



# 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.: \_\_\_\_\_

Melissa Kitterberg

Building Address: 12815 Lime Kiln Rd  
City: Highland State: MD Zip Code: 20777  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/BA #: \_\_\_\_\_  
Census Tract: \_\_\_\_\_ Subdivision: \_\_\_\_\_  
Section: \_\_\_\_\_ Area: \_\_\_\_\_ Lot: 10  
Tax Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Grid: \_\_\_\_\_  
Zoning: \_\_\_\_\_ Map Coordinates: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Property Owner's Name: Melissa Kitterberg  
Address: 12815 Lime Kiln Rd  
City: Highland State: MD Zip Code: 20777  
Phone: 443-527-2500 Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Existing Use: Single Family Home  
Proposed Use: Emergency Swimming Pool, Pavilion, Bathroom  
Estimated Construction Cost: \$ 210,000  
Description of Work: Pool and foundation walls (see plans)  
Concrete POOL 700'Ø, 20x20' Pavilion

Applicant's Name & Mailing Address, (If other than stated herein)  
Applicant's Name: RAFFAELLO MANNARELLI  
Address: 9396 BALT. NAT. PIKE  
City: CULIOTT CITY State: MD Zip Code: 21042  
Phone: 443-463-4268 Fax: 410-750-2009  
Email: RMCBLANDSCAPES48@gmail.com

Occupant or Tenant: \_\_\_\_\_  
Was tenant space previously occupied?  Yes  No  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

Contractor Company: Conceptual Building and Landscaping  
Contact Person: RAFFAELLO MANNARELLI  
Address: 9396 BALT. NAT. PIKE  
City: CULIOTT CITY State: MD Zip Code: 21042  
License No.: 50635  
Phone: 443-463-4268 Fax: 410-750-2009  
Email: Same as Above

Engineer/Architect Company: FORBES DESIGN CENTER  
Responsible Design Prof.: Rick FORBES  
Address: 1940 Greenspring Drive, Suite D  
City: Timonium State: MD Zip Code: 21093  
Phone: 410-804-1042 Fax: 410-701-9061  
Email: rick@forbesdesigncenter.com

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	<b>Depth</b> <b>Width</b>	
Gross area, sq. ft./floor:	1 <sup>st</sup> floor:	
	2 <sup>nd</sup> floor:	
Area of construction (sq. ft.):	Basement:	
Use group:	<input checked="" type="checkbox"/> Finished Basement	
	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
	<input type="checkbox"/> Slab on Grade	
<b>Construction type:</b>	No. of Bedrooms:	
<input type="checkbox"/> Reinforced Concrete		
<input type="checkbox"/> Structural Steel	<b>Multi-family Dwelling</b>	
<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:	
<b>➤ Roadside Tree Project Permit</b>	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
<b>Roadside Tree Project Permit #</b>	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
<b>Water Supply</b>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<b>Sewage Disposal</b>	
<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 checked="" type="checkbox"/> No	
<b>Heating System</b>	
<input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<b>Sprinkler System:</b>	
<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.

Melissa Kitterberg  
Applicant's Signature  
RMCBLANDSCAPES48@gmail.com  
Email Address  
OWNER  
Title/Company

RAFFAELLO MANNARELLI  
Print Name  
7/21/2016  
Date

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

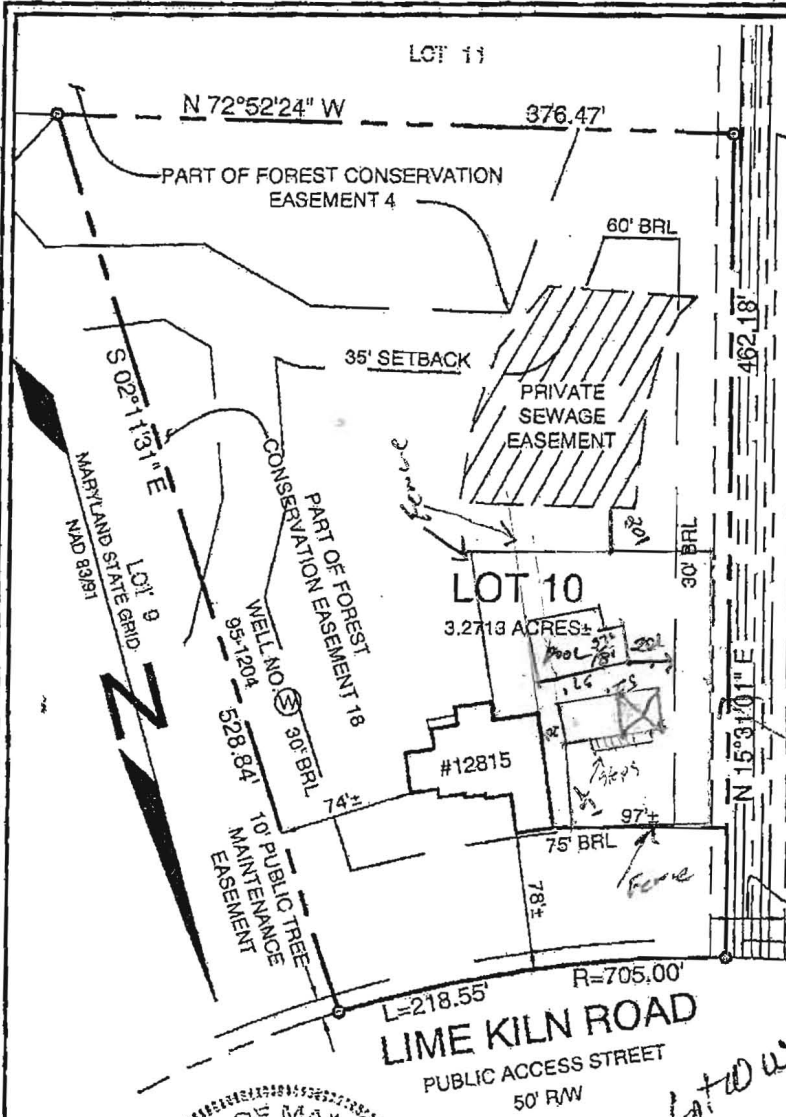
\*\*PLEASE WRITE NEATLY & LEGIBLY\*\*  
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA ( Zoning )		
PSZA ( Engineering )		
Health	<u>9-1-16</u>	<u>DBurnard</u>

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:	

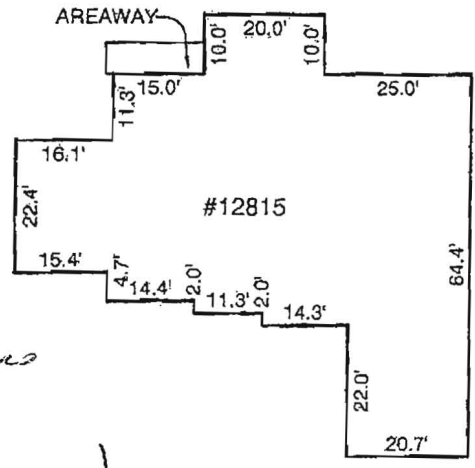
Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

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



- NOTES:
1. THIS PLAT IS A BENEFIT TO THE CONSUMER ONLY INsofar AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING PURPOSES. THIS PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE STRUCTURES. THIS PLAT DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR FOR SECURING FINANCING OR REFINANCING.
  2. THE +/- SETBACK ACCURACY IS 1 FOOT.
  3. THIS PLAN OR PLAT IS NOT INTENDED TO SHOW ALL MATTERS RELATED TO THE PROPERTY SHOWN HEREON.

WALL CHECK: 12-14-10  
TOP OF WALL ELEV. = 410.0'



DETAIL  
SCALE: 1"=30'

*lot 10 wall check OK  
see 1/2/11*



APPROVED  
WALK-THRU BUILDING PERMIT

LOCATION SURVEY  
12815 LIME KILN ROAD  
LOT 10

BP# \_\_\_\_\_ A# \_\_\_\_\_  
APP. SAN *D. Bernard* **LIME KILN VALLEY**  
DESC. OF WORK: *Inground Pool* PHASE I & II

THIS LOT DOES NOT APPEAR TO BE WITHIN THE 100 YEAR FLOOD PLAIN AS SHOWN ON THE F.E.M.A. FLOOD HAZARD MAP 240044-0037-B AS REVISED DECEMBER 4, 1986.

*Approved as Shown* ELECTION DISTRICT NO. 5  
HOWARD COUNTY, MARYLAND

CERTIFICATION

I HEREBY CERTIFY THAT I WAS IN RESPONSIBLE CHARGE OVER THE PREPARATION OF THIS LOCATION DRAWING AND THE SURVEY WORK REFLECTED IN IT, IS IN COMPLIANCE WITH REQUIREMENTS SET FORTH IN THE CODE OF MARYLAND TITLE 9, SUBTITLE 13, CHAPTER 06, REGULATION 12, AND THE POSITION OF EXISTING IMPROVEMENTS AS SHOWN HEREON, ARE CORRECT, TO THE BEST OF MY KNOWLEDGE AND BELIEF.

*Michael D. Adcock*  
MICHAEL D. ADCOCK  
PROFESSIONAL LAND SURVEYOR, NO. 21257

**Sill · Adcock & Associates · LLC**

Engineers · Surveyors · Planners  
3300 North Ridge Road, Suite 160  
Ellicott City, Maryland 21043  
Phone: 443.325.7682 Fax: 443.325.7685  
Email: mike@saaland.com

REFERENCE:	PLAT NO. 19735
DATE:	DECEMBER 20, 2010
SCALE:	1"=100'
FILE NO.:	10-041