



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: 11613 John Hopkins Rd
City: Clarksville State: MD Zip Code: 21029
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: Hopkins Mead
Section: _____ Area: _____ Lot: 3
Tax Map: 41 Parcel: 195 Grid: 5
Zoning: _____ Map Coordinates: _____ Lot Size: 1.000AC

Existing Use: SFD
Proposed Use: SFD
Estimated Construction Cost: \$ 10,000
Description of Work: Construct a 18x18 Screened Porch with 4 steps to grade.
Occupant or Tenant: _____
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: John & Judy Propts
Address: 11613 John Hopkins Rd
City: Clarksville State: MD Zip Code: 21029
Phone: 501 498-0084 Fax: _____
Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: _____
Address: 8057 Veterans Hwy
City: Millersville State: MD Zip Code: 21108
Phone: (410) 355-3125 Fax: _____
Email: Permits@fencecheckconnect.com

Contractor Company: Fence Connection
Contact Person: James Rubush
Address: 8057 Veterans Hwy
City: Millersville State: MD Zip Code: 21106
License No.: MIC 45780
Phone: (410) 969-4444 Fax: _____
Email: _____

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

Commercial Building Characteristics	Residential Building Characteristics
Height: <u>2.8'</u>	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse
No. of stories: _____	Depth <u>18x18</u> Width _____
Gross area, sq. ft./floor: _____	1 st floor: _____
Area of construction (sq. ft.): <u>324</u>	2 nd floor: _____
Use group: _____	Basement: _____
Construction type:	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input checked="" type="checkbox"/> Wood Frame	No. of Bedrooms: _____
<input type="checkbox"/> State Certified Modular	Multi-family Dwelling
<input type="checkbox"/> Roadside Tree Project Permit	No. of efficiency units: _____
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	No. of 1 BR units: _____
Roadside Tree Project Permit # _____	No. of 2 BR units: _____
	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
	Footings: _____
	Roof: _____
	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Utilities	
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Heating System	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other: _____	
Sprinkler System:	
<input type="checkbox"/> Yes <input checked="" 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: Permits@fencecheckconnect.com
Email Address: _____
Agent for Contractor/Fence Connection
Title/Company: _____

Print Name: _____
Date: _____

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>7-9-14</u>	<u>Beard</u>

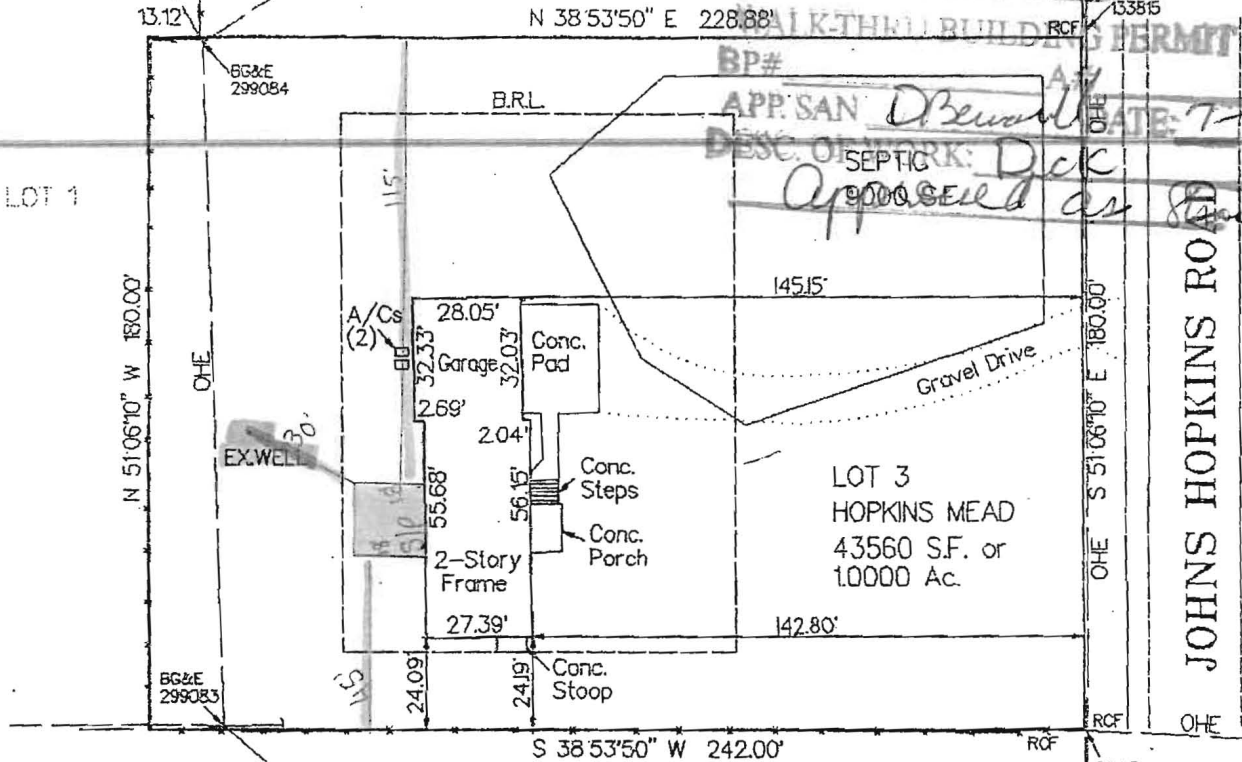
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

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	#

Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA

ZONING NOTE
 ZONE: RRDEO
 SETBACKS:
 FRONT: 90' (PLAT)
 SIDE: 20'
 REAR: 50'



APPROVED
 BP#
 APP. SAN *DB...*
 DESC. OF WORK: *Deck*
 APPROVED AS SHOWN
 DATE: 7-9-14

ABBREVIATIONS

- Ac. ACRES
- B.R.L. BUILDING RESTRICTION LINE
- EX. EXISTING
- IPF IRON PIPE FOUND
- OHE OVERHEAD ELECTRIC
- PROP. PROPOSED
- R/W RIGHT OF WAY
- RCF REBAR AND CAP FOUND
- S.F. SQUARE FEET

PLAN
 SCALE: 1"=50'



FLOOD NOTE

ACCORDING TO THE FLOOD INSURANCE RATE MAP FOR HOWARD COUNTY COMMUNITY PANEL NO. 240044 0038B DATED DEC. 4, 1986 THIS PROPERTY DOES NOT LIE WITHIN A RECOGNIZED FLOOD PLAIN.

NO TITLE REPORT FURNISHED



(301) 921-9109

CIVIL DESIGN SYSTEMS

CIVIL ENGINEERING & LAND SURVEYING

19645 MUNCASTER ROAD ROCKVILLE, MARYLAND 20855

HOUSE LOCATION SURVEY

11613 JOHNS HOPKINS ROAD

HOPKINS MEAD

SECTION 1
 5th ELECTION DISTRICT
 HOWARD COUNTY
 MARYLAND

SURVEYOR'S CERTIFICATE

I CERTIFY THE PLAT SHOWN HEREON IS CORRECT. THE LOCATION OF THE IMPROVEMENTS AS SHOWN IS CORRECT AND THEY WERE LOCATED BY A TRANSIT-TAPE SURVEY MADE ON THE DATE SHOWN. UNLESS OTHERWISE SHOWN THERE ARE NO ENCROACHMENTS EITHER WAY ACROSS PROPERTY LINES.

Peter A. Gallerizzo
 PETER A. GALLERIZZO MD. PROF. L.S. #10705

8/27/99
 DATE

JOB NO.: JUP99002 LOT: 3
 SCALE: 1"=50' BLOCK:
 FINAL: 08/26/99 PLAT BOOK: 6
 WALL CHECK: 05/19/99 PLAT NO.: 77