



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: _____

Permit No.: **B20000** ~~284~~ **287**

Building Address: **6250 COLUMBIA CROSSING**
 City: **COLUMBIA** State: **MD** Zip Code: **21045**
 Suite/Apt. #: **C-3** SDP/WP/BA #: **SDP. 17. 35**
 Subdivision: _____
 Lot: _____ Tax Map: _____ Parcel: **C**

Existing Use: **A2**
 Proposed Use: **A2 RESTAURANT**
 Estimated Construction Cost: \$ **350,000**
 Description of Work: **TENANT FIT OUT OF NEW RESTAURANT INTERIOR + INSTALLATION OF EXTERIOR COOLER. USE OF SPACE, EXT. COOLER RED-LINE, LSC + INSTALLATION OF CHEST INTERCEPT UNDER LANDFILL PERMIT # 1900000000**
 Occupant/Tenant Name: **THE BAGELRY + DELI**
 Was tenant space previously occupied? Yes No
 Contact Name: **THE OF COLUMBIA, LLC**
 Address: **1614 JOPPA RD.**
 City: **TOWSON** State: **MD** Zip Code: **21286**
 Phone: **410 987 0070** Fax: _____
 Email: **CS@TODKINS.COM**

Property Owner's Name: **COLUMBIA CROSSING LTD PART**
 Address: **3333 HYDE PARK RD STE 10**
 City: **NEW HYDE PARK** State: **NY** Zip Code: **11042**
 Phone: **410 334 2000** Fax: _____
 Email: **DHARE@KINGSTONRENT.COM**

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: **DENIE MCCLAREN**
 Address: **12521 CHESTER WAY**
 City: **WINDSOR PARK** State: **MD** Zip Code: **21083**
 Phone: **410 334 2000** Fax: **410 411 1170**
 Email: **DENIE@DENIEORWINDSOR.COM**

Contractor Company: **MOSAIC HOME ENHANCEMENTS**
 Contact Person: **TONY MASSA**
 Address: **6403 KELLY COURT**
 City: **FREDERICK** State: **MD** Zip Code: **21703**
 License No.: **08010113672 MHC**
 Phone: **410 320 4665** Fax: _____
 Email: **NEELD@3EYAR.COM**

Engineer/Architect Company: **GVA**
 Responsible Design Prof.: **CHRISTOPHER LESTER**
 Address: **5501 TWIN KNOLLS RD, STE 102**
 City: **COLUMBIA** State: **MD** Zip Code: **21045**
 Phone: **410 997 1330** Fax: _____
 Email: **CLESTER@GVAARCHITECTS.COM**

Commercial Building Characteristics	Residential Building Characteristics
Height: 10'	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: 1	Depth Width
Gross area, sq. ft./floor: 3,150	1st floor:
Area of construction (sq. ft.): 2,115	2nd floor:
Use group: A2	Basement:
Construction type:	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input checked="" type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Wood Frame	No. of Bedrooms:
<input type="checkbox"/> State Certified Modular	Multi-family Dwelling
<input checked="" type="checkbox"/> Roadside Tree Project Permit	No. of efficiency units:
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	No. of 1 BR units:
Roadside Tree Project Permit #	No. of 2 BR units:
	No. of 3 BR units:
	Other Structure:
	Dimensions:
	Footings:
	Roof:
	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Utilities	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Water Supply	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sewage Disposal	
<input checked="" type="checkbox"/> Public	
<input type="checkbox"/> Private	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number: 34120124	

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 Signature: _____ Print Name: **DENIE MCCLAREN**
 Email Address: _____ Date: **1/21/2020**
 Title/Company: **DESIGNER/OWNER**

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
PLEASE WRITE NEATLY & LEGIBLY
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	1/19/20	[Signature]

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$ 200
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	# 1918

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

redline done - mylarsch@h...
1/21/2020