

Baltimore County Department of Permits, Approvals and Inspections  
 Office of County Building Engineer  
 County Office Building, Room 105  
 111 W. Chesapeake Avenue  
 Towson, Maryland 21204

**NOTICE TO OWNERS OF MULTIFAMILY DWELLINGS IN BALTIMORE COUNTY  
 OF STATE REQUIRED INSPECTIONS OF BALCONY RAILINGS THAT WERE  
 PRIMARILY CONSTRUCTED OF WOOD ON OR BEFORE OCTOBER 1, 2005 AND  
 THE PROCESS BY WHICH BALTIMORE COUNTY SHALL ENSURE SUCH  
 INSPECTIONS ARE PROPERLY CONDUCTED**

Senate Bill 401, referred to as Jonathan’s Law and enacted by the State legislature in 2014, requires Baltimore County to conduct these inspections and authorizes the use of a third-party inspector. Senate Bill 401 can be found at the following website:

[http://mgaleg.maryland.gov/2014RS/Chapters\\_noln/CH\\_494\\_sb0401e.pdf](http://mgaleg.maryland.gov/2014RS/Chapters_noln/CH_494_sb0401e.pdf)

If you don’t have access to this website, please call the Office of the Building Engineer at 410-887-3353 and a copy will be mailed to you.

This document has two parts. Part I is a Certification Form which should be completed by each owner of an apartment house, boarding house, convent, dormitory, fraternity or sorority house, hotel or motel, monastery and a vacation time-share property where each dwelling unit does not have balcony railings primarily constructed of wood and returned to the Building Engineer at the address above.

Part II is a certification form which shall be completed by a qualified inspector employed by the owner for each apartment house, boarding house, convent, dormitory, fraternity or sorority house, hotel or motel, monastery and a vacation time-share property where a dwelling unit has one or more balcony railings primarily constructed of wood that is at least 10 years old and returned to the Building Engineer at the address above along with a check for \$100 for a Use Permit with a term of five (5) years, after which period the State requires a periodic re-inspection and re-certification.

**PART I CERTIFICATION WHERE THERE ARE NO UNITS WITHIN A  
 MULTIFAMILY DWELLING WITH WOOD RAILINGS**

I hereby certify under penalties of perjury and upon personal knowledge that the information entered below is true:

1. Address of multifamily dwelling: \_\_\_\_\_

2. Type of multifamily dwelling, circle the applicable type: apartment house, boarding house, convent, dormitory, fraternity or sorority house, hotel or motel, monastery or a vacation time-share property.

3. No dwelling unit(s) located at the address entered above has a balcony railing constructed primarily of wood.

\_\_\_\_\_  
Signature of owner

\_\_\_\_\_  
Printed name of owners

\_\_\_\_\_  
Address of owner line 1

\_\_\_\_\_  
Address of owner line 2

**PART II CERTIFICATION WHERE THERE ARE UNITS WITH WOOD RAILINGS AT LEAST 10 YEARS OLD WITHIN A MULTIFAMILY DWELLING**

The undersigned hereby certifies that he or she is (1) a licensed professional engineer in the State of Maryland with experience in the practice of structural engineering; (2) a licensed architect in the State of Maryland and knowledgeable in the design, construction and inspection of buildings; or (3) a person with at least 5 years of experience in multifamily dwelling operations, upkeep and maintenance. Enter which of the three requirements apply: \_\_\_\_\_

Provide the following information in the space provided:

1. Date of inspection: \_\_\_\_\_

2. Type of multifamily dwelling inspected, circle the applicable type: apartment house, boarding house, convent, dormitory, fraternity or sorority house, hotel or motel, monastery and a vacation time-share property.

3. Address of property inspected: \_\_\_\_\_

\_\_\_\_\_  
4. Name and address of property owner: \_\_\_\_\_

5. The number of dwelling units with balcony railings primarily constructed of wood: \_\_\_\_\_.

6. The identity of each dwelling unit with balcony railings primarily constructed of wood (list the number, letter or other reference indicator) and the date the balcony railing for that unit was installed : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Name, telephone number, e-mail address and business address of inspector: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Set forth below or by attachment for each unit, the results of the inspection, including an opinion on remaining useful life of the balcony railing if such useful life is 5 years or more and, if less, a description of the actions required to ensure its safe condition and function for at least the next 5 years (include additional sheets as needed):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Regarding each unit with a balcony railing deemed unsafe, describe the actions you would recommend to the owner to address the unsafe condition:

I hereby certify under penalties of perjury and upon personal knowledge that the information entered above and, if necessary, attached, is true.

\_\_\_\_\_  
Signature of railing inspector

Date: \_\_\_\_\_