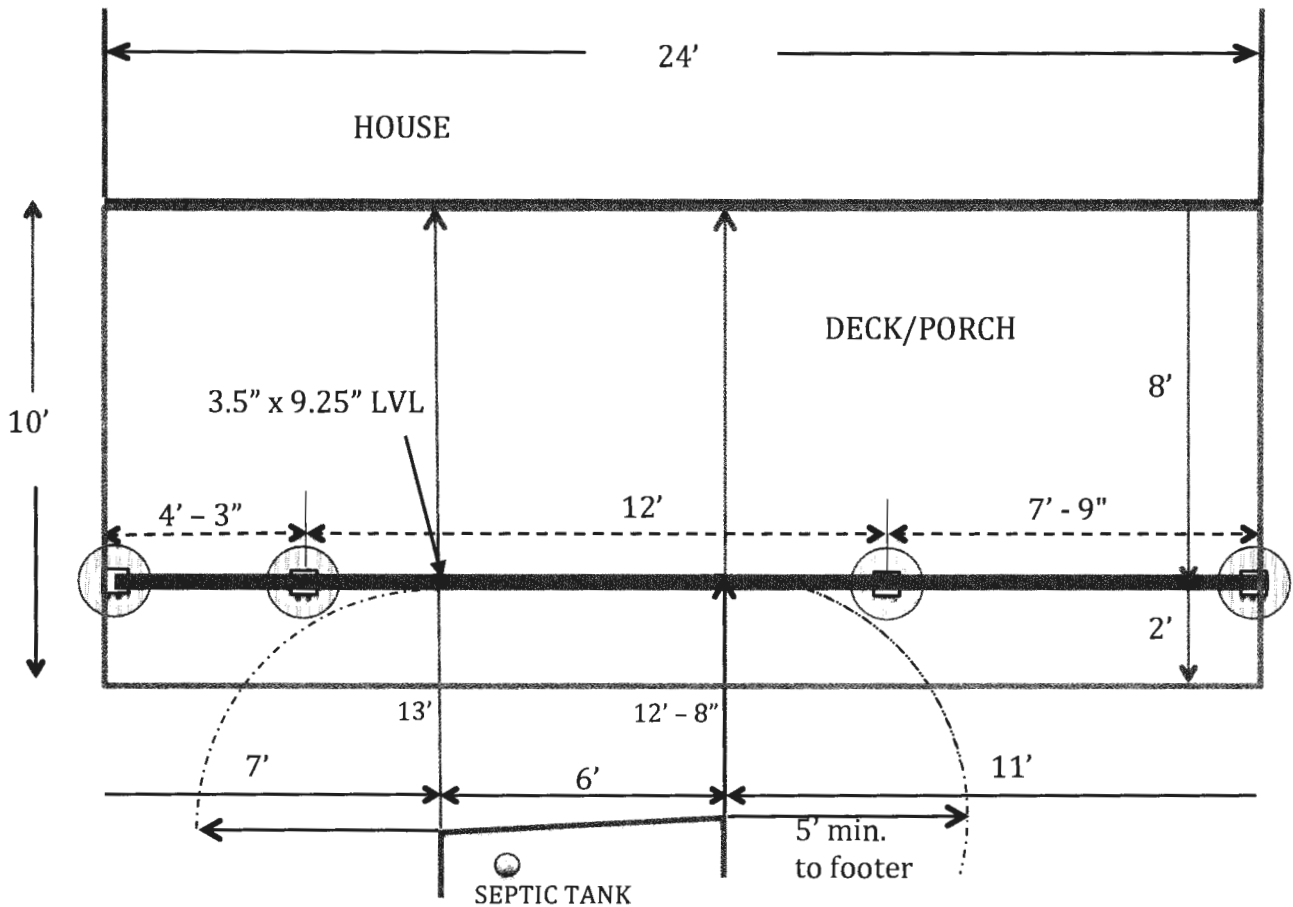
APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____
APP. SAN Robert Freeman DATE: 1/7/2019
DESC. OF WORK: 24' x 10' A
Frame porch and square off



FRONT ELEVATION

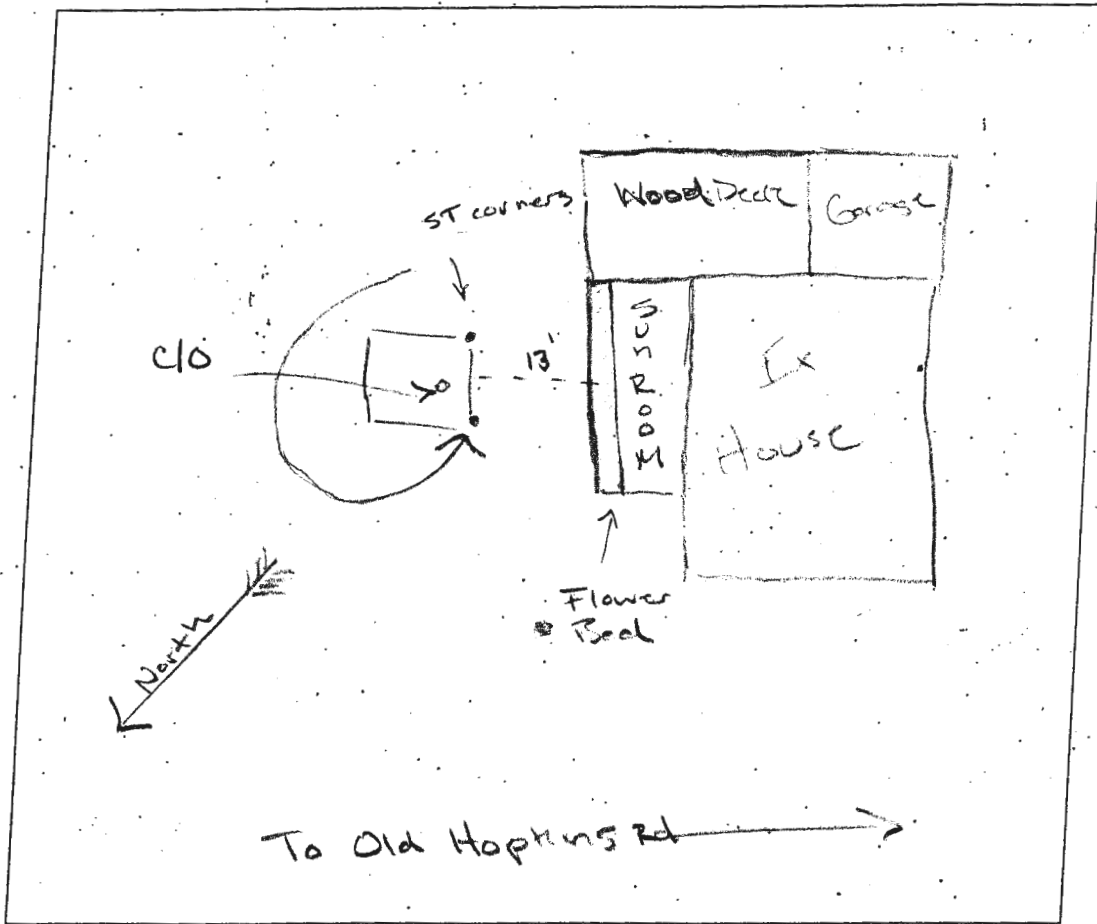


FOOTER AND FRAMING PLAN

SITE INSPECTION SHEET

OWNER: Sean Lee PHONE #: _____
ADDRESS: 1128 Old Hopkins CONTRACTOR: _____
Clarksville WELL TAG#: HO-73-2591
SUBDIVISION: Hallmark LOT: 16 COUNTY#: Howard
PROPOSAL: Walk Thru to add 24'x10' A frame
porch.

LOCATION DIAGRAM



COMMENTS: Site plan for building permit is accurate.
13' between septic tank and house. Footers to A frame
porch will maintain a 5' setback to tank as shown
in diagram provided with building permit. From the surface
the septic system does not appear to be failing. Well

DATE: 1/6/2019 INSPECTOR: Robert Freeman

appears to be up to code and in good condition w/ secure two piece cap. Well is GTS located.