

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER

307001195

Building Address 13110 DEANMAR DR.  
HIGHLAND MD 20777

Suite/Apt. #: \_\_\_\_\_ SDP/WPI/Petition #: \_\_\_\_\_

Census Tract \_\_\_\_\_ Subdivision WHITE OAK ESTATES

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 6

Tax Map 34 Parcel 355 Grid 21

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size 42,775 4

Property Owner's Name WILLIAMS, JULIAN & DORIS

Address 13110 DEANMAR DR.

City HIGHLAND MD State MD Zip Code 20777

Home Phone 301854-2521 Work Phone \_\_\_\_\_

Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use SFD

Proposed Use SFD & UN-HEATED ENCLOSED PORCH

Estimated Construction Cost \$ 44,036

Description of Work CONSTRUCT A NEW WOOD FOUND...  
FOR A 18'x10' UN-HEATED ENCLOSED  
PORCH & A 10'x14' DECK & 18'x4' DEK.  
WITH STEPS TO GRADE

Contractor Company PATIO ENCLOSURES, INC.

Contact Person 224 8th AVENUE, N.W.  
GLEN BURNIE, MD 21061

Address 443-797-0351  
MHI # 12744

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

License No. \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Occupant or Tenant OWNER

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 _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input 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: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

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

Gregory A. Fater (agent)  
Applicant's Signature

GREGORY A. FATER  
Print Name

Title/Company

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>4/11/2007</u>	<u>Julian A. J.</u>
Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

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

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

Yellow: DES, DPZ Pink: Health Gold: S&A

APPROVED  
 WALK-THRU BUILDING PERMIT  
 AP# B 0700115  
 APP# SAN GAK  
 WALK-THRU DECK & 18x4 Deck w/Steps  
 DESC. OF WORK: 18x10 enclosed porch  
 DATE: 4/10/07  
 A# P31052  
 CS Shuman

# 37016  
 # 37017  
 Williams  
 4-10-2007  
 1" = 30'

