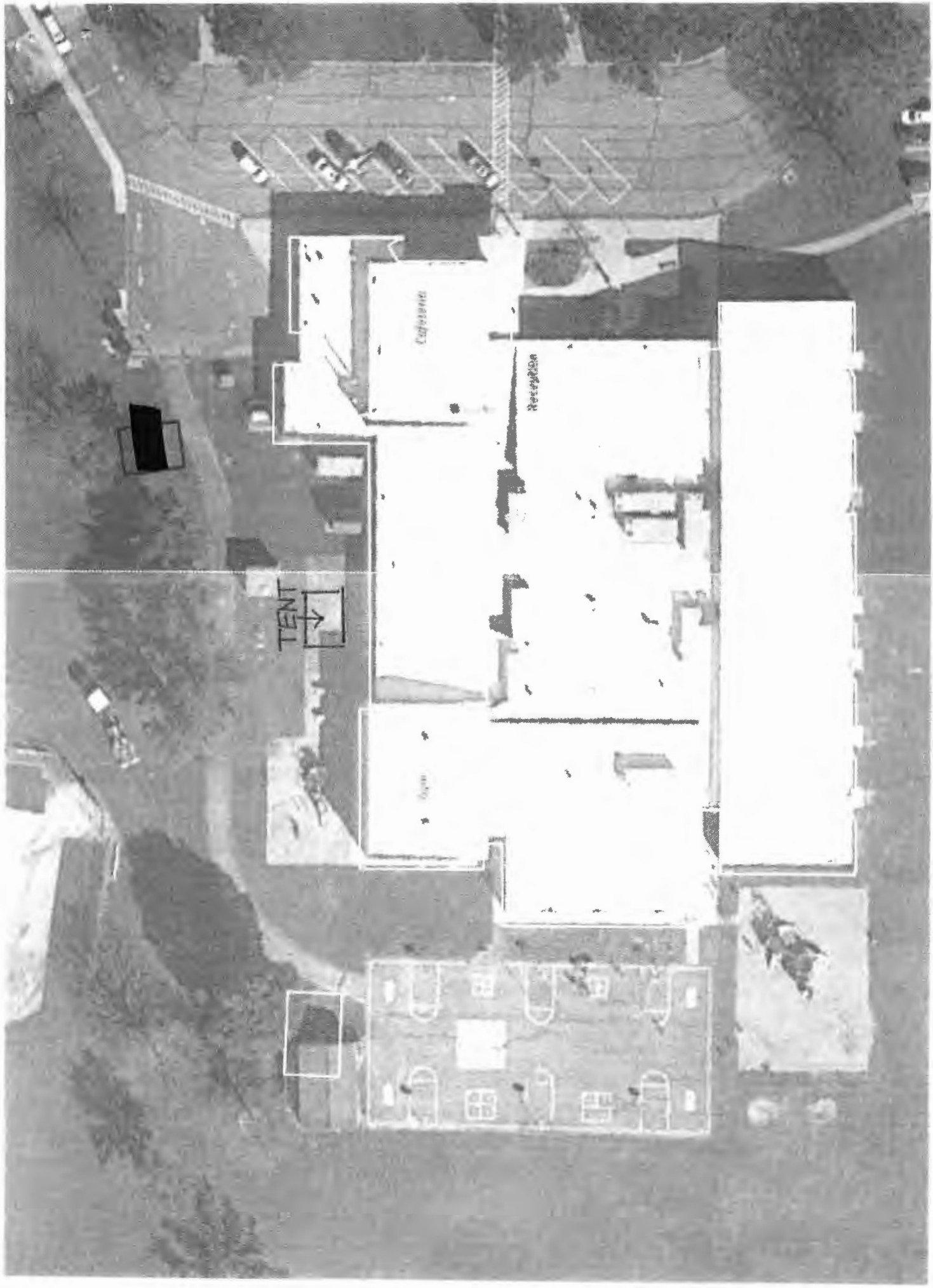


PERMIT NUMBER: B 23000982

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				
<b>BUILDING SITE ADDRESS</b> <i>REQUIRED</i>				
Street Address: 15901 Frederick Road			Unit:	
City: Woodbine		State: MD		Zip Code: 21797
Subdivision/Village/Complex Name: Lisbon Elementary School			SDP/WP/BA #:	
Lot:	Tax Map:	Parcel:	Grading Permit #:	
<b>DESCRIPTION OF WORK</b> <i>REQUIRED</i>				
Existing Use:		Proposed Use: Outdoor area for lunch		Estimated Cost: \$ 300.00
Trade Work to Be Completed ( <i>Separate Permits Required</i> ): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input checked="" type="checkbox"/> None				
(1) Installation of outdoor tents measuring 20 by 20 feet, to be installed on asphalt area, March 18, 2023 thru approximately June 30, 2023.				
No cooking will be done, only space to sit and eat.				
<b>PROPERTY OWNER INFORMATION</b> <i>REQUIRED</i>				
Owner(s) Name(s) ( <i>As it appears on tax records</i> ): Howard County Public School System				
Owner's Street Address: 10910 Clarksville Pike				
City: Ellicott City		State: MD		Zip Code: 21042
Phone: 410-313-6600		Email: scott_washington@hcpss.org		
<b>TENANT INFORMATION</b> <i>REQUIRED</i>				
Business Name: Howard County Public Schools			Contact Name:	
Street Address: same as owner information				
City:		State:		Zip Code:
Phone:		Email:		
<b>APPLICANT NAME</b> <i>REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION</i>				
Business Name: Howard County Public School System			Contact Name: Herb Savje	
Street Address: 9020 Mendenhall Court, Suite A				
City: Columbia		State: MD		Zip Code: 21045
Phone: 410-313-7088		Email: herb_savje@hcpss.org		
<b>CONTRACTOR INFORMATION</b> <i>REQUIRED</i>				
Business Name: Howard County School System				
Licensee's Name: same			License #:	
Street Address: same as applicant				
City:		State:		Zip Code:
Phone:		Email:		
<b>ARCHITECT/ENGINEER INFORMATION</b> <i>REQUIRED - INDIVIDUAL WHO SIGNED PLANS</i>				
Business Name:			Name:	
Street Address:				
City:		State:		Zip Code:
Phone:		Email:		
<b>BUILDING CHARACTERISTICS</b> ( <i>PLEASE SELECT COMPLETE ALL THAT APPLY</i> )				
Utilities: <input type="checkbox"/> Electric <input type="checkbox"/> Gas		Water Supply: <input checked="" type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Well)		Sewage Disposal: <input checked="" type="checkbox"/> Public <input checked="" 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 checked="" 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	
<b>ADDITIONAL COMMERCIAL INFORMATION</b> ( <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> ):	
<b>ADDITIONAL MULTI-FAMILY INFORMATION</b> <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		
<b>AGREEMENT/ DISCALIMER</b> <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			March 17, 2023 DATE SIGNED	
<b>FOR OFFICE USE ONLY</b>				
AGENCIES REQUIRED/APPROVALS:				
<input checked="" type="checkbox"/> PR	<input checked="" type="checkbox"/> DPZ	<input checked="" type="checkbox"/> DED	<input checked="" type="checkbox"/> Health	<input type="checkbox"/> SHA <input type="checkbox"/> CID
SUBMITTAL FEES:		PAYMENT:		ACCEPTED BY:





## FLAME RETARDANT

### Fabric Registration

LICENSE NUMBER: F-088001

TENT CANOPIES AND  
SIDEWALLS, #TT16OZBO

**Product Marketed by:**

**TENT AND TABLE.COM, LLC**

3336 BAILEY AVENUE

BUFFALO, NY, 14215

**Issue Date : 05/02/2022**

**Expiration Date : 06/30/2023**

This product meets the minimum requirements of flame resistance established by the California State Fire Marshal for products identified in Section 13115, California Health and Safety Code. The scope of the approved use of this product is provided in the current edition of the CALIFORNIA APPROVED LIST OF FLAME RETARDANT CHEMICALS AND FABRICS, GENERAL AND LIMITED APPLICATIONS CONCERNS published by the California State Fire Marshal.

*Vikie Franklin*

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Issued By Vikkie Franklin  
Fire Engineering License Manager  
Fire Engineering & Investigations Division

*Patricia Setter*

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Reviewed and Approved By Patricia Setter  
Deputy State Fire Marshal III  
Fire Engineering & Investigations Division

OFFICE OF THE STATE FIRE MARSHAL

Please visit [calfire.govmotus.org](http://calfire.govmotus.org) for more information on Licensing and Permitting with CAL FIRE