



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.: B20002671

Building Address: 11790 FARSHIDE RD
City: EC State: MD Zip Code: 21042
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: 2040
Section: _____ Area: _____ Lot: 49
Tax Map: 0023 Parcel: 0126 Grid: 0021
Zoning: _____ Map Coordinates: _____ Lot Size: 3.65 AC
TAX # 03-307263

Existing Use: Residential
Proposed Use: Residential
Estimated Construction Cost: \$ \$25,000
Description of Work: Construct 14x21 Screen Porch
& 8x12 Open Deck & Steps
* Porch to be built over existing back porch
Occupant/Tenant Name: Joseph Sclafani
Was tenant space previously occupied? Yes No
Contact Name: Joseph Sclafani
Address: 11790 Farshide Rd
City: EC State: MD Zip Code: 21042
Phone: 443-253-7164 Fax: _____
Email: j.sclafani45@gmail.com

Property Owner's Name: Joseph Sclafani
Address: 11790 FARSHIDE RD
City: EC State: MD Zip Code: 21042
Phone: 443-253-7164 Fax: _____
Email: j.sclafani45@gmail.com

Applicant's Name & Mailing Address (If other than stated herein)
Applicant's Name: Will To (Will) Construction
Address: 11 Newburg Ave
City: Potho State: MD Zip Code: 21228
Phone: 410-788-5330 Fax: 410-788-5330
Email: gw@willtocon.com

Contractor Company: Will To (Will) Construction
Contact Person: Greg Will
Address: 11 Newburg Ave
City: Potho State: MD Zip Code: 21228
License No.: 123700
Phone: 410-788-5330 Fax: 410-788-5330
Email: gw@willtocon.com

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: N/A
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: <u>2</u>	Depth Width
Gross area, sq. ft./floor:	1 st floor:
Area of construction (sq. ft.):	2 nd floor:
Use group:	Basement:
	<input type="checkbox"/> Finished Basement
	<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 checked="" 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

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 type="checkbox"/> Private	
Heating System	
<input checked="" 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 checked="" 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]
Email Address: gw@willtocon.com
Title/Company: Will To (Will) Construction

Print Name: Gregory Will
Date: 8/20

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>8.21.20</u>	<u>Hank Osvaldo</u>

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

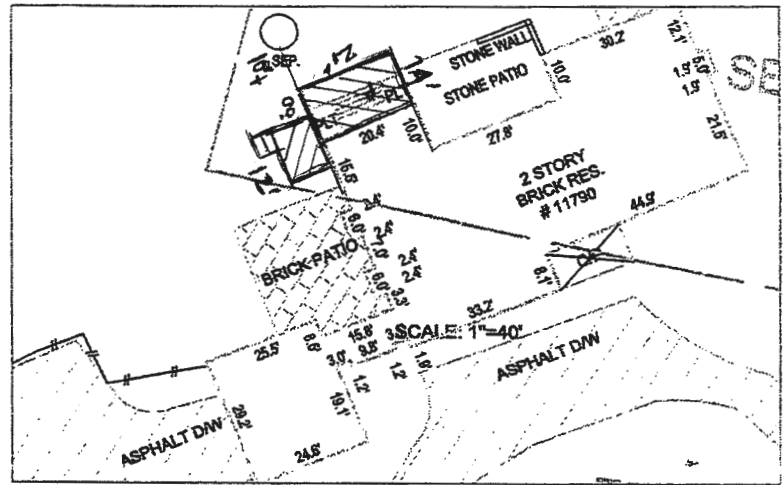
PROPERTY ADDRESS: 11790 Farside Road Ellicott City, Maryland 21042

SURVEY NUMBER: 1204.1863

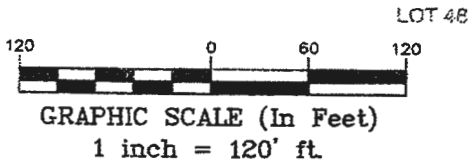
FIELD WORK DATE: 5/15/2012

REVISION HISTORY: (rev.0 5/15/2012)

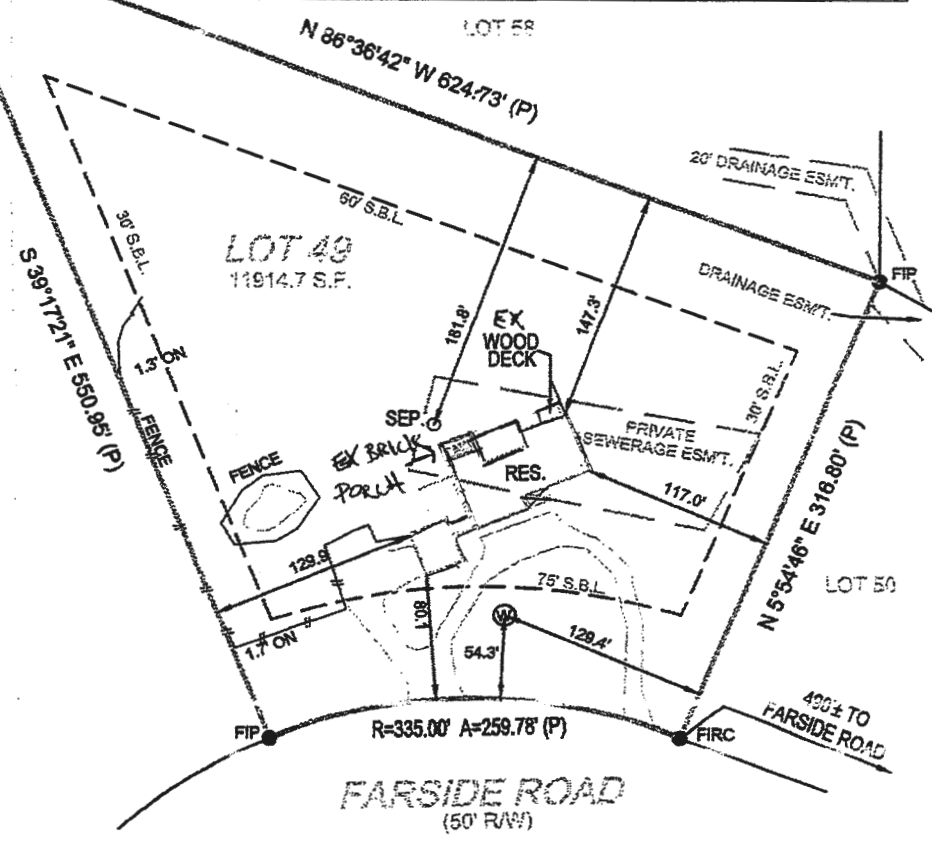
1204.1863
 BOUNDARY SURVEY
 LOT 49
 FARSIDE
 HOWARD COUNTY, MARYLAND
 05-11-2012 SCALE 1"=120'



- NOTES:
1. THE PROPERTY SHOWN HEREON IS IDENTIFIED AS TAX ACCOUNT #307283 AMONG THE ASSESSMENT RECORDS OF HOWARD COUNTY, MARYLAND.
 2. THE PROPERTY IS NOW IN THE NAME OF JOSEPH A. SCALFANI AND VINCENZA V. SCALFANI BY DEED RECORDED IN LIBER 10795 AT FOLIO 681 AMONG THE LAND RECORDS OF HOWARD COUNTY, MARYLAND.



John E. Kroboth
 EXPIRES 5-26-12



POINTS OF INTEREST:
 NONE VISIBLE

CLIENT NUMBER:	DATE: 5/12/2012
BUYER:	
SELLER:	
CERTIFIED TO:	

Alycia M Klein Marketing Director
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