



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: 13885 Kennard Dr
City: Olney State: MD Zip Code: 21737
Suite/Apt. # _____ SDP/WP/BA #: _____
Census Tract: _____ Subdivision: Crystal Clear
Section: _____ Area: _____ Lot: 21
Tax Map: 22 Parcel: 533 Grid: 7
Zoning: _____ Map Coordinates: _____ Lot Size: 5,255(A)

Existing Use: SD
Proposed Use: SD w/ pool
Estimated Construction Cost: \$ 20,000
Description of Work:
Install 18x36 In-ground pool
Polymer 3'4" - 8'
Occupant/Tenant Name: _____
Was tenant space previously occupied? Yes No
Contact Name: _____
Address: Owner
City: _____ State: _____ Zip Code: _____
Phone: _____ Fax: _____
Email: _____

Property Owner's Name: Cheryl HATTON
Address: 13885 Kennard Dr
City: Olney State: MD Zip Code: 21737
Phone: 410-313-2455 Fax: _____
Email: _____

Applicant's Name & Mailing Address, (If other than stated herein)
Applicant's Name: Michelle Clancy
Address: PO Box 310
City: Olney, Md State: MD Zip Code: 21737
Phone: 410-610-7514 Fax: _____
Email: Michelle@AppliedAndApproved.com

Contractor Company: BKC Construction Co Inc
Contact Person: Barry Griffin
Address: 17408 Riv Drive Ct
City: Olney State: MD Zip Code: 20832
License No.: 13677
Phone: 301-570-8787 Fax: _____
Email: _____

Engineer/Architect Company: _____
Responsible Design Prof.: _____
Address: Contractor
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 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 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	
Electric:	<input checked="" type="checkbox"/> Yes <input 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 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.

Michelle Clancy
Applicant's Signature
Michelle@AppliedAndApproved.com
Email Address
Permit
Title/Company

Michelle Clancy
Print Name
5/3/17
Date

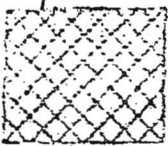
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
PLEASE WRITE NEATLY & LEGIBLY
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>5/5/17</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	#



This area designated as a private septic system of 10,000 square feet as required by the Maryland Department of Environment for individual sewage disposal improvements of any nature in this area is restricted to a septic system. This restriction shall be null and void upon connection to a public sewer.

APPROVED
HOWARD COUNTY HEALTH DEPT.

4.26.75
DATE

John R. Witmer
APPROVING AUTHORITY

LOT 26

LOT 27

S21°00'00"E
345.00

LOT 21
5.8577 acres

APPROVED
WALK-THRU BUILDING PERMIT

BP# _____ A# _____
APP. SAN. *J.R. Witmer* DATE: _____

DESC. OF WORK: 5/3/17
Proposed pool addition
as shown. no
setback issues w/
well location

18' x 36'
In-ground Pool
WELL LOCATION

House

Existing fence

REVISED SEPTIC AREA

100 YEAR FLOOD PLAIN ELEVATION
5647.37'N
72.03

LOT 19

145°40'04"E
583.76

N5°23'23"W
367.68

LOT 20

1" = 100'

N 02°00'00"E
50' R/W
KENNARD RD.

RWB



PLOT PLAN
REVISED SEPTIC AR
LOT 21