

PERMIT NUMBER: B **22002719**

DATE ACCEPTED:

**RESIDENTIAL 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](http://www.howardcountymd.gov)

**BUILDING SITE ADDRESS REQUIRED**

Street Address: <b>3958 Old Columbia Pike</b>		Unit:
City: <b>Ellicott City</b>	State: <b>MD</b>	Zip Code: <b>21043</b>
Subdivision/Village/Complex Name: <b>Ellicott city</b>		SDP/WP/BA #:
Lot:	Tax Map: <b>25</b>	Parcel: <b>235</b>
Grading Permit #:		

**DESCRIPTION OF WORK REQUIRED**

Existing Use: <b>Residential</b>	Proposed Use: <b>Residential</b>	Estimated Cost: \$ 5,000.00
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input checked="" type="checkbox"/> Plumbing <input type="checkbox"/> None		
Adding a shower by expanding an existing half bath in Attic level (2nd floor). New bathroom will be 60 sf.		

**PROPERTY OWNER INFORMATION REQUIRED**

Owner(s) Name(s) (As it appears on tax records): <b>Mukesh Kumar, Agila Meenakshi Sundaram</b>	Primary Residence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Owner's Street Address: <b>3958 Old Columbia Pike</b>	
City: <b>Ellicott City</b>	State: <b>MD</b>
Phone: <b>(513) 293-0599</b>	Email: <b>mukeshagila@gmail.com</b>
Zip Code: <b>21043</b>	

**APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION**

Business Name:	Contact Name: <b>Agila Meenakshi Sundaram</b>
Street Address: <b>3958 Old Columbia Pike</b>	
City: <b>Ellicott City</b>	State: <b>MD</b>
Phone: <b>(513) 293-0599</b>	Email: <b>mukeshagila@gmail.com</b>
Zip Code: <b>21043</b>	

**CONTRACTOR INFORMATION REQUIRED**

Business Name: <b>Fisher's Residential &amp; Commercial Services Corp.</b>	
Licensee's Name: <b>Richard Fisher</b>	License #: <b>115902</b>
Street Address: <b>4638 Doncaster Drive</b>	
City: <b>Baltimore</b>	State: <b>MD</b>
Phone: <b>(443) 717-1424</b>	Email: <b>fisherprofessional2@gmail.com</b>
Zip Code: <b>21043</b>	

**ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE**

Business Name:	Name:
Street Address:	
City:	State:
Phone:	Email:
Zip Code:	

**BUILDING CHARACTERISTICS REQUIRED**

Primary Structure: <input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> SF Duplex <input type="checkbox"/> Mobile Home <input type="checkbox"/> Multi-Family Dwelling (MF*)	Condo: <input type="checkbox"/> Yes <input type="checkbox"/> No
Utilities: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private (Well)
Heating System: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Other:	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private (Septic)
Sprinkler System: <input type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> NFPA 13D <input type="checkbox"/> None	Roadside Tree Project: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes: #
Fire Alarm System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Voice Evac	

**ADDITIONAL RESIDENTIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)**

Model Name & Options:				
# of Bedrooms (SF): <b>3</b>	# of efficiency units (MF*):	# of 1 BR (MF*):	# of 2 BR (MF*):	# of 3 BR (MF*):
# Rooms:	# Full Baths: <b>2</b>	# Half Baths: <b>1</b>	# Fireplaces: <b>1</b>	
Garage/Carport Info: <input type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Integral Garage <input type="checkbox"/> Carport <input checked="" type="checkbox"/> None				
Basement/Foundation Info: <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Post & Pier <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Finished Basement: <input type="checkbox"/> Full or <input type="checkbox"/> Partial				
1 <sup>st</sup> Fl Width:	1 <sup>st</sup> Fl Depth:	2 <sup>nd</sup> Fl Width:	2 <sup>nd</sup> Fl Depth:	Bsmt Width:
Energy Method: <input type="checkbox"/> Prescriptive <input type="checkbox"/> Performance <input type="checkbox"/> UA Alternative <input type="checkbox"/> ERI		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 \_\_\_\_\_

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

AGENCIES REQUIRED/APPROVALS:					
<input type="checkbox"/> PR _____	<input type="checkbox"/> DPZ _____	<input type="checkbox"/> DED _____	<input checked="" type="checkbox"/> Health _____	<input type="checkbox"/> SHA _____	<input type="checkbox"/> CID _____
SUBMITTAL FEES:		PAYMENT:		ACCEPTED BY:	

Record Detail \* (This section is required.)

Approved RAE  
8/12/2022

<b>Permit Type</b>	<b>Permit Number</b>	<b>Opened Date</b>
Building/Residential/Alteration/SFD	B22002749	07/15/2022
<b>Description of Work</b>		
SFD/ INTERIOR ALTERATIONS TO 2ND FLOOR TO CONVERT HALF BATH INTO FULL BATH APPX 60 SQ FT		

[check spelling](#)

Address \* (This section is required.)

Search Reset Clear Get Parcel & Owner

<b>Street #</b>	<b>Street Name</b>	<b>Street Type</b>
3958	OLD COLUMBIA	PIKE
<b>Unit Type</b>	<b>Unit #</b>	<b>X Coordinate</b>
--Select--		-76.809
		<b>Y Coordinate</b>
		39.26459
<b>City</b>	<b>State</b>	<b>Zip Code</b>
ELLCOTT CITY	MD	21043
	<b>Primary</b>	
	Yes	

Parcel \* (This section is required.)

Search Reset Clear Get Address & Owner

<b>GIS ID *</b>	<b>Parcel</b>	<b>Parcel Area</b>	<b>Land Value</b>	<b>Improved Value</b>	<b>Exemption Value</b>	<b>Plan Area</b>
894410	235	4.28	280800	506100	225300	ELLICO
<b>Legal Description</b>						
IMPS4.284 ACRES [ 3958 OLD COLUMBIA PIKE [ ]						

[check spelling](#)

<b>Block</b>	<b>Lot</b>	<b>Census Tract</b>	<b>Council Dist</b>	<b>Inspection Dist</b>	<b>Supervisor Dist</b>	<b>Map #</b>	<b>DAP Zone</b>
		602800	1	6		2	
<b>Plan Area</b>	<b>State Tax Id</b>	<b>Subdivision Name</b>	<b>Primary</b>				
	1402201208		Yes				
<b>Section</b>	<b>Area</b>	<b>Tax Map</b>					
		25					
<b>Grid</b>	<b>Zoning District</b>	<b>ADC Map</b>					
25-13	R-ED	4816-A8					

<b>SDP No.</b>	<b>Final Plan No.</b> ECP-20-040	<b>WP File No.</b>
<b>Record Plat No.</b>	<b>WS Contract No.</b>	<b>FDP No.</b>
<b>Owner Occupied</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Year Built</b> 1937	<b>Historic District</b> <input type="radio"/> Yes <input checked="" type="radio"/> No
<b>Historic District Registry No.</b>	<b>Stat Area</b> 2-13	<b>Flood Plain</b> <input type="radio"/> Yes <input checked="" type="radio"/> No
<b>Building No</b>		

**Owner** (This section is not required.)

Search      Reset      Clear

**Name \***  
KUMAR MUKESH

**Address Line 1**  
3958 OLD COLUMBIA PIKE

**Address Line 2**

**Address Line 3**

<b>Mail City</b> ELLCOTT CITY	<b>Mail State</b> MD	<b>Mail Zip Code</b> 21043
<b>Phone</b> 5132930599	<b>Primary</b> Yes	▼
<b>E-mail</b> MUKESHAGILA@GMAIL.COM		
<b>Cell Number</b>	<b>Fax Number</b>	

**Professionals** (This section is not required.)

Search      Reset      Clear

<b>License # *</b> 08010115902	<b>Business Name</b> FISHER'S RESIDENTIAL & COMMERCIAL		
<b>License Type *</b> MHIC Ind	<input checked="" type="checkbox"/> <b>First Name</b> RICHARD	<b>Middle Name</b>	<b>Last Name</b> FISHER
<b>Primary</b> Yes	<input checked="" type="checkbox"/> <b>Address Line 1</b> SERVICES CORP 05 135720		
	<b>Address Line 2</b> 4804 FREDERICK AVE		
	<b>City</b> BALTIMORE	<b>State</b> MD	<b>ZIP Code</b> 21229-0000
	<b>Phone 1</b> 4437171424	<b>Phone 2</b>	<b>Fax</b>
	<b>E-mail</b> FISHERPROFESSIONAL2@GMAIL.COM		

**Applicant** (This section is not required.)

Search As Owner As Lic. Prof As Contact

<b>Type *</b> Applicant	<b>First Name</b>	<b>MI</b>	<b>Last Name</b>
	✓ MUKESH		KUMAR
<b>Relationship</b> Applicant	<b>Full Name</b>		
	✓ MUKESH KUMAR		
<b>Primary</b> No	<b>Organization Name</b>		
	No ✓		
<b>Street Address</b>			
3958 OLD COLUMBIA PIKE			
<b>Address Line 2</b>			
<b>City</b>	<b>State</b>	<b>Zip Code</b>	
ELLCOTT CITY	MD	21043	
<b>Phone</b>	<b>Cell</b>	<b>Fax</b>	
5132930599			
<b>E-mail *</b>			
MUKESHAGILA@GMAIL.COM			

**Contact** (This section is not required.)

Search As Owner As Lic. Prof As Contact

<b>Type</b> Contact	<b>First Name</b>	<b>MI</b>	<b>Last Name</b>
	✓ RICHARD		FISHER
<b>Relationship</b> Licensed Professional	<b>Full Name</b>		
	✓ RICHARD FISHER		
<b>Primary</b> Yes	<b>Organization Name</b>		
	Yes ✓ FISHER'S RESIDENTIAL & COMMERCIAL		
<b>Street Address</b>			
SERVICES CORP 05 135720			
<b>Address Line 2</b>			
4804 FREDERICK AVE			
<b>City</b>	<b>State</b>	<b>Zip Code</b>	
BALTIMORE	MD	21229-0000	
<b>Phone</b>	<b>Cell</b>	<b>Fax</b>	
4437171424			
<b>E-mail</b>			
FISHERPROFESSIONAL2@GMAIL.COM			

**Addtl Info**

<b>Est Construction Cost *</b>	<b>Housing Units *</b>	<b>Number of Buildings *</b>	<b>Public Owned</b>
5000	0	0	No ✓

**Construction Type**

101 - Single Family Houses Detached



Execute Expression "Run expression exception, please contact agency administrator," error:

**RESIDENTIAL ALTERATION INFO**

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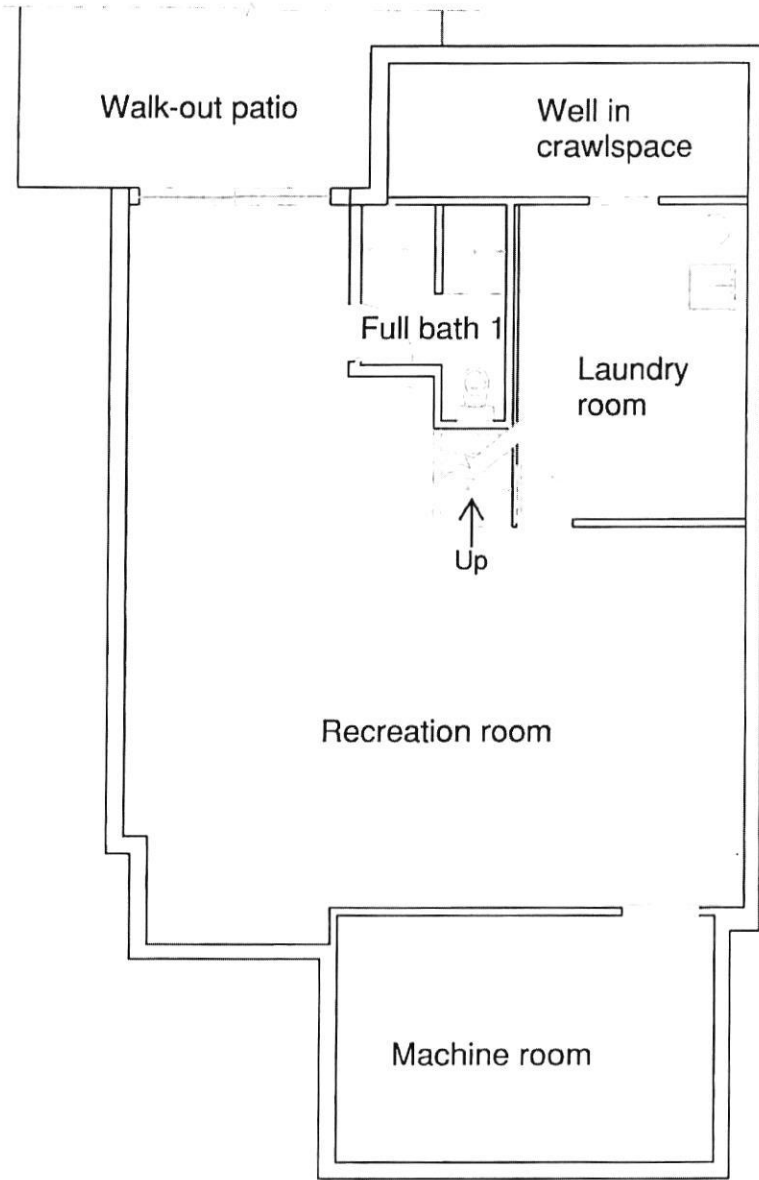
<b>Total Square Footage *</b>	<b>No of Stories *</b>	<b>Basement</b>	<b>Bedrooms</b>	<b>Full Baths</b>	<b>Half Baths</b>	<b>Water *</b>	<b>Sewage *</b>
60	SQFT 2	--Select--		1		Public	Public
<b>Existing Utilities *</b>	<b>Existing Heating System *</b>	<b>Existing Sprinkler System *</b>	<b>Type of New Fireplace</b>	<b>Expiration Date</b>	<b>Fee Exempt *</b>		
Electric	Electric	None	--Select--	2/8/2023	Yes No		

**PAYMENT INFORMATION**

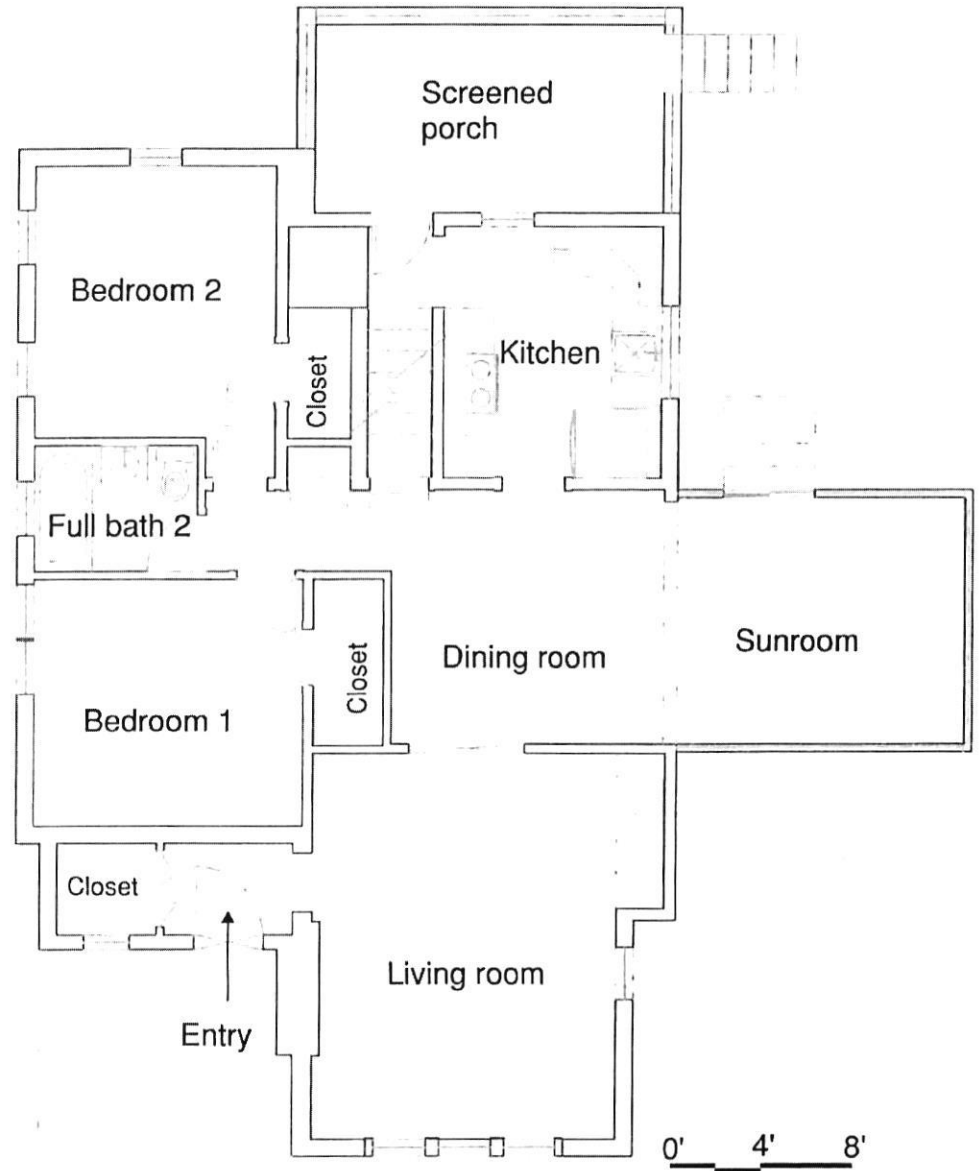
<b>Check 1</b>	<b>Payee 1</b>	<b>Check 2</b>	<b>Payee 2</b>	<b>SAP Doc No</b>	<b>SAP Entered</b>

**Submit**      **Cancel**

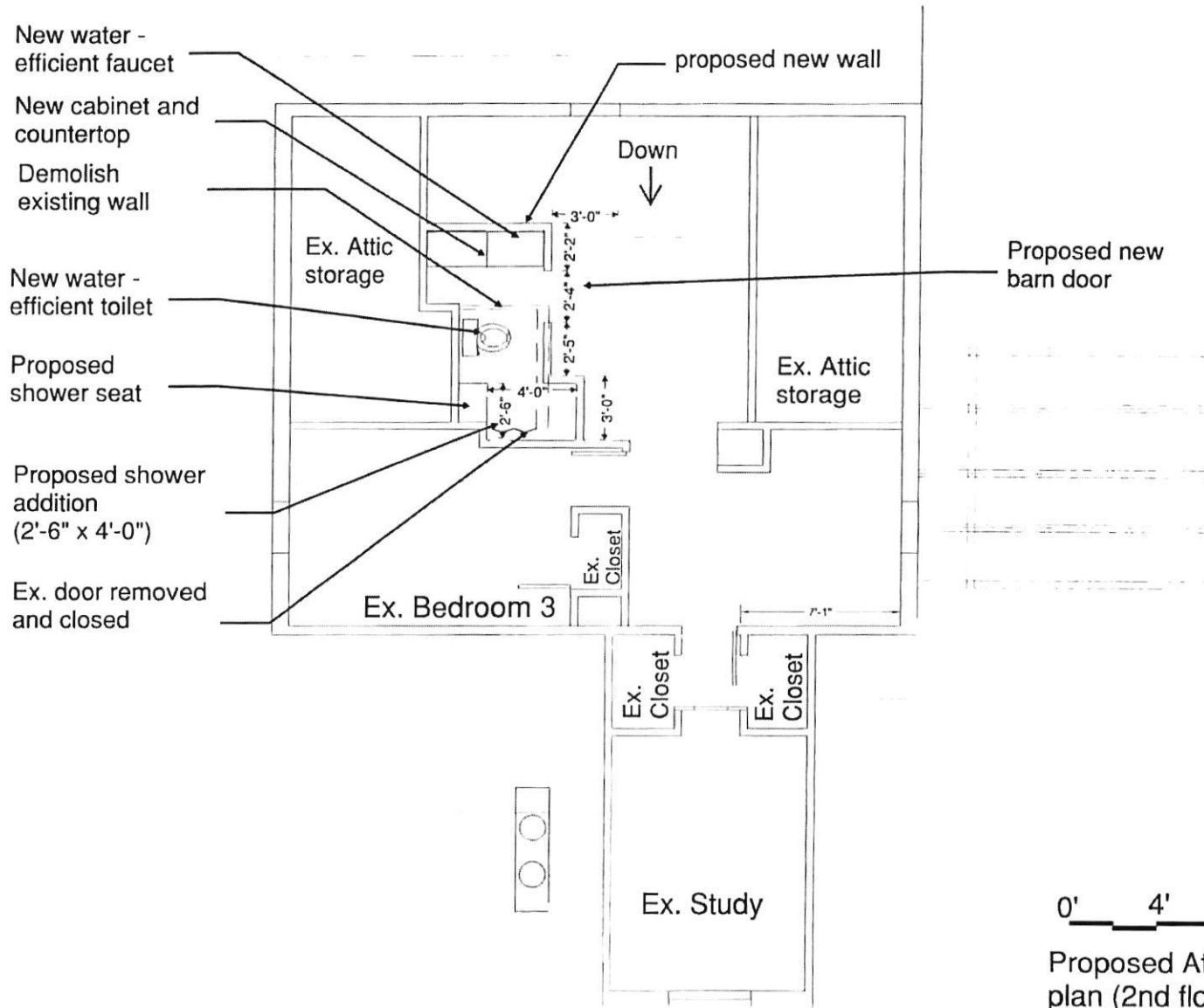
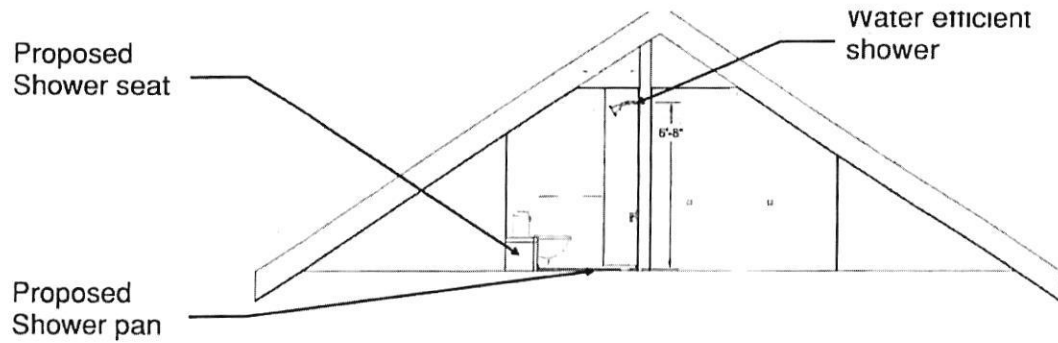


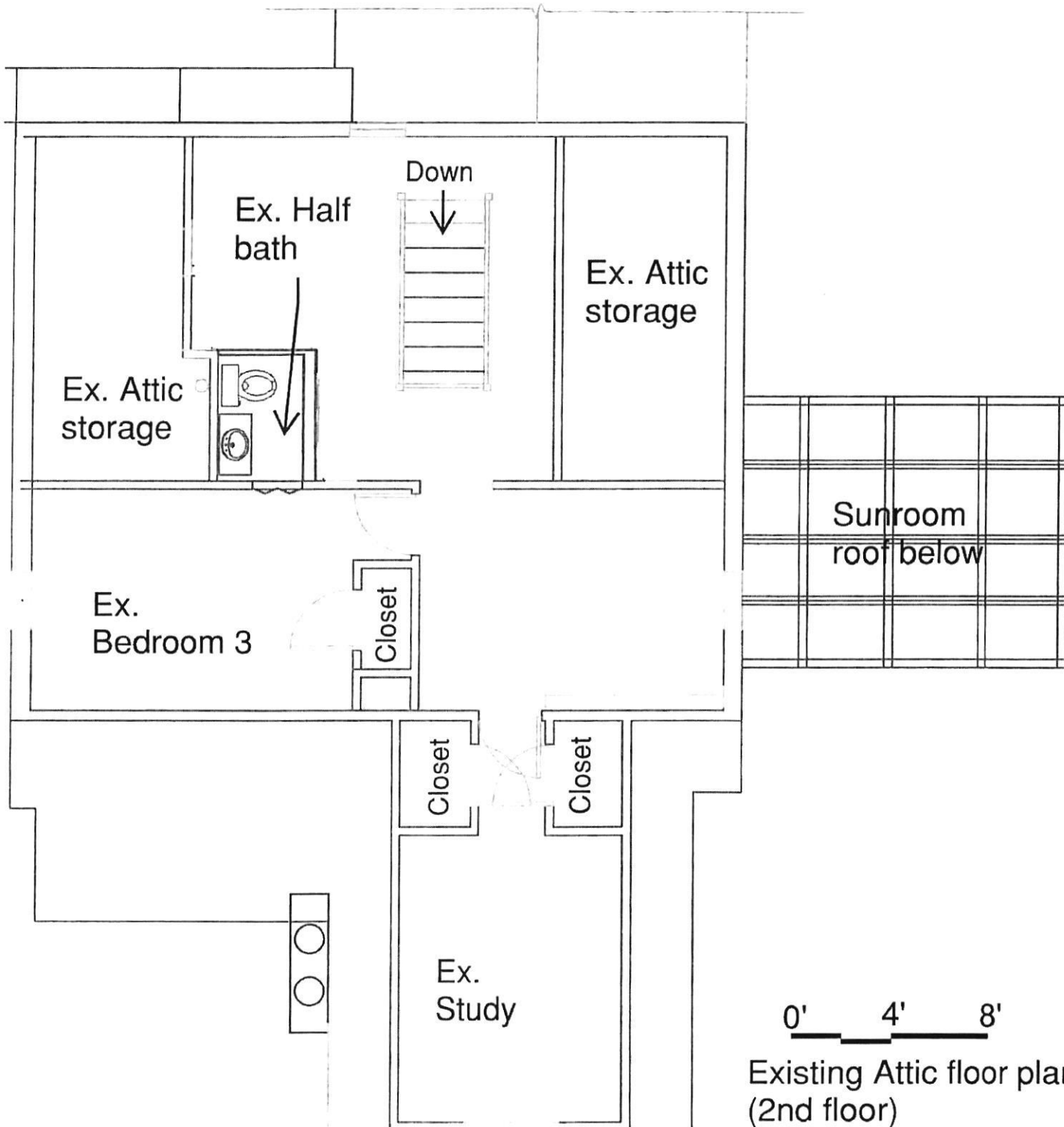


Existing Basement plan



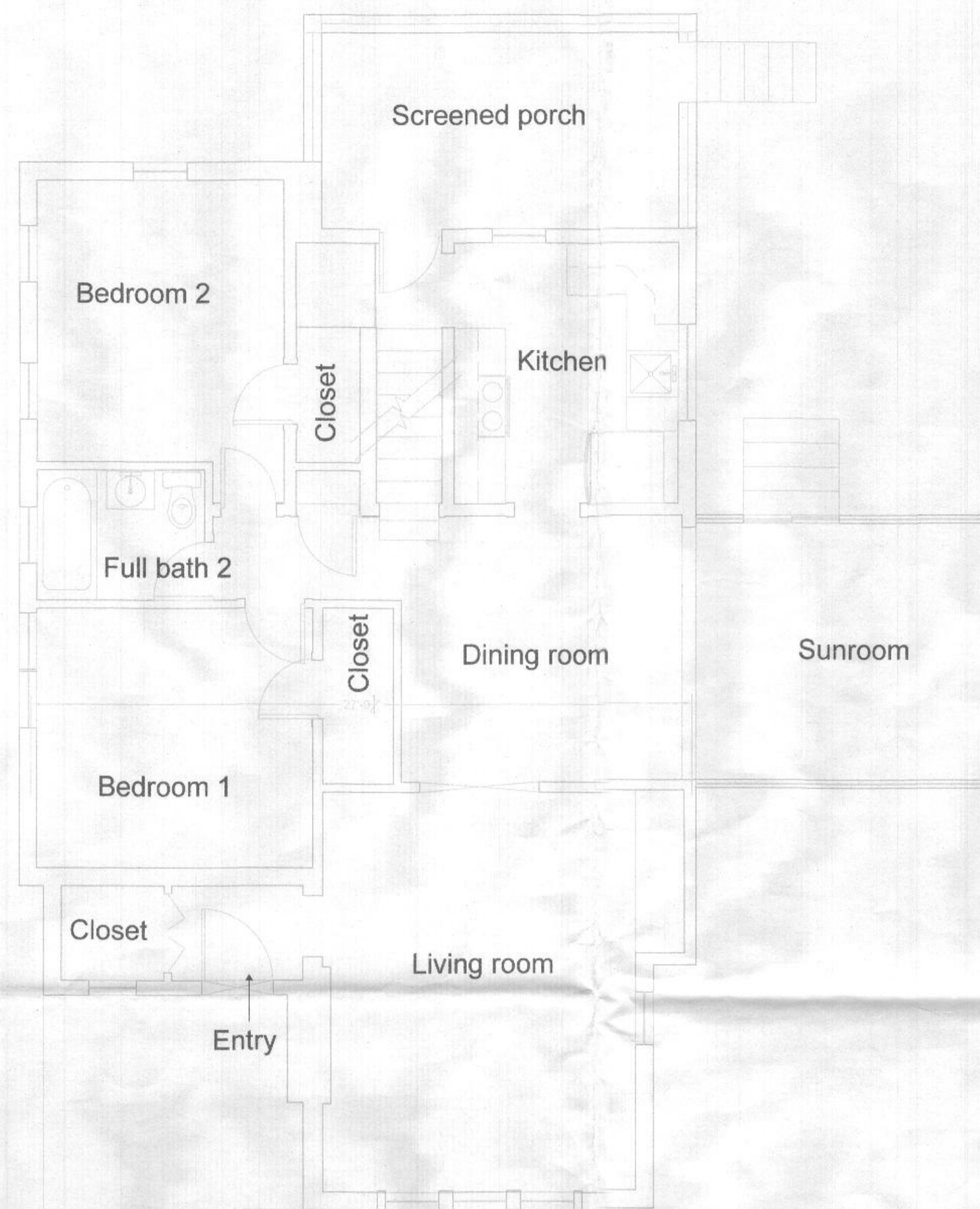
Existing First floor plan







Existing Basement plan



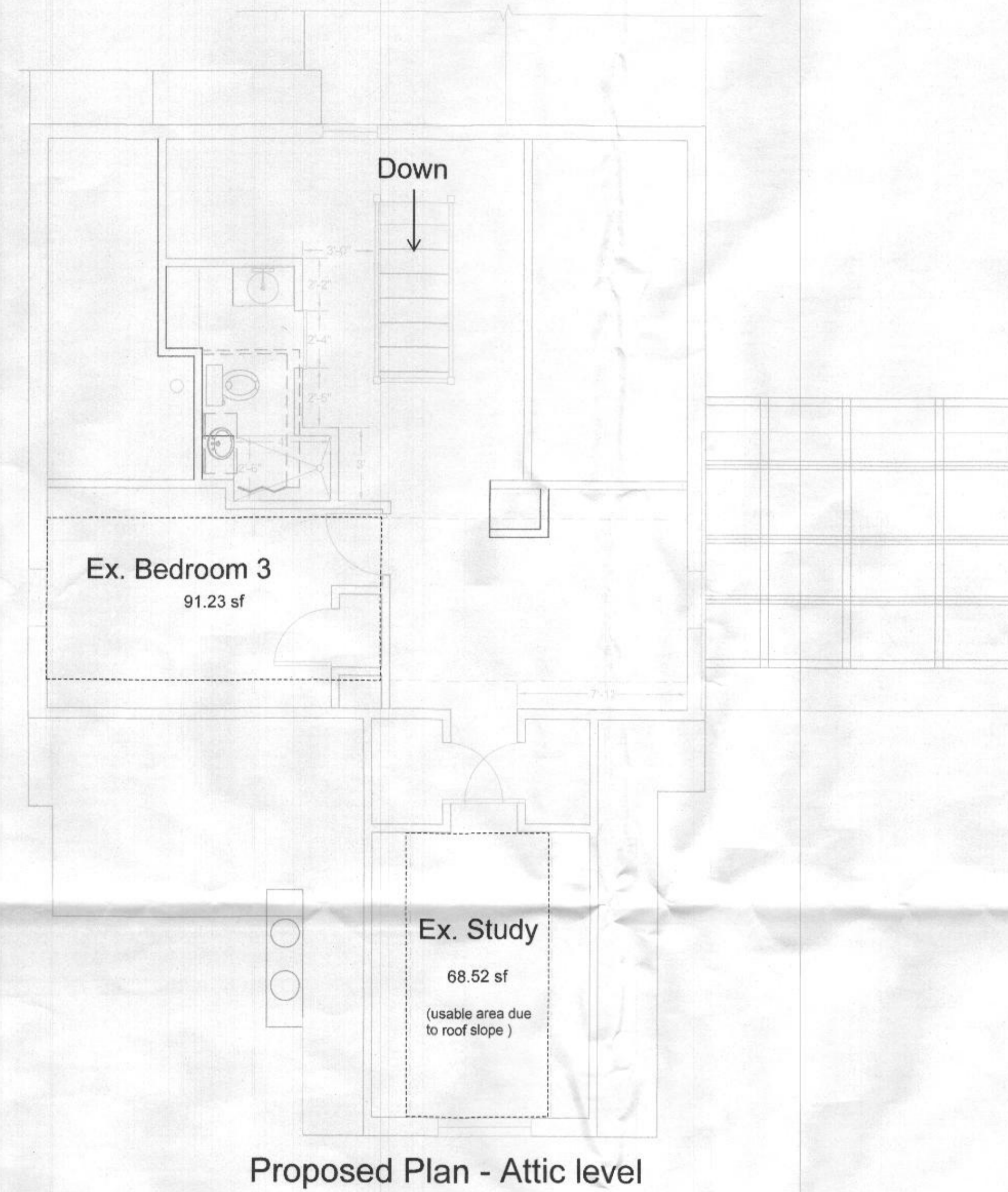
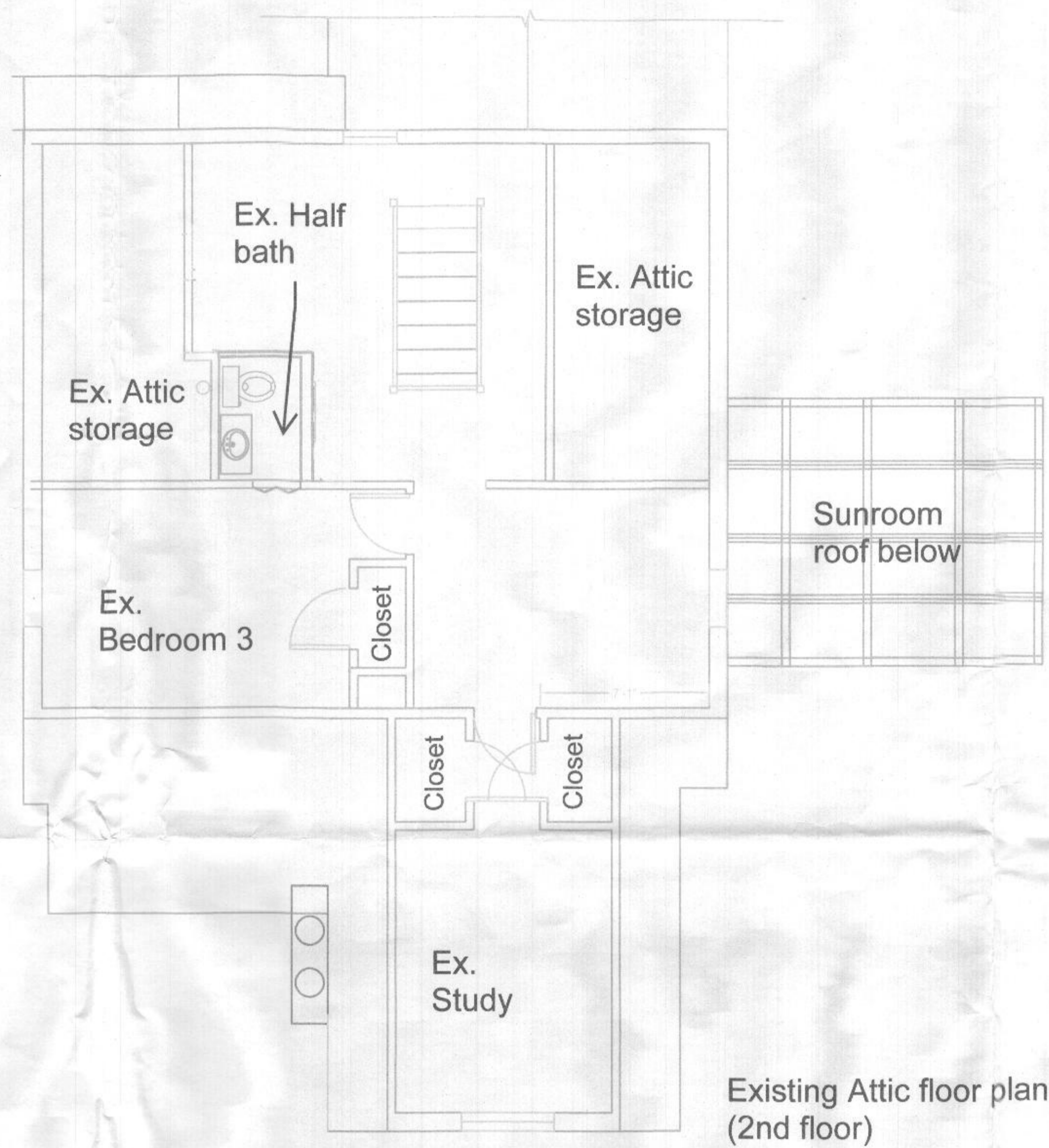
Existing First floor plan

Scale 1:50

Print to scale on  
24 x36 sheet

**NOTES:**

1. The house and building footprint is still very much the same that existed before when the septic was updated per your comments. We have not extended the house.
2. The basement was used as a recreation room earlier when the house was purchased by us in 2016 and is still being used in the same manner. The basement is open, and has no closets. There is not even a possibility to add a door to make it a bedroom.
3. Our house was recently appraised in 2021 as a 3 bedroom 2.5 bath by the bank for purpose of re-finance.
4. In last 2 years, all existing toilet fixtures in the house, have been updated to water efficient faucets, water efficient showers and 1 gallon flush capacity toilets
5. In the Attic Floor, there was a half bath only. This current permit request is to remodel that bathroom to add a shower.
6. If it can help the case, we are happy to convert the full bath in the basement to a half bath and re-locate the shower to the attic level, so that the house still remains as 2.5 bath house.



Scale 1:50

Print to scale on 24 x36 sheet

**NOTES:**

1. In the "Existing study" in the attic level, the usable area of 5 feet height min. is only 69 square feet. Please refer the dotted line in the above drawing title "Proposed Plan - Attic level".
2. The Attic level was always used as a bedroom and study.
3. The only change to the attic level is - remodel of the half bathroom to a full bathroom by addition of a shower, and addition of a closet to cover the exposed duct work, along with a door for better privacy for work/rest.
4. I would like to meet you with the printed copies this friday 12th of August if you have time or another day, with printed copies.