

PERMIT NUMBER: B 23001705

DATE ACCEPTED: 5/14/2003

LICENSES & PERMITS

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: 12500 Clarksville Pike		Unit:
City: Clarksville	State: MD	Zip Code: 21029
Subdivision/Village/Complex Name:		SDP/WP/BA #:
Lot:	Tax Map:	Parcel:
		Grading Permit #:

DESCRIPTION OF WORK REQUIRED

Existing Use:	Proposed Use:	Estimated Cost: \$ 6,300
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		
Install tents prior to event date on June 24 - 1 (60' x 100'), 15 (10' x 30'), 8 (10' x 10'), 2 (10' x 20'), 3 (8' x 10'). Tents taken down Sunday, Monday following picnic		

PROPERTY OWNER INFORMATION REQUIRED

Owner(s) Name(s) (As it appears on tax records): ST LOUIS ROMAN CATHOLIC Church		
Owner's Street Address: 12500 Clarksville Pike		
City: Clarksville	State: MD	Zip Code: 21029
Phone: 410-965-531-6040	Email: DAN STLOUIS PICNIC@STLOUIS.PARISH.ORG	

TENANT INFORMATION REQUIRED

Business Name: ST LOUIS CATHOLIC CHURCH	Contact Name:
Street Address: same as above	
City:	State: Zip Code:
Phone:	Email:

APPLICANT NAME REQUIRED - INDIVIDUAL WHO SIGNS THIS APPLICATION

Business Name: ST Louis Roman Cath Church	Contact Name: Dan Comeaux
Street Address: 10944 Harmel Drive	
City: Columbia	State: MD Zip Code: 21044
Phone: 443 561-5005	Email: DANCOMEUX@GMAIL.COM

CONTRACTOR INFORMATION REQUIRED

Business Name: ELITE TENTS AND EVENTS	
Licensee's Name: MICHELLE SLEIGHT	License #: 11507310
Street Address: 6355 S Carroll Park Dr	
City: Sykesville	State: MD Zip Code: 21784
Phone: 410 795 2368	Email:

ARCHITECT/ENGINEER INFORMATION REQUIRED - INDIVIDUAL WHO SIGNED PLANS

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

BUILDING CHARACTERISTICS (PLEASE SELECT/COMPLETE ALL THAT APPLY)

Utilities: <input checked="" type="checkbox"/> Electric <input 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 type="checkbox"/> NFPA 13 <input type="checkbox"/> NFPA 13R <input checked="" type="checkbox"/> None		Fire Alarm System: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Voice Evac

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

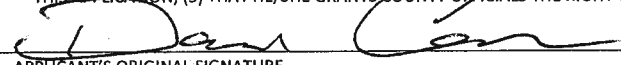
Area of Construction: sq ft	Gross Area: sq ft	Height: ft	# of Stories:
Construction Classification(s):		Use Group:	
Was the tenant space previously occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No		Shell Building Permit # (for interior completions):	

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

 5/14/2003
 APPLICANT'S ORIGINAL SIGNATURE 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 type="checkbox"/> DED	<input checked="" type="checkbox"/> Health <i>On Public WES. Approved 5/20/03</i>	<input type="checkbox"/> SHA	<input type="checkbox"/> CID
SUBMITTAL FEES: \$ 110	PAYMENT: check # 9473	ACCEPTED BY: TR			

Commercial Tent Permit
2023 Clarksville Picnic
12500 CLARKSVILLE PK
CLARKSVILLE, MD 21029

Description of Work:

St. Louis Catholic church will install 16 temporary tents larger than 200 square feet for an event on Saturday, June 24th. Some of the tents will be put up about two weeks prior to the event. The tent layout can be found in the attachment. 15 (18' x 30'), 1 (60' x 100') and various smaller tents.

Amanda Hill, Chief of Licenses, gave verbal approval to only be charged one \$110 fee for this event. The updated layouts for this year's event reflect 16 tents greater than 200 sq feet. At the time of the discussion on 5/12 it was 13 tents based upon last year's layout. 2022 Permit number is B22001835.

DRAFT – 145th Clarksville Picnic Layout (2023)

Chikdren games
(detail on
other
diagram
)

Chapel

Dunking
Booth


Church


KEY (diagram not to scale)

Entrance ↔

Sidewalks

Building

18'x30' Tent  Count 7

Pop-Ups  Count 2

Big 6

 2

1 WE

2 WE

First Aid
(pop-up)

Pony
Rides

Book
Room

Made in
Cville

3 WE

4 WE

5 WE

6 WE

7 Plant Stand

Holiday Shop

Toy
Room
Pricing
Room

White Elephant (Cafeteria)

White Elephant
(Classroom -More goodies) WE
office

Version date:
5/10/2023

Comptroller of Maryland
Revenue Administration Division
P.O. Box 849-SOPE
Annapolis, Maryland 21404-0049

Comptroller of Maryland
Sales and Use Tax Exemption Certificate

Product Code 31010029

Exemption Code
000000

Name **ST LOUIS CHURCH**
12500 CLARKSVILLE PIKE
CLARKSVILLE, MD 21029-1534

The attached card is your organization's non-exempt certificate which is valid upon receipt and effective until the expiration date designated on the face. See Business Tax Tip #3 on tax.maryland.gov and the instructions on the back of the card for the proper use of the exemption certificate. If you have any questions regarding the use of this card, call Taxpayer Services Division at (410) 386-7000, toll free 1-800-833-2927, or e-mail tax@maryland.gov.

PLEASE CONTACT THE CARD.

00963

NOV 2004 (20)