



# 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: 6330 KERNE CT  
 City: Clarksville State: MD Zip Code: 21029  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
 Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
 Section: 34 Area: 90 Lot: 24  
 Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
 Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Existing Use: SFD  
 Proposed Use: SFD  
 Estimated Construction Cost: \$ 42,000  
 Description of Work: Basement finish, office, wet bar powder room.  
 Occupant or Tenant: Kim, Christopher  
 Was tenant space previously occupied?  Yes  No  
 Contact Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

Property Owner's Name: KIM CHRISTOPHER  
 Address: 6330 KERNE CT  
 City: Clarksville State: MD Zip Code: 21029  
 Phone: 670 654 8999 Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated herein)  
 Applicant's Name: JAMES PARK  
 Address: 2528 HUDSON ST.  
 City: BALTIMORE State: MD Zip Code: 21224  
 Phone: 410 473 9800 Fax: \_\_\_\_\_  
 Email: cooljames777@hotmail.com

Contractor Company: \_\_\_\_\_  
 Contact Person: OWNER  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 License No.: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Email: \_\_\_\_\_

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:	<u>Depth</u>	<u>Width</u>
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:	
	2 <sup>nd</sup> floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
<u>Construction type:</u>	<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	
<u>Water Supply</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<u>Sewage Disposal</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Gas:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<u>Heating System</u>	
<input checked="" type="checkbox"/> Electric	<input type="checkbox"/> Oil
<input checked="" type="checkbox"/> Natural Gas	<input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:	
<u>Sprinkler System:</u>	
<input checked="" 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: \_\_\_\_\_ Print Name: JAMES PARK  
 Email Address: cooljames777@hotmail.com Date: 12/8/16  
 Title/Company: ResOwner

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>12/8/16 [Signature]</u>

Is Sediment Control approval required?  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:

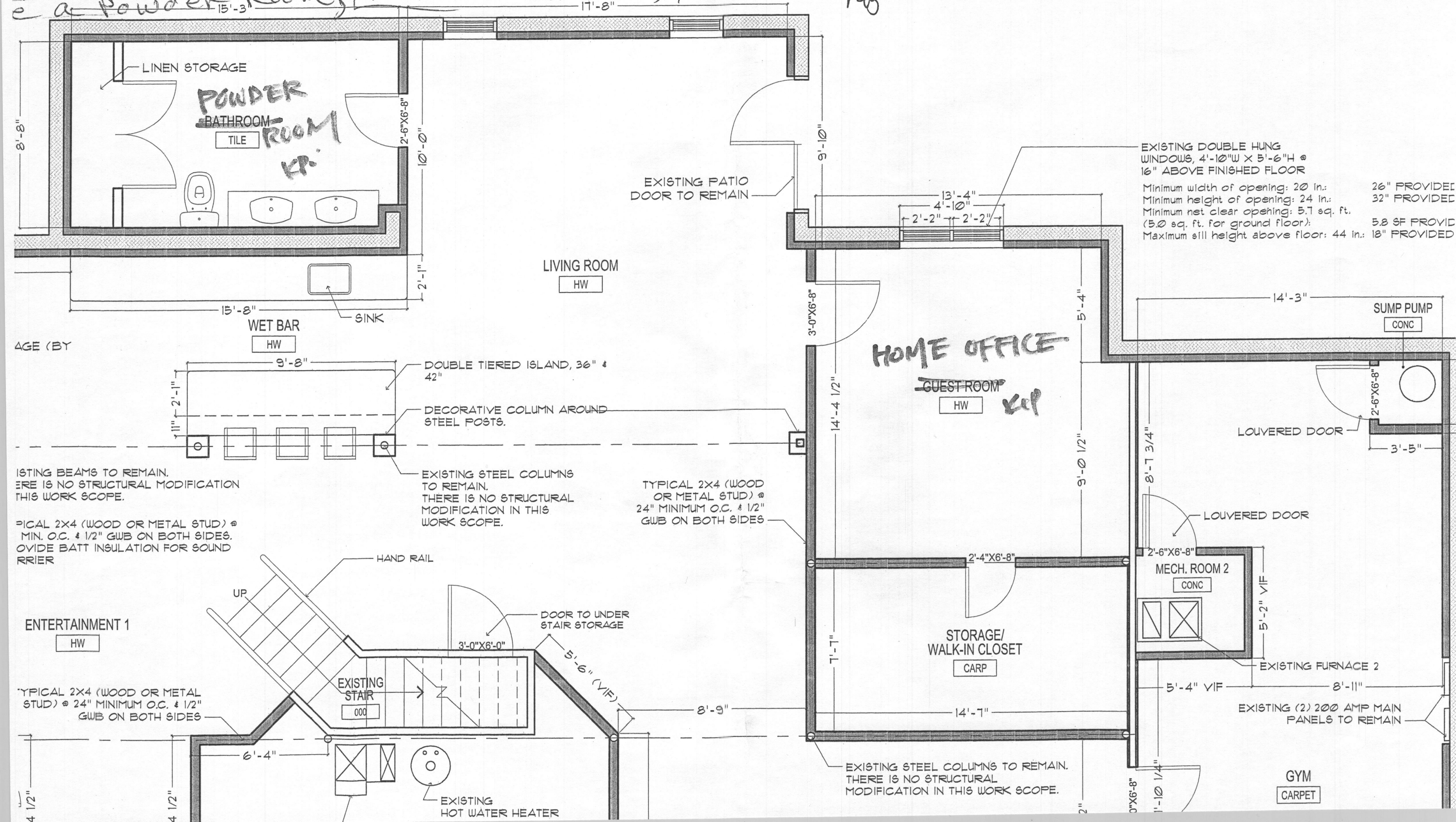
Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

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

APPROVED  
BUILDING PERMIT

6330 Kerne Ct.  
Walk-Thru permit 12/8/2016

DATE: 12/8/2016  
Finish Basement  
e a Powder Room, <sup>reb</sup> Room, (no Full Bath Permitted), office & wet bar <sup>reb</sup>



EXISTING DOUBLE HUNG WINDOWS, 4'-10"W X 5'-6"H @ 16" ABOVE FINISHED FLOOR

Minimum width of opening: 20 in.	26" PROVIDED
Minimum height of opening: 24 in.	32" PROVIDED
Minimum net clear opening: 5.7 sq. ft. (5.0 sq. ft. for ground floor).	5.8 SF PROVIDED
Maximum sill height above floor: 44 in.	18" PROVIDED

EXISTING BEAMS TO REMAIN. THERE IS NO STRUCTURAL MODIFICATION IN THIS WORK SCOPE.

TYPICAL 2X4 (WOOD OR METAL STUD) @ MIN. O.C. & 1/2" GWB ON BOTH SIDES. PROVIDE BATT INSULATION FOR SOUND BARRIER

EXISTING STEEL COLUMNS TO REMAIN. THERE IS NO STRUCTURAL MODIFICATION IN THIS WORK SCOPE.

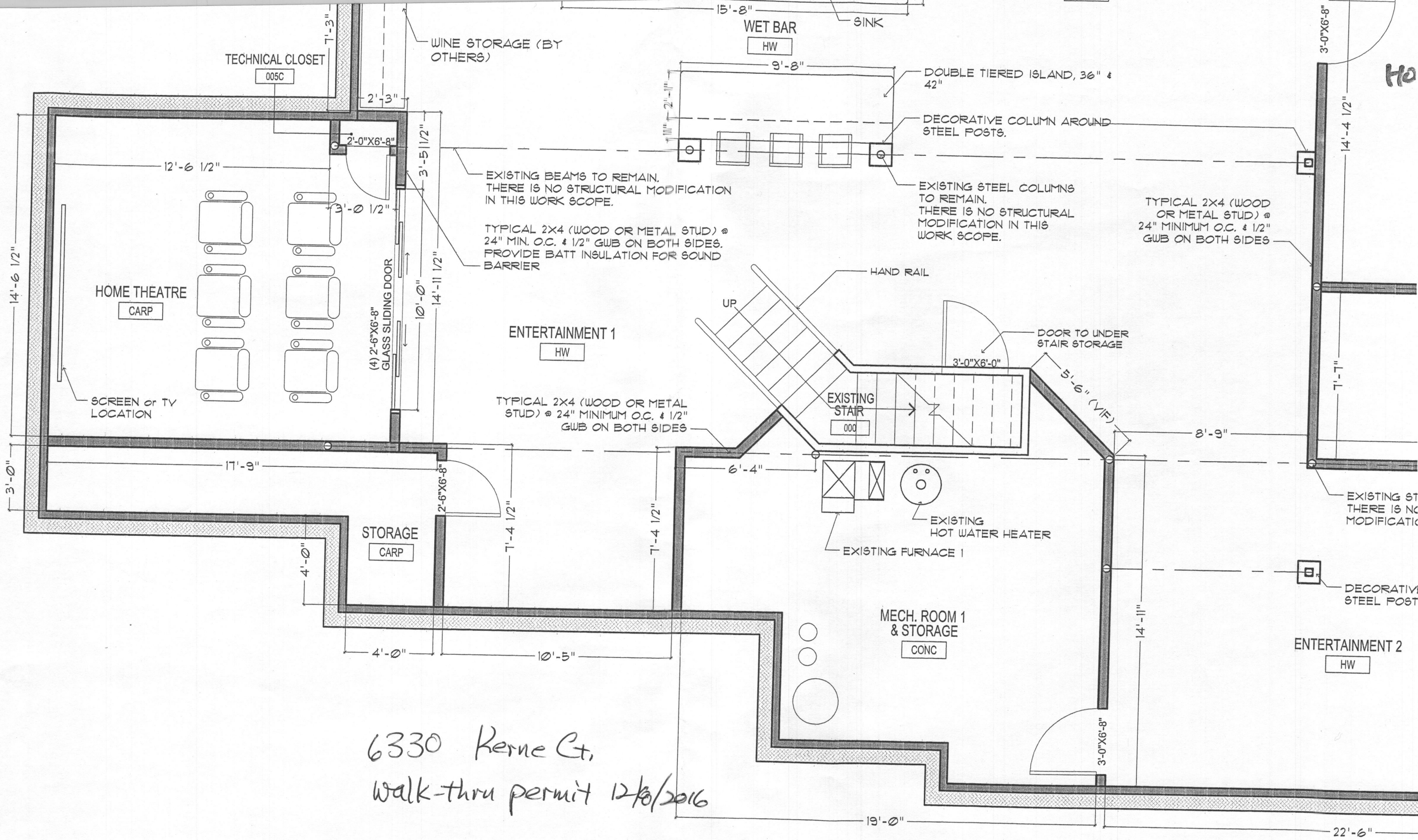
TYPICAL 2X4 (WOOD OR METAL STUD) @ 24" MINIMUM O.C. & 1/2" GWB ON BOTH SIDES

EXISTING STEEL COLUMNS TO REMAIN. THERE IS NO STRUCTURAL MODIFICATION IN THIS WORK SCOPE.

ENTERTAINMENT 1  
HW

TYPICAL 2X4 (WOOD OR METAL STUD) @ 24" MINIMUM O.C. & 1/2" GWB ON BOTH SIDES

GYM  
CARPET



**1** PROPOSED LAYOUT  
SCALE: 1/4"=1'-0"