



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: _____

Permit No.: _____

Building Address: 10384 KINGSBRIDGE RD
 City: ELICOTT CITY State: MD Zip Code: 21042
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SINGLEFAMILY-ADD ROOM
 Proposed Use: BUTLERS PANTRY
 Estimated Construction Cost: \$ 12K
 Description of Work: PROVIDE A BUTLERS KITCHEN
ADD SINK (+) COMPART. CABINETS
BUTLERS PANTRY
 Occupant or Tenant: 1 boy
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: MR. ALEX MAJIAN
 Address: 10384 KINGSBRIDGE RD
 City: ELICOTT CITY State: MD Zip Code: 21042
 Phone: 443-538-8522 Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: ALEX MAJIAN DESIGN/BUILD GROUP
 Contact Person: ALEX MAJIAN
 Address: 4522 NOVIS DR
 City: BELTSVILLE State: MD Zip Code: 20705
 License No.: 50502
 Phone: (301) 493-3011 Fax: _____
 Email: alex.majian@gmail.com

Engineer/Architect Company: _____
 Responsible Design Prof: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories:	Depth: _____ Width: _____
Gross area, sq. ft./floor:	1 st floor: _____ 2 nd floor: _____
Area of construction (sq. ft.):	Basement: <input checked="" type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement
Use group:	<input type="checkbox"/> Crawl Space
Construction type:	<input type="checkbox"/> Slab on Grade
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms: _____
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>
<input type="checkbox"/> Masonry	No. of efficiency units: _____
<input type="checkbox"/> Wood Frame	No. of 1 BR units: _____
<input type="checkbox"/> State Certified Modular	No. of 2 BR units: _____
	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings: _____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof: _____
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Sanitary Disposal	
<input type="checkbox"/> Public	
<input type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
Sprinkler System:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

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 Signature: Alex Majian Print Name: ALEX MAJIAN
 Email Address: alex.majian@gmail.com Date: 3/7/2014
 Title/Company: Owner

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>3/14/14</u>	<u>Anda Smith</u>

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START:

DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone: _____
SDP/Red-line approval date: _____

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

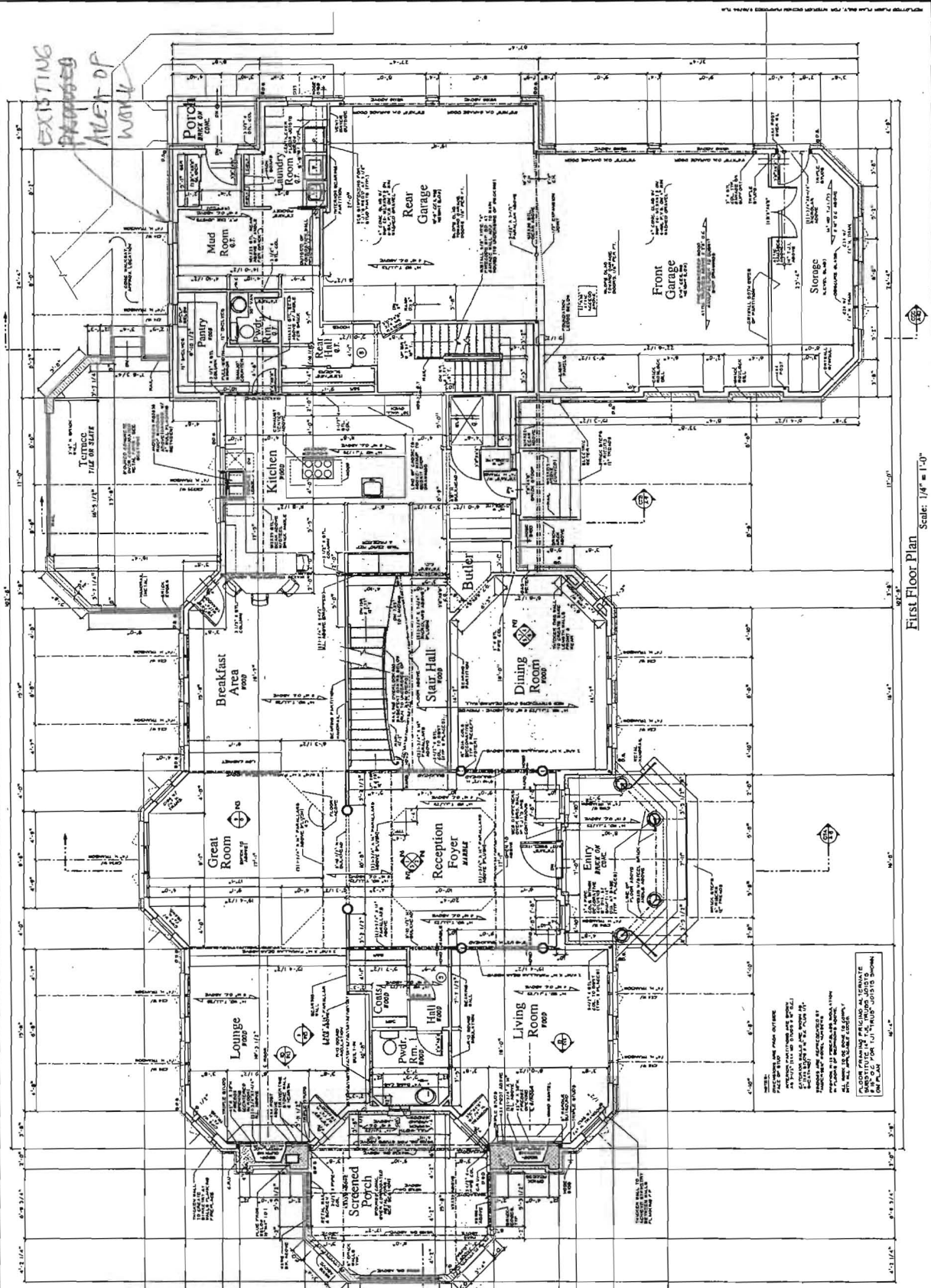
Richard Turner & Coleene Cooke
 10384 Kingsbridge Rd.
 Ellicott City, MD

FIRST FLOOR PLAN

Codebooks
 266 West Patrick St.
 Frederick, MD 21701
 (301) 695-9121

Kaplan
 Suttan
 Associates
 No. 8 West Madison Street
 Baltimore, Maryland 21201
 (410) 783-1500

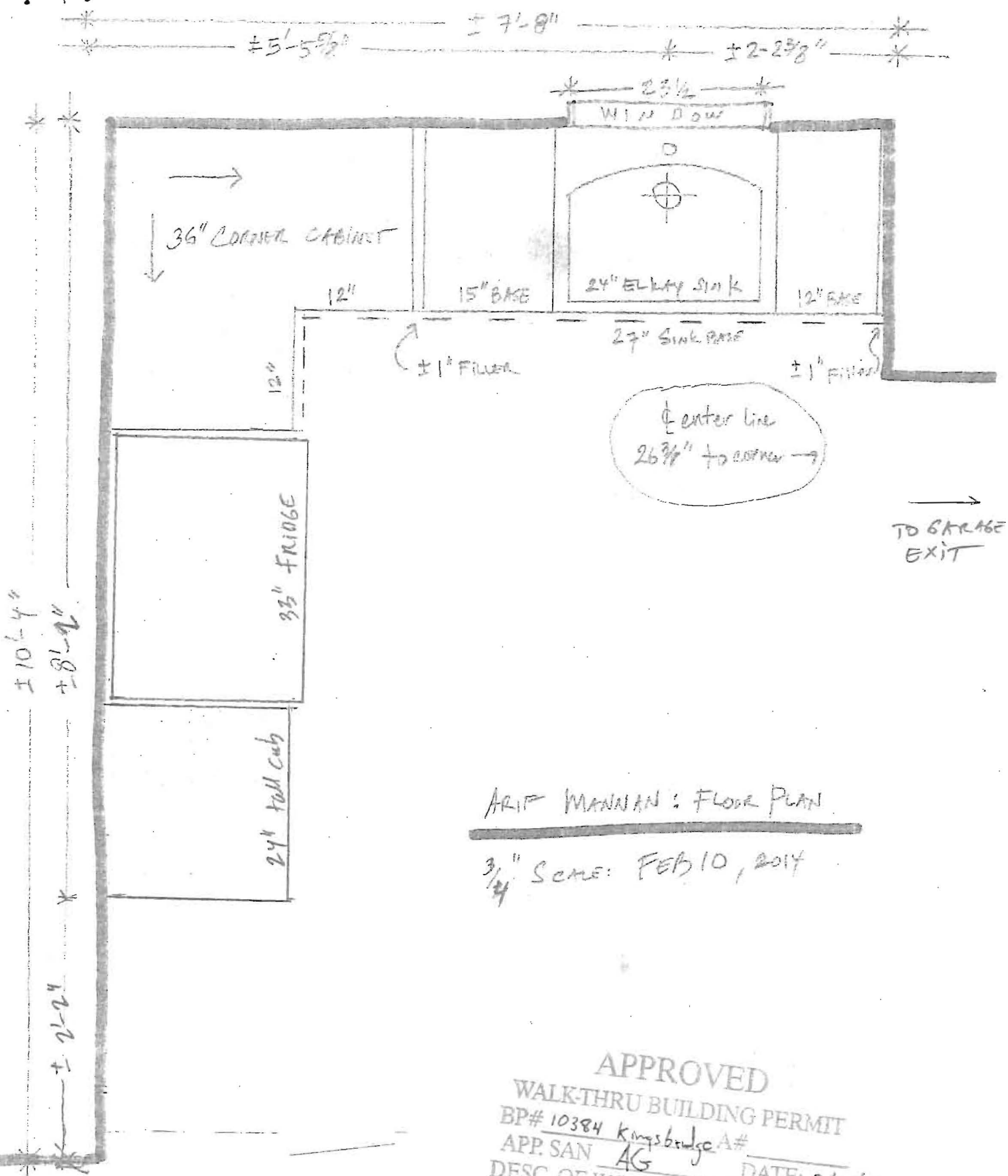
HOPE
 Associates, Inc.
 10 & Madison St.
 Suite 100
 Baltimore, MD 21201
 (410) 521-1571



First Floor Plan Scale: 1/4" = 1'-0"

First Floor Finished Area: 3295 sq. ft.
 First Floor Screened Porch/Terrace: 628 sq. ft.

ALL ROOMS FINISHED UNLESS NOTED OTHERWISE.
 ALL WALLS TO BE FINISHED UNLESS NOTED OTHERWISE.
 ALL FLOORS TO BE FINISHED UNLESS NOTED OTHERWISE.
 ALL CEILING TO BE FINISHED UNLESS NOTED OTHERWISE.
 ALL LIGHTING TO BE FINISHED UNLESS NOTED OTHERWISE.
 ALL MECHANICAL TO BE FINISHED UNLESS NOTED OTHERWISE.
 ALL ELECTRICAL TO BE FINISHED UNLESS NOTED OTHERWISE.
 ALL PLUMBING TO BE FINISHED UNLESS NOTED OTHERWISE.
 ALL PAINT TO BE FINISHED UNLESS NOTED OTHERWISE.



ARIF MANNAN : FLOOR PLAN

3/4" SCALE: FEB 10, 2017

APPROVED

WALK-THRU BUILDING PERMIT

BP# 10384 Kingsbridge A#

APP. SAN AG

DATE: 3/14/14

DESC. OF WORK: Addition of sink into existing mud room

Hand
way