

PERMIT NUMBER: B **21001882** DATE ACCEPTED: **5/14/2021**

**RECEIVED**  
MAY 14 2021  
DIVISION

**COMMERCIAL 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](http://www.howardcountymd.gov)

**BUILDING SITE ADDRESS REQUIRED**

Street Address: **HC FIRE STATION 8, 9601 ~~RD~~** Unit: \_\_\_\_\_  
 City: **ELLICOTT CITY** State: **MD** Zip Code: **21042**  
 Subdivision/Village/Complex Name: **OLD FREDERICK RD** SDC/WABA # \_\_\_\_\_  
 Lot: \_\_\_\_\_ Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grading Permit #: **NA**

**DESCRIPTION OF WORK REQUIRED**

Existing Use: **FIRE HOUSE** Proposed Use: **FIRE HOUSE** Estimated Cost: \$ **162,116**  
 Trade Work to Be Completed (Separate Permits Required):  Mechanical (HVACR)  Electrical  Plumbing  None  
**DOORS, FRAMES, + PAINT WALL, CEILING + FLOORS**

**PROPERTY OWNER INFORMATION REQUIRED**

Owner(s) Name(s) (As it appears on tax records): **Howard County Fire Department**  
 Owner's Street Address: **SAME** State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**TENANT INFORMATION REQUIRED**

Business Name: **HC FIRE STATION 8** Contact Name: **ERIK DEKLAU**  
 Street Address: **SAME** State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: **443-506-5108** Email: **ed@klaus@howardcountymd.gov**

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

Business Name: **North Point Builders** Contact Name: **GARY W. DAVIS**  
 Street Address: **1050 North Point Rd.** State: **MD** Zip Code: **21224**  
 Phone: **443-608-7433** Email: **gdavis@npbinc.com**

**CONTRACTOR INFORMATION REQUIRED**

Business Name: **NPB** License #: \_\_\_\_\_  
 Licensee's Name: \_\_\_\_\_  
 Street Address: **SAME AS ABOVE** State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: **410-477-8541** Email: \_\_\_\_\_

**ARCHITECT/ENGINEER INFORMATION REQUIRED - INDIVIDUAL WHO SIGNED PLANS**

Business Name: **-NA-** Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**BUILDING CHARACTERISTICS (PLEASE SELECT/COMPLETE ALL THAT APPLY)**

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: # \_\_\_\_\_  
 Fire Sprinkler System:  NFPA 13  NFPA 13R  None Fire Alarm System:  Yes  No  Voice Evac

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

Area of Construction: \_\_\_\_\_ sq ft Gross Area: \_\_\_\_\_ sq ft Height: \_\_\_\_\_ ft # of Stories: \_\_\_\_\_  
 Construction Classification(s): \_\_\_\_\_ Use Group: \_\_\_\_\_  
 Was the tenant space previously occupied?  Yes  No Shell Building Permit # (for interior completions): \_\_\_\_\_

**ADDITIONAL MULTI-FAMILY INFORMATION IF APPLICABLE**

# of efficiency units (MF): \_\_\_\_\_ # of 1 BR (MF): \_\_\_\_\_ # of 2 BR (MF): \_\_\_\_\_ # of 3 BR (MF): \_\_\_\_\_  
 Energy Method:  Performance  UA Alternative  ERI  A 90.1 Gross Area: \_\_\_\_\_ sq ft Occupiable Area: \_\_\_\_\_ sq ft

**AGREEMENT/DISCLAIMER REQUIRED**

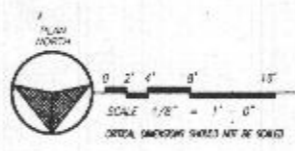
I HEREBY CERTIFY AND AGREE AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT 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

*[Signature]* DATE SIGNED: **5/14/21**

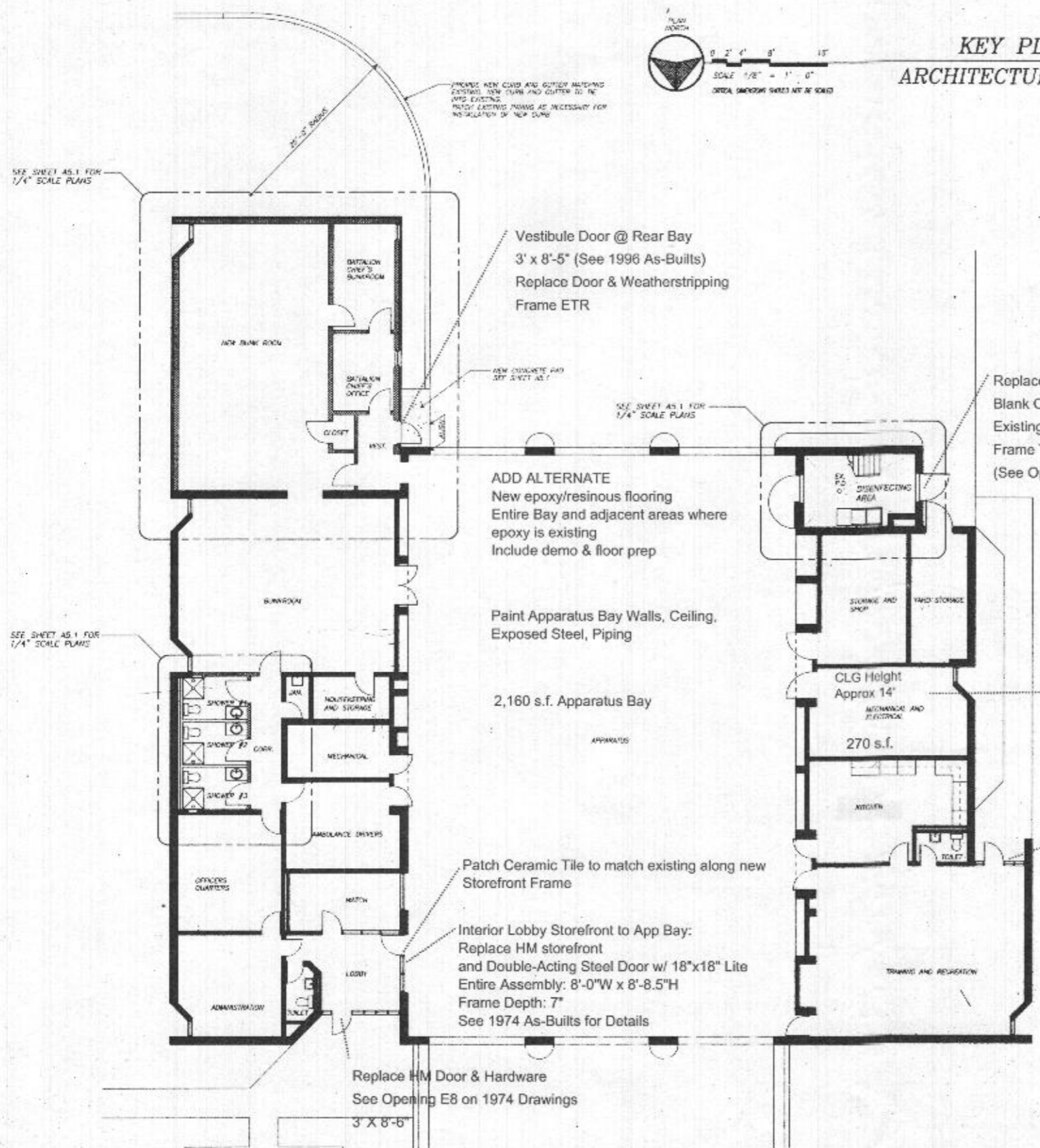
**FOR OFFICE USE ONLY** CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS: \_\_\_\_\_  
 PR \_\_\_\_\_ DPZ \_\_\_\_\_ DED \_\_\_\_\_ Health \_\_\_\_\_ SHA \_\_\_\_\_ CID \_\_\_\_\_  
 SUBMITTAL FEES: \_\_\_\_\_ PAYMENT: \_\_\_\_\_ ACCEPTED BY: *[Signature]*

# FIRE STATION #8

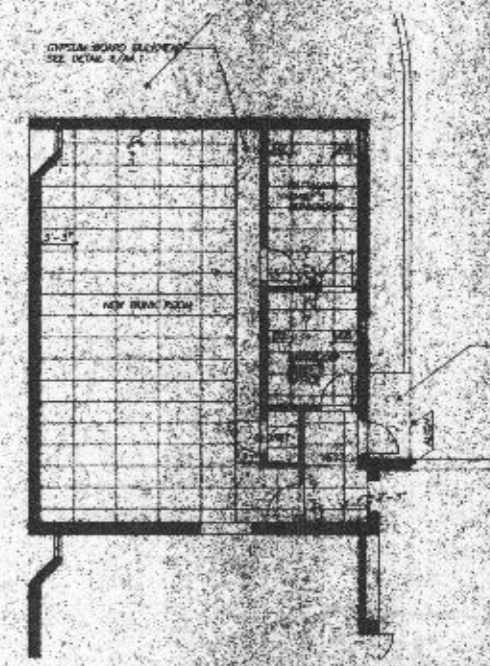


## KEY PLAN ARCHITECTURAL



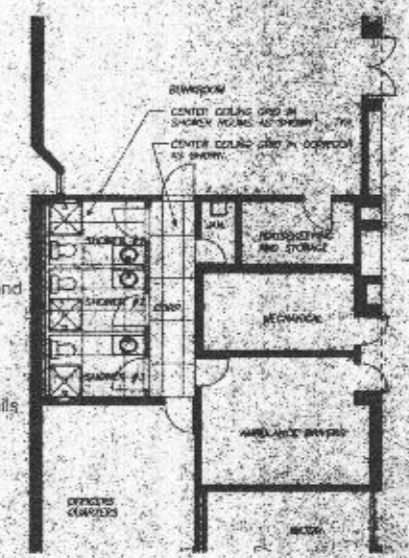
### 1 BUNK ROOM ADDITION REFLECTED CEILING PLAN

SCALE: 1/8" = 1'-0"



### 2 SHOWER ROOMS REFLECTED CEILING PLAN

SCALE: 1/8" = 1'-0"



\*\*\* Dimensions are approximate \*\*\*  
Refer to As-Built Drawings

FIRE STATION #8  
 ARCHITECTS  
 1000 W. WASHINGTON ST.  
 BALTIMORE, MD 21201  
 (410) 528-1100  
 ARIUM ARCHITECTS  
 1000 W. WASHINGTON ST.  
 BALTIMORE, MD 21201  
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