

PERMIT NUMBER: B

20002551

DATE ACCEPTED:

JUL 30 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.HOWARDCOUNTY.MD.GOV

BUILDING SITE ADDRESS REQUIRED

Street Address: 11707 PINDELL CHASE DR
City: FULTON
State: MD
Zip Code: 20759
Subdivision/Village/Complex Name: PINDELL CHASE
Lot: 24
Tax Map: 41
Parcel: 05-437245

DESCRIPTION OF WORK REQUIRED

Existing Use: UNFINISHED BASEMENT Proposed Use: FINISH BASEMENT W/BATH
Trade Work to Be Completed: Mechanical (HVACR) Electrical Plumbing None
Finish a portion of the basement as one large room, including a bathroom which was roughed in by the builder.

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s): 11707 PINDELL CHASE DR
City: FULTON
State: MD
Phone: 301-776-3577 / 301-502-6402
Email: pkowzun@aol.com / skowzun@gmail.com

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name:
Contact Name: PETER KOWZUN
Street Address: 11707 PINDELL CHASE DR
City: FULTON
State: MD
Phone: 301-502-6402
Email: pkowzun@aol.com

CONTRACTOR INFORMATION REQUIRED

Business Name: OWNER
Licensee's Name:
License #:
Street Address:
City:
State:
Zip Code:
Phone:
Email:

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

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

BUILDING CHARACTERISTICS REQUIRED

Primary Structure: SF Dwelling
Utilities: Electric Gas
Heating System: Electric Natural Gas
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: CUMBERLAND (TOLL BROTHERS) LOT 24
of Bedrooms (SF): 3
of efficiency units (MF*):
of 1 BR (MF*): 1
of 2 BR (MF*):
of 3 BR (MF*):
Rooms: 12-13
Full Baths: 3
Half Baths: 1
Fireplaces: 1

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.

Signature of Peter Kowzun
DATE SIGNED: 7-30-2020

FOR OFFICE USE ONLY

CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY

AGENCIES REQUIRED/APPROVALS:

PR DPZ DED Health 8/13/20 SHA CID

SUBMITTAL FEES:

PAYMENT:

ACCEPTED BY: DROP BOX

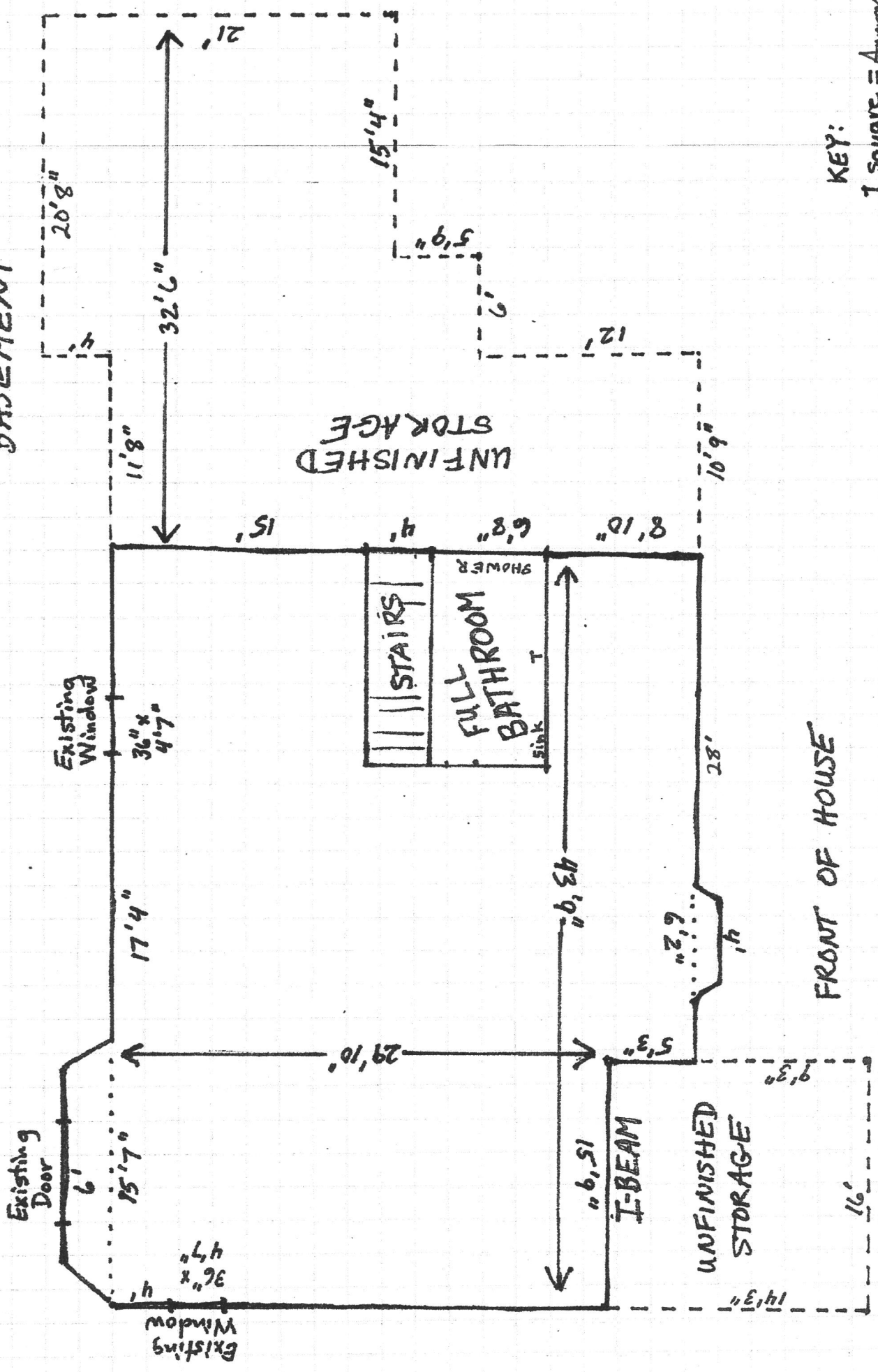
B20002551

KOWZUN
11707 Pindell Chase Dr.
Fulton, MD 20759

BASEMENT

BACK OF HOUSE

FRONT OF HOUSE



KEY:
1 square = Approx.
2 feet