

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Alteration/SFD	B24002986	08/12/2024

Description of Work
SFD/INTERIOR ALTERATIONS TO RENNOVATE SECOND FLOOR BATHROOM. APPROX 155 SF**SUBJECT TO FIELD INSPECTION**

[check spelling](#)

Online BP.
gA 8/26/24

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type
13902	HALLOWELL	CT
Unit Type	Unit #	X Coordinate
--Select--		-76.99838
		Y Coordinate
		39.21754
City	State	Zip Code
DAYTON	MD	21036
	Primary	
	Yes	

Parcel * (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
875872	138	3.63	289700	722600	432900	RURAL

Legal Description
LOT 11 3.636 A []13902 HALLOWELL CT []TRIADELPHIA MILL FARM

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	11	605101	5				
Plan Area	State Tax Id	Subdivision Name					
	1405391644	TRIADELPHIA MILL FARMS					
Section	Area	Tax Map					
		28					
Grid	Zoning District	ADC Map					
28-19	RR-DEO	4933-A6					
SDP No.	Final Plan No.	WP File No.					
Record Plat No.	WS Contract No.	FDP No.	Primary				
4900			Yes				
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input type="radio"/> No	1983	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	5-04A	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Building No							

Owner (This section is not required.)

Search Reset Clear

Name *
MOSHI

Address Line 1
13902 HALLOWELL CT

Address Line 2

Address Line 3

Mail City
DAYTON

Mail State
MD

Mail Zip Code
21036

Phone
410-984-8618

Primary
Yes

E-mail

Approved Septic System Plan
Howard County Health Department
D. Beard 8-27-24
Signature Date

john@clockworkbuilders.com

Cell Number Fax Number

Professionals (This section is not required.)

License #
 08010070347
Business Name
 CLOCKWORK BUILDERS LTD
License Type
 MHIC Ind
Primary
 Yes
First Name
 JOHN
Middle Name

Last Name
 RILEY
Address Line 1
 1188 DAY ROAD
Address Line 2
 1188 DAY ROAD
City
 SYKESVILLE
State
 MD
ZIP Code
 21784-0000
Phone 1
 4104423678
Phone 2

Fax
 4104424088
E-mail
 WWW.DONEONTIME@VERIZON.NET

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type
 Applicant
Relationship
 Applicant
Primary
 No
First Name
 John
MI
 P
Last Name
 Riley
Full Name
 John P Riley
Organization Name
 Clockwork Builders Ltd
Street Address
 1188 Day Road
Address Line 2

City
 Sykesville
State
 MD
Zip Code
 21784
Phone
 410-984-8618
Cell

Fax

E-mail
 john@clockworkbuilders.com

Contact (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type
 Contact
Relationship
 Licensed Professional
Primary
 Yes
First Name
 John
MI
 P
Last Name
 Riley
Full Name
 John P Riley
Organization Name
 Clockwork Builders Ltd
Street Address
 1188 Day Road
Address Line 2

City
 Sykesville
State
 MD
Zip Code
 21784
Phone
 410-984-8618
Cell

Fax

E-mail
 john@clockworkbuilders.com

Addl Info

Est Construction Cost
 22000
Housing Units
 0
Number of Buildings
 0
Public Owned
 No
Construction Type
 434 - Additions, Alterations and Conversions - Residential

RESIDENTIAL ALTERATION INFO

RESIDENTIAL ALTERATION INFORMATION

Total Square Footage	No of Stories	Basement	Bedrooms	Full Baths	Half Baths	Water	Sewage
155	SQFT (Number) 3	(Number) Full Finished	0	(Number) 0	(Number) 0	(Number) Private	Private

Existing Utilities
Electric

Existing Heating System
Electric

Existing Sprinkler System
None

Type of New Fireplace
Masonry

Expiration Date
2/18/2025

Submit Cancel