

PERMIT NUMBER: B 22003752

DATE ACCEPTED:

DDLP 2022 00) 3 PAGES



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

BUILDING SITE ADDRESS REQUIRED

Street Address: 6000 Merriweather Drive		Unit: B140
City: Columbia	State: MD	Zip Code: 21044
Subdivision/Village/Complex Name: Merriweather Dist. Juniper commercial Condo		SDP/WP/BA #: SDP-16-075
Lot: D-2	Tax Map: 0036	Parcel: 10000.14
Grading Permit #:		

DESCRIPTION OF WORK REQUIRED

Existing Use: Vacant Retail	Proposed Use: Restaurant	Estimated Cost: \$ 1,000,000 est
Trade Work to Be Completed (Separate Permits Required): <input checked="" type="checkbox"/> Mechanical (HVACR) <input checked="" type="checkbox"/> Electrical <input checked="" type="checkbox"/> Plumbing <input type="checkbox"/> None		

Tenant Fit-Out Including MEP and struct to exist shell suite. Work includes but is not limited to walls, doors, ceilings, and

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): MWD 3MFB LLC C/O HOWARD HUGHES CORPORATION		
Owner's Street Address: PO BOX 131298		
City: CARLSBAD	State: CA	Zip Code: 92013
Phone: (410) 964-5245	Email: vanessa.carpenter@howardhughes.com	

TENANT INFORMATION REQUIRED

Business Name: Blackwall Barn & Lodge Columbia, LLC		Contact Name: James King
Street Address: 2126 Espey Court, Suite D		
City: Crofton	State: MD	Zip Code: 21114
Phone: (202) 997-7303	Email: jamesjking2022@yahoo.com	

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: Blackwall Barn & Lodge c/o Fayland Consulting		Contact Name: Fayland Ng
Street Address: 5400 Willow Valley Road		
City: Fairfax	State: VA	Zip Code: 20124
Phone: (703) 268-3613	Email: faylandconsulting@gmail.com	

CONTRACTOR INFORMATION REQUIRED

Business Name: TBD		
Licensee's Name:	License #:	
Street Address:		
City:	State:	Zip Code:
Phone:	Email:	

ARCHITECT/ENGINEER INFORMATION REQUIRED - INDIVIDUAL WHO SIGNED PLANS

Business Name: Harrison		Name: Robert G. Speate
Street Address: 14850 Quorum Drive, Suite 450		
City: Dallas	State: TX	Zip Code: 75254
Phone: (972) 807-9257	Email: gspaete@weareharrison.com	

BUILDING CHARACTERISTICS (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Utilities: <input checked="" type="checkbox"/> Electric <input checked="" type="checkbox"/> Gas	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private (Well)	Sewage Disposal: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private (Septic)
Heating System: <input checked="" 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 checked="" type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input type="checkbox"/> None		Fire Alarm System: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Voice Evac

ADDITIONAL COMMERCIAL INFORMATION (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Area of Construction: 9,186 sq ft	Gross Area: 9,186 sq ft	Height: 16 ft	# of Stories: 1
Construction Classification(s): IA		Use Group: Restaurant (A-2 Assembly)	
Was the tenant space previously occupied? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Shell Building Permit # (for interior completions):	

ADDITIONAL MULTI-FAMILY INFORMATION IF APPLICABLE

# 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

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: **10/03/2022**

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 ANB	<input type="checkbox"/> SHA	<input type="checkbox"/> CID
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SUBMITTAL FEES: **\$200.00** PAYMENT: **on line** ACCEPTED BY:

10/3/22 - OK per person mo...
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 needs redline 17-027 to submit to Amy G. without redline being... with