

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER
 B07003523

Building Address 3241 DAWMARK DR
COLUMBIANA MD 21730

Suite/Apt. # _____ SDP/WP/Petition # _____

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot 17

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates 9E6 Lot size 5,000 sq ft

Property Owner's Name GREEN WANNORKE

Address 3241 DAWMARK DR

City COLUMBIANA State MD Zip Code 21730

Home Phone 410-266-7170 Work Phone 410-266-7170

Applicant's Name & Mailing Address (if other than stated hereon):
SAME AS OWNER

Phone _____ Fax _____

Existing Use Commercial

Proposed Use Commercial

Estimated Construction Cost \$ 25,000

Description of Work Build a 36' x 40' pole barn with 12' eave height and 12' x 12' metal roof and siding

Contractor Company National Farm

Contact Person Ken Byrnes

Address 516 Juniper Lane

City Hanover State PA Zip Code 17051

License No. _____

Phone 717-451-2935 Fax 717-633-1149

Occupant or Tenant Green Wannorke

Contact Name Gerald Wannorke

Address 3241 Dawmark Dr

City Columbianna State MD Zip Code 21730

Phone 410-266-7170 Fax 410-266-7170

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: <u>20'</u>	Water Supply: _____ Public _____ Private _____
No. of stories: <u>1</u>	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Construction type: Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
State Certified Modular _____	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private _____
1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: _____ Public _____ Private _____
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
No. of Bedrooms _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Height: _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> NFA #13D _____ NFA #13R _____ Other: _____
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
Other Structure: <u>Pole barn</u>	
Dimensions: <u>36' x 40'</u>	
Footings: _____	
Roof Height: <u>7.2'</u>	
State Certified Modular _____ Manufactured Home _____	

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.

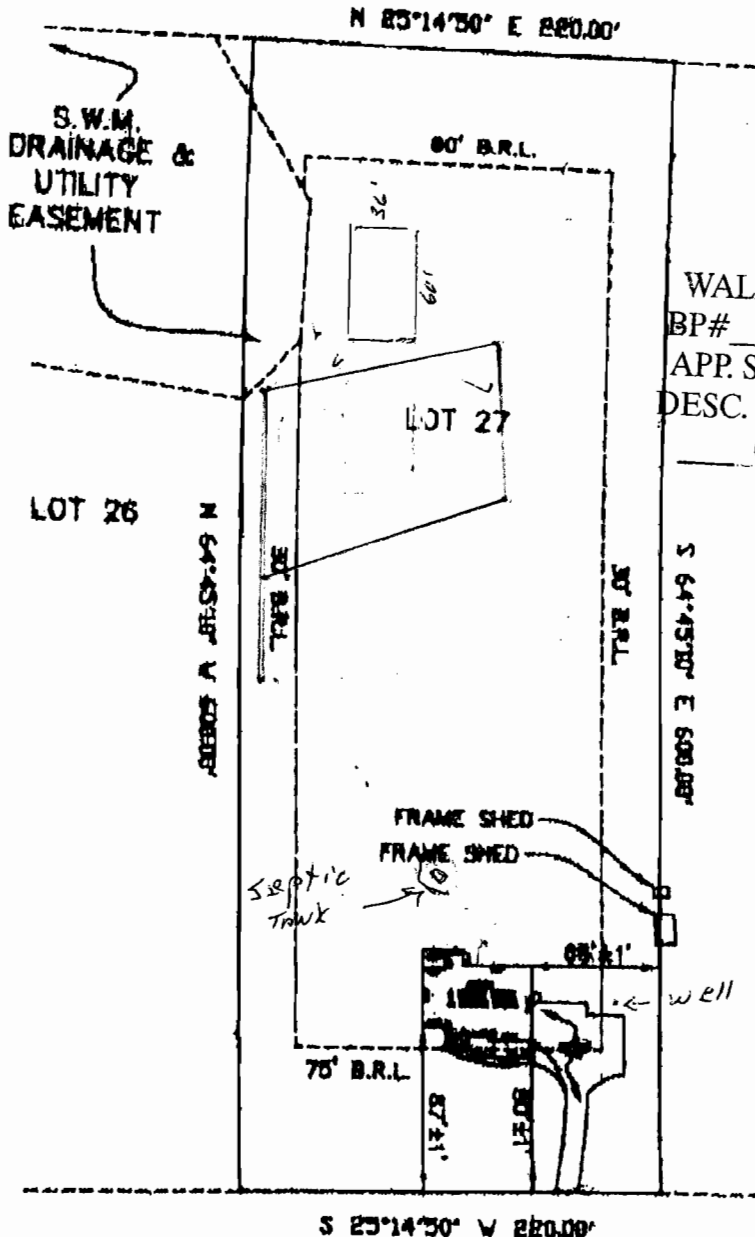
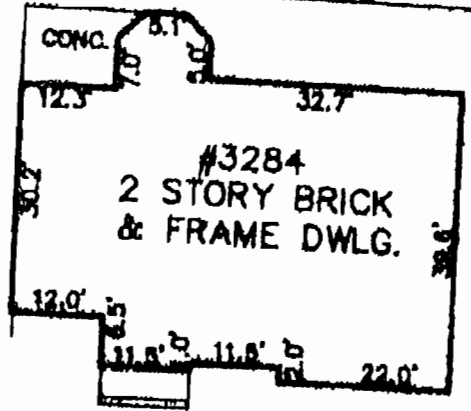
Applicant's Signature _____
 Title/Company _____

Print Name Green Wannorke
 Date Aug 07

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY **

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front _____	Filing fee \$ _____
State Notaries			Rear _____	Permit fee \$ _____
Building Official			Side _____	Excise tax \$ _____
Dev. Engineering DPZ			Side St _____	Add'l per. fee \$ _____
Health			All minimum setbacks met? _____	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required? _____	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>126</u>
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>			Historic District? _____	Validation # _____
ONE STOP SHOP <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA			Lot Coverage for New Town Zone _____	Accepted by <u>[Signature]</u>
T:Voice/PERMIT.FRM			SDP/Red-line approval date _____	

BOUNDARY PROPERTY IS SHOWN IN THIS C
 ON THE NATIONAL FLOOD INSURANCE PROGRAM
 FLOOD INSURANCE RATE MAP OF Howard
 COUNTY, MARYLAND, PANEL # 14 of 45
 COMMUNITY FLOOD # 240044 201405
 EFFECTIVE DATE Dec 4 1996



HOUSE ENLARGEMENT

APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# 41998

APP. SAN SP DATE: 8/23/07

DESC. OF WORK:
60 x 36' pop barn garage
 LOT 28



DANMARK DRIVE

NOTE: ALSO KNOWN AND DESIGNATED AS
 LOT 27 ON MAPS ON A PLAT ENTITLED
 "ONE PROPERTY" LOT 1-32 RECORDED
 AMONG THE LAND RECORDS OF HOWARD
 COUNTY, MD. ON PLAT NO. M.D.R. 10833

NOTE: FRAME SHEDS APPEAR TO ENCR OACH AS SHOWN
 AN ACCURATE BOUNDARY SURVEY WOULD BE REQUIRED
 TO DETERMINE THE EXACT AMOUNT OF ENCR OACHMENT
 IF ANY

- 1) The plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing.
- 2) The plat is not to relied on upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.
- 3) The 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 securing financing or re-financing.

CASE NO. 729460



LOCATION DRAWING
 #3284 DANMARK DRIVE HOWARD COUNTY, MARYLAND

JOHN C. BELLEAU, INC.

LAND SURVEYORS

SCALE:
 1"=100'
 DATE:
8-2-07
 JOB NO.
 07134

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER

B07001240

Building Address 3284 NW Danmark Dr.
Glenwood, MD 21738
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot 27
 Tax Map 14 Parcel 106 Grid 24
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Wannarka Gerald
 Address Pool Bonnie T/E
3284 Danmark Dr.
 City Glenwood State MD Zip Code 21738
 Home Phone 443-266-7170 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use SFD
 Proposed Use SFD w/ Deck
 Estimated Construction Cost \$ 47,964
 Description of Work
570 sq. ft. deck w/ steps

Contractor Company ProBuilt Construction, Inc
 Contact Person Edward Pacylowski
 Address 13453 Long Days Ct.
 City Highland State MD Zip Code 20777
 License No. 20247
 Phone 301-854-0821 Fax 301-854-9632

Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Engineer or Architect Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input checked="" type="checkbox"/> State Certified Modular	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ <input checked="" type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: _____ <input checked="" type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Height: _____	
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
Other Structure: <u>Deck</u> Dimensions: <u>40' x 12'</u> Footings: <u>posts + piers</u> Roof Height: _____	
_____ State Certified Modular _____ Manufactured Home	

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.

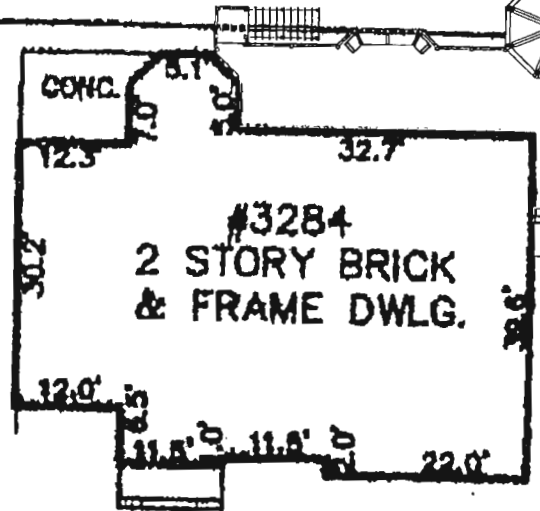
Edward Pacylowski
 Applicant's Signature
President
 Title/Company

Edward Pacylowski
 Print Name
4/12/07
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health	<u>4/12/07</u>	<u>Schiff A. G.</u>	All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies:			Lot Coverage for NewTown Zone _____	
White: Building Official			SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ			Yellow: DED, DPZ	Pink: Health
Gold: SHA				

PROPERTY IS SHOWN IN ZONE C
S.W.M. PLUMBING PERMIT
DATE OF PERMIT 11/20/07
PLUMB. MODEL # 14-07-45
PERM. # 240044, 201415
DATE 11-24-1986



#3284
2 STORY BRICK
& FRAME DWLG.

N 25°14'30" E 250.00'

HOUSE ENLARGEMENT

S.W.M.
DRAINAGE &
UTILITY
IMPROVEMENT

90' B.R.L.

LOT 27

LOT 28

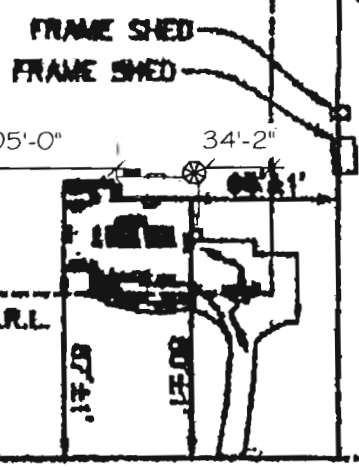
LOT 26

N 64°15'30" W 600.00'

90' B.R.L.

90' B.R.L.

S 64°15'30" E 600.00'



S 25°14'30" W 250.00'

DANMARK DRIVE

APPROVED

WALK-THRU BUILDING PERMIT

BP# 30700740 A# 41990

APP. SAN GAC DATE: 4/12/2007

DESC. OF WORK: Deck - 570 sq ft

w/5 steps as shown

THIS WAS DESIGNATED AS
ON A PLAT ENTITLED
LOT 1-28 RECORDED
IN RECORDS OF HOWARD
PLAT NO. M.D.R. 10033

NOTE: FRAME SHEDS APPEAR TO ENCROACH AS SHOWN
AN ACCURATE BOUNDARY SURVEY WOULD BE REQUIRED
TO DETERMINE THE EXACT AMOUNT OF ENCROACHMENT
IF ANY

- 1) The plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing.
- 2) The plat is not to be relied on upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.
- 3) The 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 securing financing or re-financing.

