



Health

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: 6284 Linkyhorn Lane
 City: Clarksville State: MD Zip Code: 21029
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Antirena estates
 Section: _____ Area: _____ Lot: 5
 Tax Map: 34 Parcel: 247 Grid: 13
 Zoning: _____ Map Coordinates: _____ Lot Size: 2 AC

Property Owner's Name: Ed & Nancy Webb
 Address: 6284 Linkyhorn Lane
 City: Clarksville State: MD Zip Code: 21029
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Michelle Leacy
 Address: PO Box 310
 City: Perryman State: MD Zip Code: 21078
 Phone: _____ Fax: _____
 Email: _____

Existing Use: 550
 Proposed Use: 550 w/ Porch + deck
 Estimated Construction Cost: \$ 20,000
 Description of Work:
9'7" x 22' Screen porch + a
9'7" x 10' Open deck w/ steps
 Occupant/Tenant Name: Owner
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: Newharte Construction
 Contact Person: Ryan Newharter
 Address: 6051 Reabery Rd
 City: Clarksville State: MD Zip Code: 21029
 License No.: 911659
 Phone: 410 984 5813 Fax: _____
 Email: _____

Engineer/Architect Company: Contractor
 Responsible Design Prof.: _____
 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:	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
	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:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input 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	
Electric:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Gas:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Water Supply	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Sewage Disposal	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
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: [Signature] Print Name: Michelle Leacy
 Email Address: Michelle.Leacy@opatedandapproved.com Date: 3/30/17
 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>3/30/17</u>	<u>[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	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	#

30' DRAINAGE, UTILITY & BRIDAL PATH EASEMENT

GLARKSVILLE, MD 21024

LOT 5, SECTION 1
AINTREE ESTATES,
HOWARD COUNTY PLAT
BOOK 10, FOLIO 91, MAP
34, GRID B, PARCEL 24

ZONING: RR-DEO

30' BRL

440.00'

LOT 4

LOT 5

2.06 ACRES

LOT 6

EXISTING SEPTIC SYSTEM

APPROVED

WALK THRU BUILDING PERMIT

BP# A#

APP. SAN *John A. Wolf* DATE: 3-30-17

DESC. OF WORK: *proposed porch incl open deck as shown*

EXISTING 2 STORY
FRAME & BRICK S.F.D.
W/ 2 CAR GARAGE &
FULL BASEMENT

22'-0" PORCH DECK

16.5% 75' DR

16.5%

EXISTING WELL

PROPOSED BRICK FRONT PORCH WITH METAL ROOF

EXIST'G MACADAM DRIVE

MODIFY EXIST'G FRONT WALK TO SUIT NEW PORCH

N 0° 58' 39" E

140.72'

R=515.00'
L=1022.29'



LINKYTHORN LANE

S-1 SITE PLAN

1"=40'

