

PERMIT NUMBER: B **22001349**

DATE ACCEPTED:

RECEIVED

APR 06 2022

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: **9350 Snowden River Pkwy, Suite J** Unit: _____
 City: **Columbia** State: **MD** Zip Code: **21045**
 Subdivision/Village/Complex Name: _____ SDP/WP/BA #: _____
 Lot: _____ Tax Map: _____ Parcel: _____ Grading Permit #: _____

DESCRIPTION OF WORK REQUIRED

Existing Use: **Deli Restaurant** Proposed Use: **Restaurant** Estimated Cost: \$ **65,000**
 Trade Work to Be Completed (Separate Permits Required): Mechanical (HVACR) Electrical Plumbing None
 Kitchen equipment replacement and interior upgrade in existing restaurant per attached plans.

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): **SONA Nam Yang**
 Owner's Street Address: **42719 Mirror Pond Place**
 City: **Rambleton** State: **VA** Zip Code: **20148**
 Phone: **571-54-0405** Email: **SONASina@vaum.net**

TENANT INFORMATION REQUIRED

Business Name: **ISEM INC K-MANNA** Contact Name: **IK SOO SONG**
 Street Address: **9350 Snowden River Pkwy**
 City: **Columbia** State: **MD** Zip Code: **21045**
 Phone: **410-980-0405** Email: **KMANNA.FOXIA@Amail.com**

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: **Cornerstone by Patrick's Home** Contact Name: **Jung Lee**
 Street Address: **10231 Globe Dr**
 City: **Ellicott City** State: **MD** Zip Code: **21042**
 Phone: **(443) 522-6253** Email: **cornerstone702@gmail.com**

CONTRACTOR INFORMATION REQUIRED

Business Name: **Cornerstone by Patrick's Home**
 Licensee's Name: **Jung Lee** License #: **MHIC 100173**
 Street Address: **10231 Globe Dr**
 City: **Ellicott City** State: **MD** Zip Code: **21042**
 Phone: **(443) 522-6253** Email: **cornerstone702@gmail.com**

ARCHITECT/ENGINEER INFORMATION REQUIRED - INDIVIDUAL WHO SIGNED PLANS

Business Name: **Song Design** Name: **Chang Song**
 Street Address: **2205 Merion Pond**
 City: **Woodstock** State: **MD** Zip Code: **21163**
 Phone: **(443) 745-6221** Email: **songdesign14@gmail.com**

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: # _____
 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: **1200** sq ft Gross Area: **1500** sq ft Height: **14** ft # of Stories: **1**
 Construction Classification(s): **2B** Use Group: **A-2**
 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/ 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: _____ DATE SIGNED: **4/5/22**

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

AGENCIES REQUIRED/APPROVALS: _____
 PR DPZ PED Health SHA CID
 SUBMITTAL FEES: **200.00** PAYMENT: **CK # 1722** ACCEPTED BY: _____