

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B08 0000 59

Building Address 3364 Danmark Dr
Glenwood, MD 21794
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision _____
Section _____ Area _____ Lot _____
Tax Map _____ Parcel _____ Grid _____
Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Bob Schutz
Address 3364 Danmark Dr
City Glenwood State MD Zip Code 21794
Home Phone (301) 526-1623 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone _____ Fax _____

Existing Use SFD
Proposed Use Same with prop. tank
Estimated Construction Cost \$ 200
Description of Work Install 1-1000g. water
ground propane tank

Contractor Company Americas
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
License No. _____
Phone _____ Fax _____

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: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
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: _____ Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular <input type="checkbox"/>	Sprinkler system: N/A <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: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ Height: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Multi-family dwellings: _____ No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: N/A <input type="checkbox"/> NFA #13D <input type="checkbox"/> NFA #13R <input type="checkbox"/> Other: _____
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ State Certified Modular <input type="checkbox"/> Manufactured Home <input type="checkbox"/>	

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.

[Signature]
Applicant's Signature
Title/Company _____

[Print Name]
Print Name
01-07-08
Date

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

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE	APPROVAL
Land Development, DPZ			
State Highways			
✓ Building Official			
✓ Dev. Engineering, DPZ			
✓ Health	<u>1-15-08</u>	<u>[Signature]</u>	
Fire Protection			

Is Sediment Control approval required prior to issuance?
YES NO

CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:

Distribution of Copies - White: Building Official Green: LDD, DPZ

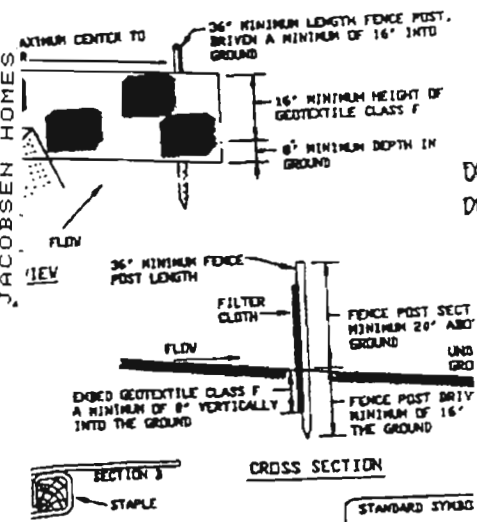
DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ <u>100.00</u>
Side: _____	Excise tax \$ <u>10.00</u>
Side St: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>110.00</u>
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for New Town Zone _____	Check # <u>650170925</u>
SDP/Red-line approval date _____	Validation # _____

Accepted by [Signature]

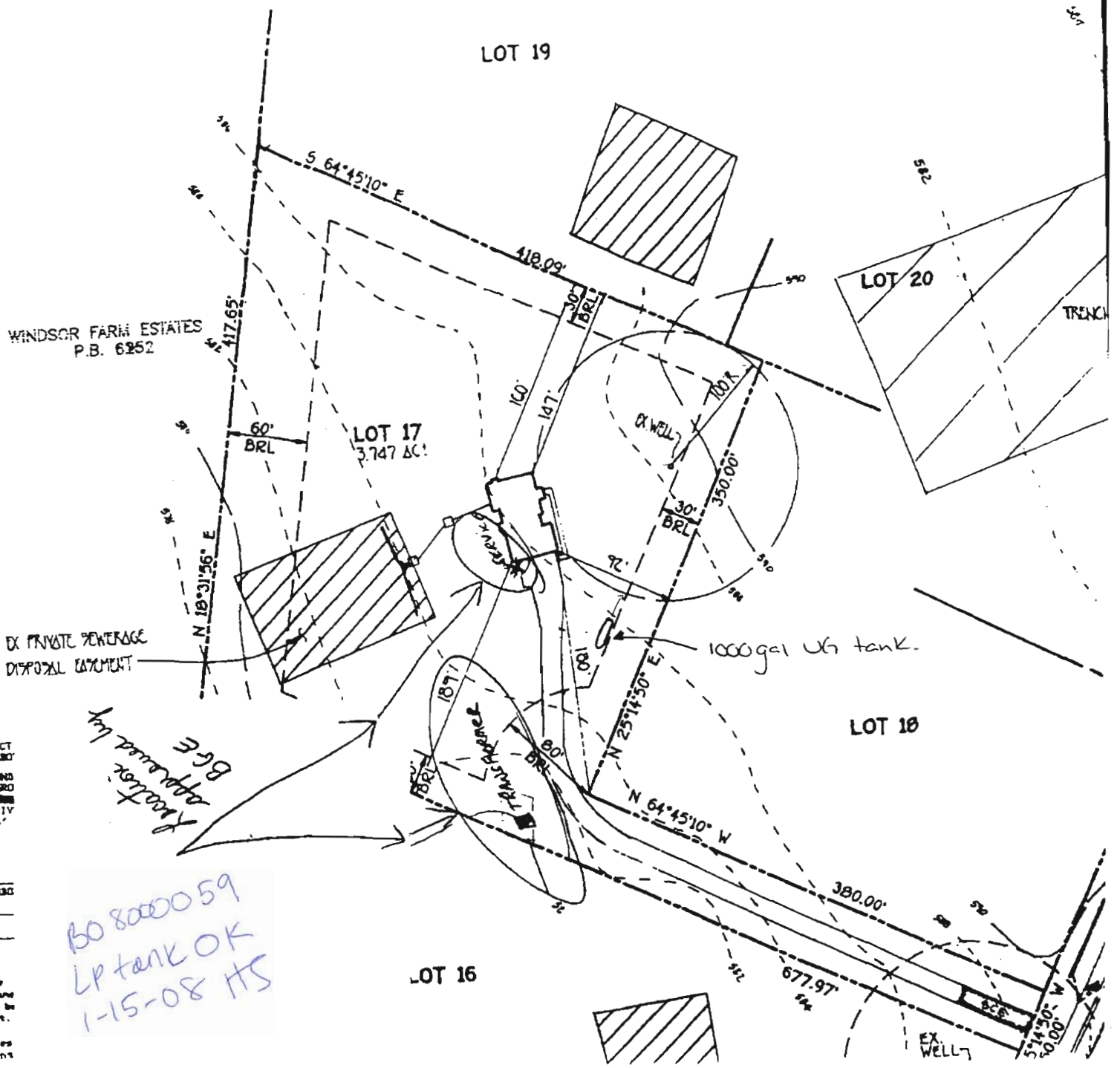
Yellow: DED, DPZ Pink: Health Gold: SHA

04 MARCH 1 THROUGH APRIL 30, AND AUGUST
 02 R 15, SEED WITH 100 LBS. PER ACRE (2.3
 03 OF KENTUCKY 31 TALL FESCUE. FOR THE
 04 OUGH JULY 31, SEED WITH 60 LBS./ACRE
 05 T) KENTUCKY 31 TALL FESCUE AND
 06 10.05 LBS./1,000 SQ.FT.) OF WEEPING
 07 NG THE PERIOD OF OCTOBER 16 THROUGH
 08 OJECT SITE BY: OPTION (1) - TWO TONS PER
 09 RCHORED STRAW MULCH AND SEED AS SOON AS
 10 SPRING; OPTION (2) - USE 500; OPTION (3) -
 11 15./ACRE KENTUCKY 31 TALL FESCUE AND MULCH
 12 ACRE WELL ANCHORED STRAW. ALL SLOPES SHOULD

19 2 TONS PER ACRE (60 TO 90 LBS./1,000 SQ.FT.)
 20 ALL GRAIN STRAW IMMEDIATELY AFTER SEEDING.
 21 IMMEDIATELY AFTER APPLICATION USING 200
 22 GALS. (5 GAL./1,000 SQ.FT.) OF EMULSIFIED
 23 AT ACRES. ON SLOPES 8 FEET OR HIGHER USE
 24 ER ACRE (60 GAL./1,000 SQ.FT.) FOR ANCHORING.
 25
 26 EED AREAS AND MAKE NEEDED REPAIRS,
 27 AND RESEEDINGS.
 28
 29 PONS SUBSTITUTE CHEMUNG CROWNVECH AT 15
 30 ND KENTUCKY 31 TALL FESCUE AT 40 LBS./ACRE AS
 31 REQUIREMENT. OPTIMUM SEEDING DATE FOR THIS
 32 MARCH 1 TO APRIL 30.



ADJACENT SILT SECTION
 Construction Specifications
 be a minimum of 36" long driven 16" minimum into the
 shall be 1 1/2" x 1 1/2" square (minimum) cut, or 1 3/4" diam
 shall be of sound quality hardwood. Steel parts shall be
 shall weighting not less than 1.00 pound per linear foot.
 be fastened securely to each fence post with wire ties
 of mid-section and shall meet the following requirements



BO 8000059
 LP tank OK
 1-15-08 HS

JACOBSEN HOMES

564

LOT 19

LOT 20

LOT 17
3.747 AC

LOT 18

LOT 16

WINDSOR FARM ESTATES
P.B. 6252

EX PRIVATE SEWERAGE
DISPOSAL EQUIPMENT

1000 gal UG tank

Approximate by
B.G.E.

EX WELL

TRENCH