



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: 6661 LUSTER DRIVE
City: HIGHLAND State: MD Zip Code: 20777
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: 6051.01 Subdivision: _____
Section: _____ Area: 5 Lot: 4
Tax Map: 34 Parcel: 24 Grid: _____
Zoning: _____ Map Coordinates: _____ Lot Size: _____

Property Owner's Name: WILLIAM M. WATSON
Address: 6661 LUSTER DRIVE
City: HIGHLAND State: MD Zip Code: 20777
Phone: 301-641-7700 Fax: _____
Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)

Applicant's Name: OWNER
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

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

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

Existing Use: _____
Proposed Use: STORAGE SHEED
Estimated Construction Cost: \$ 6000.00
Description of Work: PRE MADE SHEED 24'x12'
GRAVEL BFW WALK
Occupant or Tenant: OCCUPANTS
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories: <u>2</u>	Depth	Width
Gross area, sq. ft./floor:	1 st floor: <u>✓ 24' 12'</u>	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<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	Multi-family Dwelling	
<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:	
<u>STONE BASE</u>	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
➤ 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 checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" 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 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:	

RECEIVED
OCT 21 2016
LICENSING & PERMITS
DIVISION

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.

William M. Watson
Applicant's Signature

WILLIAM MICHAEL WATSON
Print Name

Email Address

10/21/16 10/21/16
Date

Title/Company

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>10/21/16</u>	<u>Paul [Signature]</u>

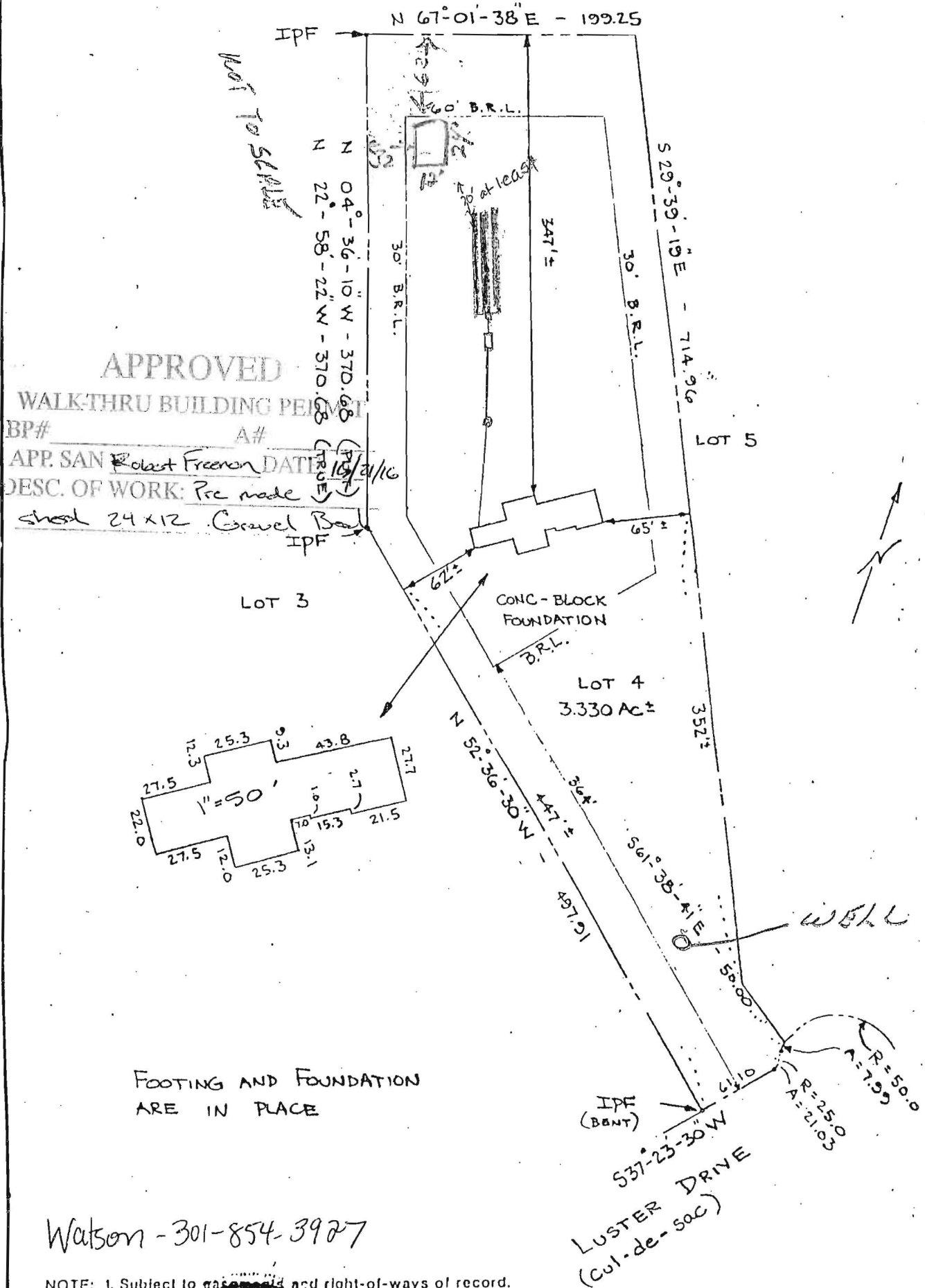
Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

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:

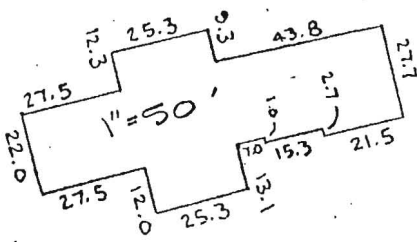
Filing Fee	\$
Permit Fee	\$ <u>55</u>
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	#

Wendy 301-590-1166 Fax

HOUSE LOCATION LOT 4
 JOCELYN ACRES
 SECTION TWO
 5TH ELECTION DISTRICT
 HOWARD CO. MD.



APPROVED
 WALK-THRU BUILDING PERMIT
 BP# _____ A# _____
 APP. SAN Robert Freeman DATE 16/2/16
 DESC. OF WORK: Pre made shed 24x12 Gravel Bed



Watson - 301-854-3927

- NOTE: 1. Subject to easements and right-of-ways of record.
 2. This is a preliminary plat and does not constitute a boundary survey.
 3. Not to be used for the location of fences.

SURVEYOR'S CERTIFICATE
 I hereby certify that I am a duly licensed and qualified surveyor and believe that the location of all existing improvements shown on this plat have been established by a field survey and that the same are correctly shown, there being no objections or attachments across lines of established boundaries and plats of record.

GREENHORNE & O'MARA, INC.
 ENGINEERS · ARCHITECTS · PLANNERS · SURVEYORS
 2566 RIVA ROAD · SUITE 107 · ANNAPOLIS, MD 21401

REFERENCE	Drawn by STC	Checked by
FILED 6-17-82	Date 4-21-88	Record No.
PLAT NO. 5211	Scale 1" = 100'	AH-1900

Louis Pence 4-21-88

Watson

