

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

B07000917

Building Address 2045 Duvall Rd.
Woodbine, MD 21797-8119

Property Owner's Name _____
 Address _____

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

City _____ State _____ Zip Code _____

Census Tract _____ Subdivision _____

Home Phone _____ Work Phone _____

Section _____ Area _____ Lot _____

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

Tax Map _____ Parcel _____ Grid _____

Phone 410-489-5555 Fax _____

Zoning _____ Map Coordinates 3012 Lot size 3.27 Ac.

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ _____
 Description of Work Install (1) 500 gal.
PROPANE Tank as per NFPA 58

Contractor Company _____
 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 _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ 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: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ 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 <input checked="" type="checkbox"/> Private _____
1st floor: _____	Sewage Disposal: _____ Public _____ 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: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ 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: _____	
Dimensions: _____	
Footings: _____	
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.

Applicant's Signature _____

Print Name _____

Title/Company _____

Date _____

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

**** PLEASE WRITE NEATLY AND LEGIBLY. ****

FOR OFFICE USE ONLY

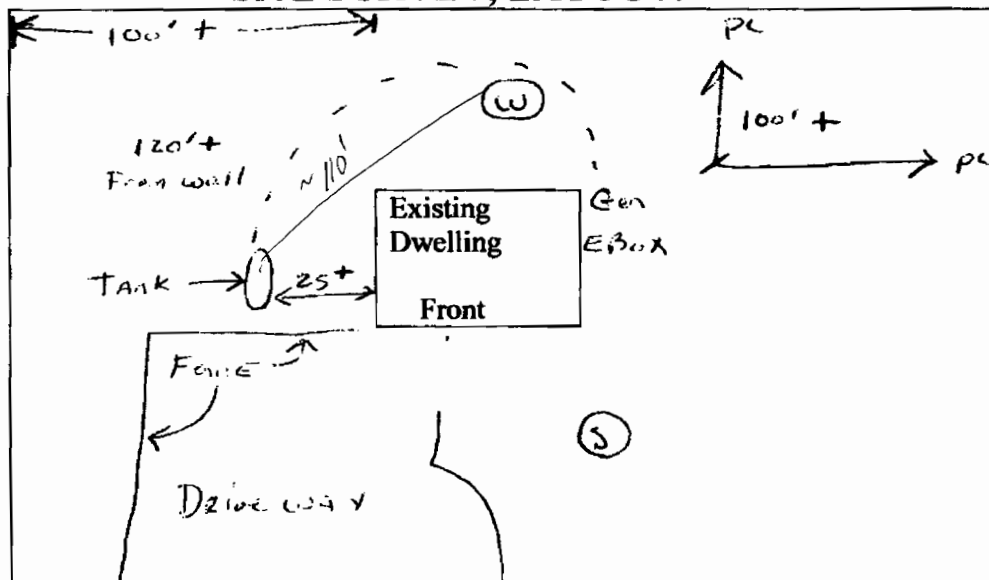
AGENCY	DATE	SIGNATURE APPROVAL	DEPT. SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front _____	Filing fee \$ <u>110</u>
State Highway			Rear _____	Permit fee \$ _____
Building Official			Side _____	Excise tax \$ _____
Dev. Engineering, DPZ	<u>4/3/07</u>	<u>[Signature]</u>	Side St. _____	Add'l per. fee \$ _____
Health			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Fire Protection			is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Submittal paid \$ _____
is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	Check <u>10/13/07</u>
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation \$ _____
Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA			Accepted by <u>[Signature]</u>	

M.W. Propane TANK INFO NEEDED
 (PLEASE FORWARD THIS INFO TO BETTER HELP US OUT)
 FAX # 443 - 927 - 9357

IS TANK DELIVERED yes no
 Delivery Date? _____
 IS JOB SITE READY yes no
 # 1 TANKS 500 UG. PERMIT # _____

NAME: REUSS, MAX L JR
 ADDRESS: 2045 Duvall Rd
 CITY/STATE: Woodbine MD 21797
 MAP LOCATION: HC-3-C-13
 CONTACT PERSON: Dorothy Reuss
 PHONE # 410 489 5559
 CELL# _____

SITE SURVEY, LAYOUT:



Septic, well, transformer, E-Box, Telephone, cable, Lights, dog fence.
 'CC, 1/2 nuts, 1/2 plug, 3/4 x 1/2 adapter, Gauge
 'IPS line, Riser, Cuppler, 1/2 fl x 1/2 lps. 3/4 caps, lps. T,
 'K copper, POL x 1/2, POL T Block, SAND.
 Tank Ser # _____ Year _____

~~400976~~

SITE INSPECTION SHEET

OWNER: _____ PHONE #: _____

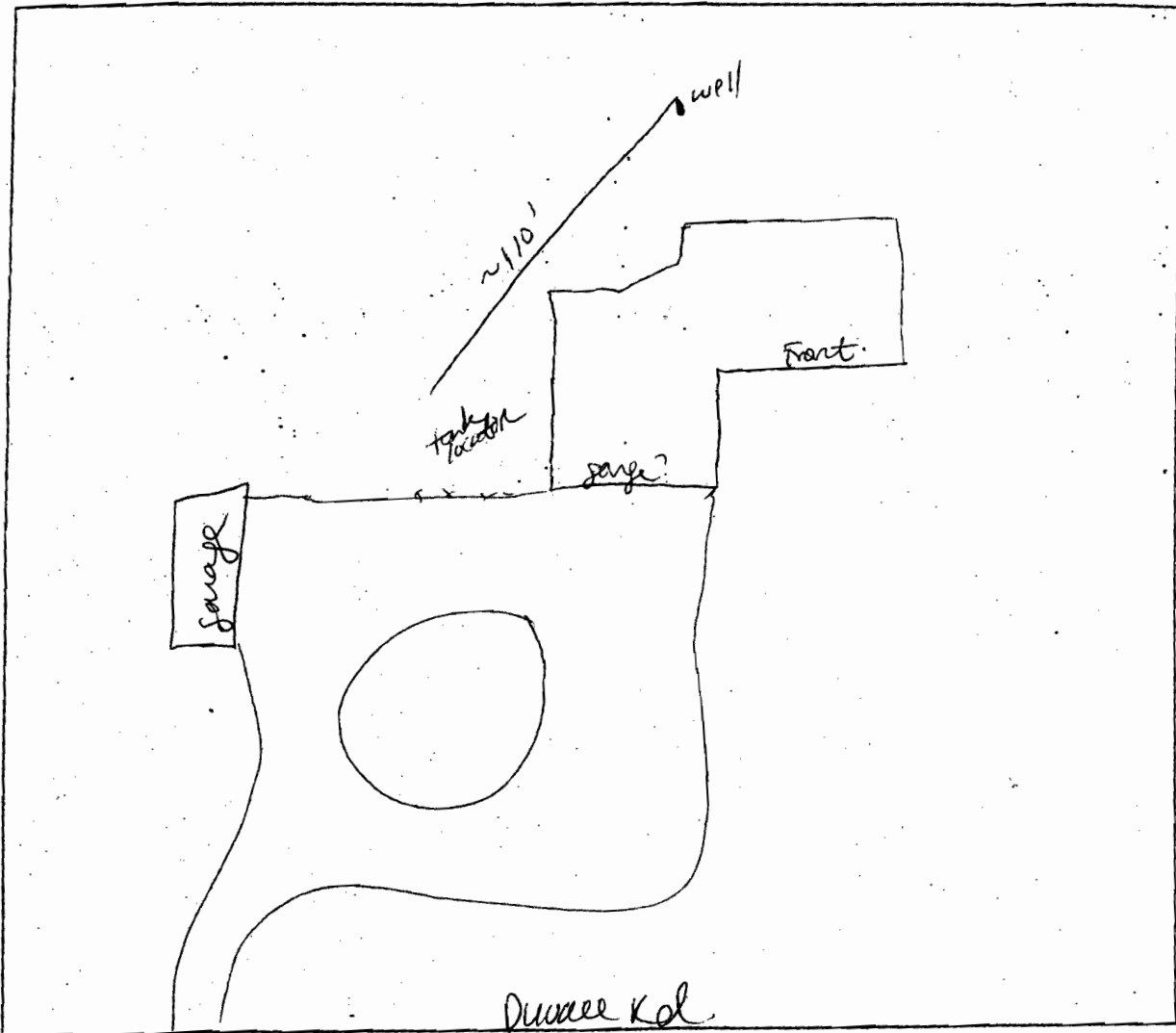
ADDRESS: 2045 Duwall Rd. CONTRACTOR: _____

_____ WELL TAG #: _____

SUBDIVISION: _____ LOT: _____ COUNTY #: _____

PROPOSAL: Verify well location to proposed LP tank

LOCATION DIAGRAM



COMMENTS: ~~the~~ proposed propane tank location okay.
Found to be outside 100' well radius

4/3/02 SF