

RECEIVED
 JUL 08 2021
 PLAN REVIEW DIVISION

PERMIT NUMBER: B 21002478

DATE ACCEPTED:

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			
BUILDING SITE ADDRESS REQUIRED			
Street Address: 6751 Columbia Gateway Drive			Unit:
City: Columbia	State: MD	Zip Code: 20146	
Subdivision/Village/Complex Name:		SDP/WP/BA #:	
Lot:	Tax Map:	Parcel:	Grading Permit #:
DESCRIPTION OF WORK REQUIRED			
Existing Use: Government & Business Building	Proposed Use: Government & Business Building	Estimated Cost: \$N/A	
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None			
Pop up tent placed on parking spot. Tent will have brick block anchors. 7/22/21 1-day only			
PROPERTY OWNER INFORMATION REQUIRED			
Owner(s) Name(s) (As it appears on tax records): Howard County Government			
Owner's Street Address: 3430 Court House Dr.			
City: Ellicott City	State: MD	Zip Code: 21043	
Phone:	Email:		
TENANT INFORMATION REQUIRED			
Business Name: Howard County Economic Development Authority		Contact Name:	
Street Address: 6751 Columbia Gateway Drive			
City: Columbia	State: MD	Zip Code: 21046	
Phone: (410) 313-6515	Email: abliss@howardcountymd.gov		
APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION			
Business Name: Howard County Economic Development Authority		Contact Name: Allison Bliss	
Street Address: 6751 Columbia Gateway Drive			
City: Columbia	State: MD	Zip Code: 21046	
Phone: (410) 313-6515	Email: abliss@howardcountymd.gov		
CONTRACTOR INFORMATION REQUIRED			
Business Name: Allied Party Rentals			
Licensee's Name:		License #:	
Street Address: 5640 Sunnyside Avenue, Suite J			
City: Beltsville	State: MD	Zip Code: 20705	
Phone: (301) 986-0067	Email:		
ARCHITECT/ENGINEER INFORMATION REQUIRED - INDIVIDUAL WHO SIGNED PLANS			
Business Name: Allied Party Rentals		Name:	
Street Address: 5640 Sunnyside Avenue, Suite J			
City: Beltsville	State: MD	Zip Code: 20705	
Phone: (301) 986-0067	Email:		
BUILDING CHARACTERISTICS (PLEASE SELECT/COMPLETE ALL THAT APPLY)			
Utilities: <input type="checkbox"/> Electric <input type="checkbox"/> Gas	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private (Well)	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private (Septic)	
Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other:		Roadside Tree Project: <input type="checkbox"/> No <input type="checkbox"/> Yes:#	
Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> None		Fire Alarm System: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Voice Evac	
ADDITIONAL COMMERCIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)			
Area of Construction: 400 sq ft	Gross Area: 400 sq ft	Height: 8 ft	# of Stories:
Construction Classification(s): pop-up tent with brick anchors		Use Group:	
Was the tenant space previously occupied? <input type="checkbox"/> Yes <input type="checkbox"/> 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: <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI <input type="checkbox"/> A 90.1		Gross Area: sq ft	Occupiable Area: 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			
APPLICANT'S ORIGINAL SIGNATURE: <i>Allison Bliss</i>		DATE SIGNED: 7/7/2021	
FOR OFFICE USE ONLY			
CHECKS PAYABLE TO: DIRECTOR OF FINANCE OF HOWARD COUNTY			
AGENCIES REQUIRED/APPROVALS:			
<input checked="" type="checkbox"/> PR	<input checked="" type="checkbox"/> DPZ	<input type="checkbox"/> DED	<input checked="" type="checkbox"/> Health 7/19/21 TH <input type="checkbox"/> SHA <input type="checkbox"/> CID
SUBMITTAL FEES:	PAYMENT:	ACCEPTED BY:	