

PERMIT NUMBER: B 22003881

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

BUILDING SITE ADDRESS REQUIRED

Street Address: 12251 Blue Sky Evening Way		Unit:
City: Fulton	State: MD	Zip Code: 20759
Subdivision/Village/Complex Name: Fulton Woods		SDP/WP/BA #:
Lot: 3	Tax Map:	Parcel: N/A
Grading Permit #:		

DESCRIPTION OF WORK REQUIRED

Existing Use: Lawn	Proposed Use: Pavilion	Estimated Cost: \$6,500.00
Trade Work to Be Completed (Separate Permits Required): <input type="checkbox"/> Mechanical (HVACR) <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> None		

Construct 12' x 20' Open Pavilion over pavers.

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): Valerie Okehie and Ikem Nwolisa		Primary Residence: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Owner's Street Address: 12251 Blue Sky Evening Way		
City: Fulton	State: MD	Zip Code: 20759
Phone: (301) 704-5079	Email:	

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: N/A	Contact Name: Ikem Nwolisa
Street Address: 12251 Blue Sky Evening Way	
City: Fulton	State: MD
Phone: (301) 704-5079	Email: reelname1@yahoo.com

CONTRACTOR INFORMATION REQUIRED

Business Name: AxLenn Landscaping LLC <i>Home owner to install</i>	License #: _____
Licensee's Name: Jose Cartegena	License #: _____
Street Address: 486 Laurel Valley Court	
City: Arnold	State: MD
Phone: (443) 758-8479	Email: axlenn@gmail.com

ARCHITECT/ENGINEER INFORMATION INDIVIDUAL WHO SIGNED PLANS, IF APPLICABLE

Business Name: N/A	Name: N/A
Street Address:	
City:	State:
Phone:	Email:

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 checked="" type="checkbox"/> No
Utilities: <input checked="" type="checkbox"/> Electric <input checked="" type="checkbox"/> Gas	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private (Well)
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 type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> NFPA 13D <input type="checkbox"/> None	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):	# of efficiency units (MF*):	# of 1 BR (MF*):	# of 2 BR (MF*):	# of 3 BR (MF*):
# Rooms: 5	# Full Baths: 5	# Half Baths: 1	# Fireplaces: 1	
Garage/Carport Info: <input checked="" type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage <input type="checkbox"/> Integral Garage <input type="checkbox"/> Carport <input 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 checked="" type="checkbox"/> Full or <input type="checkbox"/> Partial				
1 st Fl Width:	1 st Fl Depth:	2 nd Fl Width:	2 nd 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.

[Signature]
 APPLICANT'S ORIGINAL SIGNATURE

[Signature] 10/14/22
 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 <i>Jan 10/27/22</i>	<input type="checkbox"/> SHA <input type="checkbox"/> CID
SUBMITTAL FEES: \$25.00		PAYMENT: # 001		ACCEPTED BY: <i>[Signature]</i>

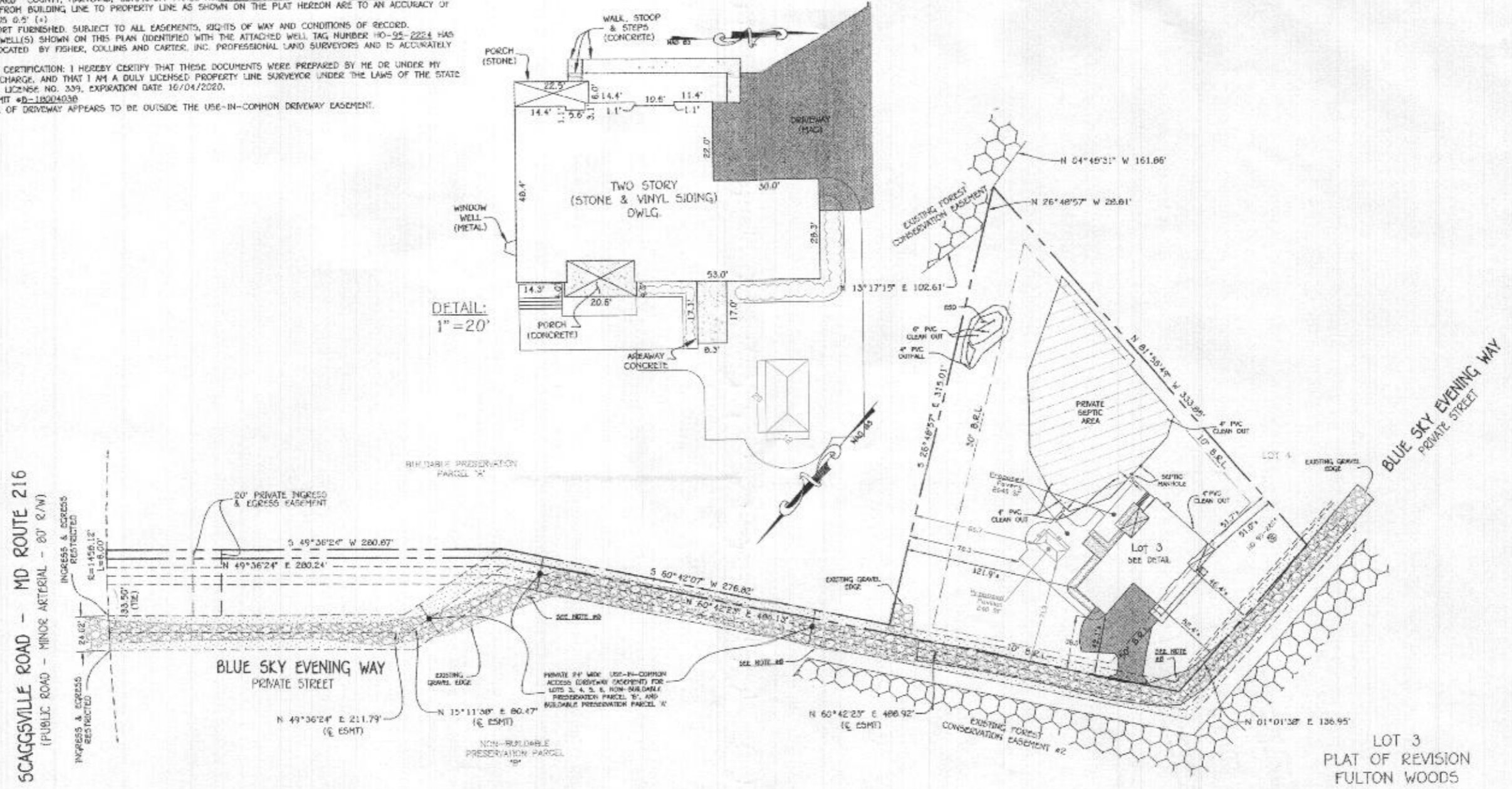
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GENERAL NOTES:

- 1) THIS LOCATION DRAWING IS PREPARED FOR THE BENEFIT OF THE CLIENT SIGNING THE HOUSE LOCATION SURVEY APPROVAL FORM INsofar AS IT IS REQUIRED BY A LENDER OR TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH THE CONTEMPLATED TRANSFER, FINANCING OR REFINANCING OF THE PROPERTY SHOWN HEREON. UNLESS INDICATED AS BEING A BOUNDARY SURVEY, THIS LOCATION DRAWING IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OF LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS. AS A RESULT, THIS LOCATION DRAWING DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING FOR RE-FINANCING.
- 2) SUBJECT PROPERTY IS SHOWN IN ZONE X₁ ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF HOWARD COUNTY, MARYLAND, COMMUNITY PANEL No. 24027C01460, EFFECTIVE 11/5/2013.
- 3) THE OFFSETS FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAT HEREON ARE TO AN ACCURACY OF PLUS OR MINUS 0.2' (+/-).
- 4) NO TITLE REPORT FURNISHED. SUBJECT TO ALL EASEMENTS, RIGHTS OF WAY AND CONDITIONS OF RECORD.
- 5) THE EXISTING WELLS(S) SHOWN ON THIS PLAN (IDENTIFIED WITH THE ATTACHED WELL TAG NUMBER HO-92-2224 HAS BEEN FIELD LOCATED BY FISHER, COLLINS AND CARTER, INC. PROFESSIONAL LAND SURVEYORS AND IS ACCURATELY SHOWN.
- 6) PROFESSIONAL CERTIFICATION: I HEREBY CERTIFY THAT THESE DOCUMENTS WERE PREPARED BY ME OR UNDER MY RESPONSIBLE CHARGE, AND THAT I AM A DULY LICENSED PROPERTY LINE SURVEYOR UNDER THE LAWS OF THE STATE OF MARYLAND, LICENSE NO. 339, EXPIRATION DATE 10/04/2020.
- 7) BUILDING PERMIT #B-180204038
- 8) EXISTING EDGE OF DRIVEWAY APPEARS TO BE OUTSIDE THE USE-IN-COMMON DRIVEWAY EASEMENT.

Legend

- EXISTING FOREST CONSERVATION EASEMENT
- PRIVATE SEPTIC AREA
- PRIVATE 24' WIDE USE-IN-COMMON ACCESS (DRIVEWAY EASEMENT) FOR LOTS 3, 4, 5, 6, NON-BUILDABLE PRESERVATION PARCEL 'B', AND BUILDABLE PRESERVATION PARCEL 'A'



DETAIL:
1" = 20'

LOT 3
PLAT OF REVISION
FULTON WOODS
LOTS 3 THRU 6
BUILDABLE PRESERVATION PARCEL "A"
& NON-BUILDABLE PRESERVATION "B"
PLAT NOS. "22069 THRU 22071"
PLATS NOS. "23204 THRU 23206"
FIFTH ELECTION DISTRICT
HOWARD COUNTY, MARYLAND

FISHER, COLLINS & CARTER, INC.
CIVIL ENGINEERING CONSULTANTS & LAND SURVEYORS
CENTRAL SQUARE OFFICE, P.O. BOX 10700 BALTIMORE, MD 21288
TEL: 410-528-1000 FAX: 410-528-1001

#12251 BLUE SKY EVENING WAY
B.R.L. BUILDING RESTRICTION LINE
FIRST FLOOR ELEVATION = 454.0'

STATE OF MARYLAND
MARTIN J. FOLEY
PROPERTY LINE SURVEYOR
No. 339
10/6/20
DATE

HOUSE LOCATION DRAWING
FOUNDATION LOCATION 5/22/19
FINAL LOCATION 1/3/2020
BOUNDARY SURVEY
SCALE: 1" = 50'
DATE: 1/6/2020
DRAWN BY: MD
CHECKED BY: JLR
PROJECT No. 18025-3001

1/20/2020 10:00 AM C:\Users\jcollins\Documents\18025-3001_Lot 3 Location.dwg 1/7/2020 9:15:17 AM NSRV/ Inc. eng kcarlshp Page 004 of 01 5000 HPGL2