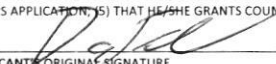


PERMIT NUMBER: B 21002431

DATE ACCEPTED: 6/28/2021

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 <i>REQUIRED</i>			
Street Address: 8106 STAYTON DRIVE			Unit:
City: JESSUP		State: MD	Zip Code: 20794
Subdivision/Village/Complex Name:		SDP/WP/BA #:	
Lot: PAR A	Tax Map: 48	Parcel: 130	Grading Permit #:
DESCRIPTION OF WORK <i>REQUIRED</i>			
Existing Use: DISTRIBUTION WAREHOUSE		Proposed Use: SAME	
Trade Work to Be Completed (<i>Separate Permits Required</i>):		Estimated Cost: \$317,000.00	
<input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None			
INSTALL PALLET RACKING			
PROPERTY OWNER INFORMATION <i>REQUIRED</i>			
Owner(s) Name(s) (<i>As it appears on tax records</i>): SW PROPERTIES LLC			
Owner's Street Address: 8106 STAYTON DRIVE			
City: JESSUP		State: MD	Zip Code: 20794
Phone:		Email:	
TENANT INFORMATION <i>REQUIRED</i>			
Business Name: OWNER		Contact Name:	
Street Address:			
City:		State:	Zip Code:
Phone:		Email:	
APPLICANT NAME <i>REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION</i>			
Business Name: J.E. SMITH SERVICES INC dba JESSINC		Contact Name: DARIN FLOHR	
Street Address: 12 VALLEY RD SUITE C			
City: JACOBUS		State: PA	Zip Code: 17407
Phone: (717) 846-3388		Email: DFLOHR@JESSINC.COM	
CONTRACTOR INFORMATION <i>REQUIRED</i>			
Business Name: J.E. SMITH SERVICES INC dba JESSINC			
Licensee's Name:		License #: 20475432	
Street Address: 12 VALLEY RD SUITE C			
City: JACOBUS		State: PA	Zip Code: 17407
Phone: (717) 846-3388		Email: INFO@JESSINC.COM	
ARCHITECT/ENGINEER INFORMATION <i>REQUIRED - INDIVIDUAL WHO SIGNED PLANS</i>			
Business Name: EPIQ ENGINEERING, LLC		Name: JORDAN TLUMAK	
Street Address: 1704 8TH AVE S			
City: NASHVILLE		State: TN	Zip Code: 37203
Phone: (629) 888-9977		Email: INFO@EPIQENGINEERING.COM	
BUILDING CHARACTERISTICS (<i>PLEASE SELECT/COMPLETE ALL THAT APPLY</i>)			
Utilities: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas		Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private (Well)	
Sewage Disposal: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private (Septic)		Heating System: <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other:	
Roadside Tree Project: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes:#		Sprinkler System: <input checked="" type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> None	
Fire Alarm System: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Voice Evac		ADDITIONAL COMMERCIAL INFORMATION (<i>PLEASE SELECT/COMPLETE ALL THAT APPLY</i>)	
Area of Construction: sq ft	Gross Area: sq ft	Height: ft	# of Stories:
Construction Classification(s):		Use Group:	
Was the tenant space previously occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No		Shell Building Permit # (<i>for interior completions</i>):	
ADDITIONAL MULTI-FAMILY INFORMATION <i>IF APPLICABLE</i>			
# 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 <i>REQUIRED</i>			
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		6/24/21 DATE SIGNED	
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 checked="" type="checkbox"/> DED	<input checked="" type="checkbox"/> Health 7/22/21
<input type="checkbox"/> SHA	<input type="checkbox"/> CID		
SUBMITTAL FEES:	PAYMENT:	ACCEPTED BY:	