

DEPT. OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		HOWARD COUNTY PERMIT APPLICATION	<u>308000127</u> PERMIT NUMBER
Building Address <u>1730 Florence Rd</u> <u>Mount Airy, MD 21771</u>		Property Owner's Name <u>Gerald Baker</u> Address <u>1730 Florence Rd</u> City <u>MT Airy</u> State <u>MD</u> Zip Code <u>21771</u> Phone <u>301-829-2403</u> Phone _____ Applicant's Name & Mailing Address, (if other than stated herein): <u>TALON CONSTRUCTION</u> <u>302 E. 4TH ST.</u> <u>FREDERICK, MD 21701</u> Phone <u>301-620-8604</u> Fax <u>301-620-8612</u>	
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision _____ Section _____ Area _____ Lot <u>4</u> Tax Map <u>6</u> Parcel <u>151</u> Grid <u>24</u> Zoning _____ Map Coordinates _____ Lot Size _____		Contractor Company <u>TALON CONSTRUCTION</u> Contact Person <u>BUS DeJulius</u> Address <u>302 E. 4TH ST</u> City <u>FREDERICK</u> State <u>MD</u> Zip Code <u>21701</u> License No. <u>49783</u> Phone _____ Fax _____ <u>301-620-8604</u> <u>301-620-8612</u>	
Existing Use <u>RESIDENTIAL</u> Proposed Use <u>RESIDENTIAL</u> Estimated Construction Cost \$ <u>35,000.-</u>		Description of Work <u>ADD COVERED PORCH</u> <u>2 FRONT OF HOUSE</u> <u>18 X 12 = 216 S.F.</u>	
Occupant or Tenant <u>Gerald Baker</u> Contact Name <u>Gerald Baker</u> Address <u>1730 Florence Rd</u> City <u>MT Airy</u> State <u>MD</u> Zip Code <u>21771</u> Phone <u>301-829-2403</u> Fax _____		Engineer or Architect Company _____ Contact Person _____ Address <u>N/A</u> City _____ State _____ Zip Code _____ Phone _____ Fax _____	

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Utilities Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> 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 SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 st floor: _____ 2 nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ 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: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Utilities Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____

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
President, Talon Constr.
 Title/Company

Robert DeJulius
 Print Name
1-10-08
 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 \$ <u>25</u>
State Highways				Rear: _____	Permit fee \$ _____
Building Officials				Side: _____	Excise tax \$ _____
Dev. Engineering DPZ				Side St: _____	Add'l per fee \$ _____
Health	<u>2/11/08</u>	<u>[Signature]</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?				YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
				Historic District?	Check # _____
				YES <input type="checkbox"/> NO <input type="checkbox"/>	Validation # _____
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>				Lot Coverage for New Town Zone _____	
ONE STOP SHOP: <input type="checkbox"/>				SDP/Red-line approval date _____	Accepted by _____

Distribution of Copies - White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA
 T: forms/buildingpermitapplication REV 10/28/04

Health Department

N 21°47'38" E
118.7'

N 02°00'22" W 355.28'

60' B.R.L.

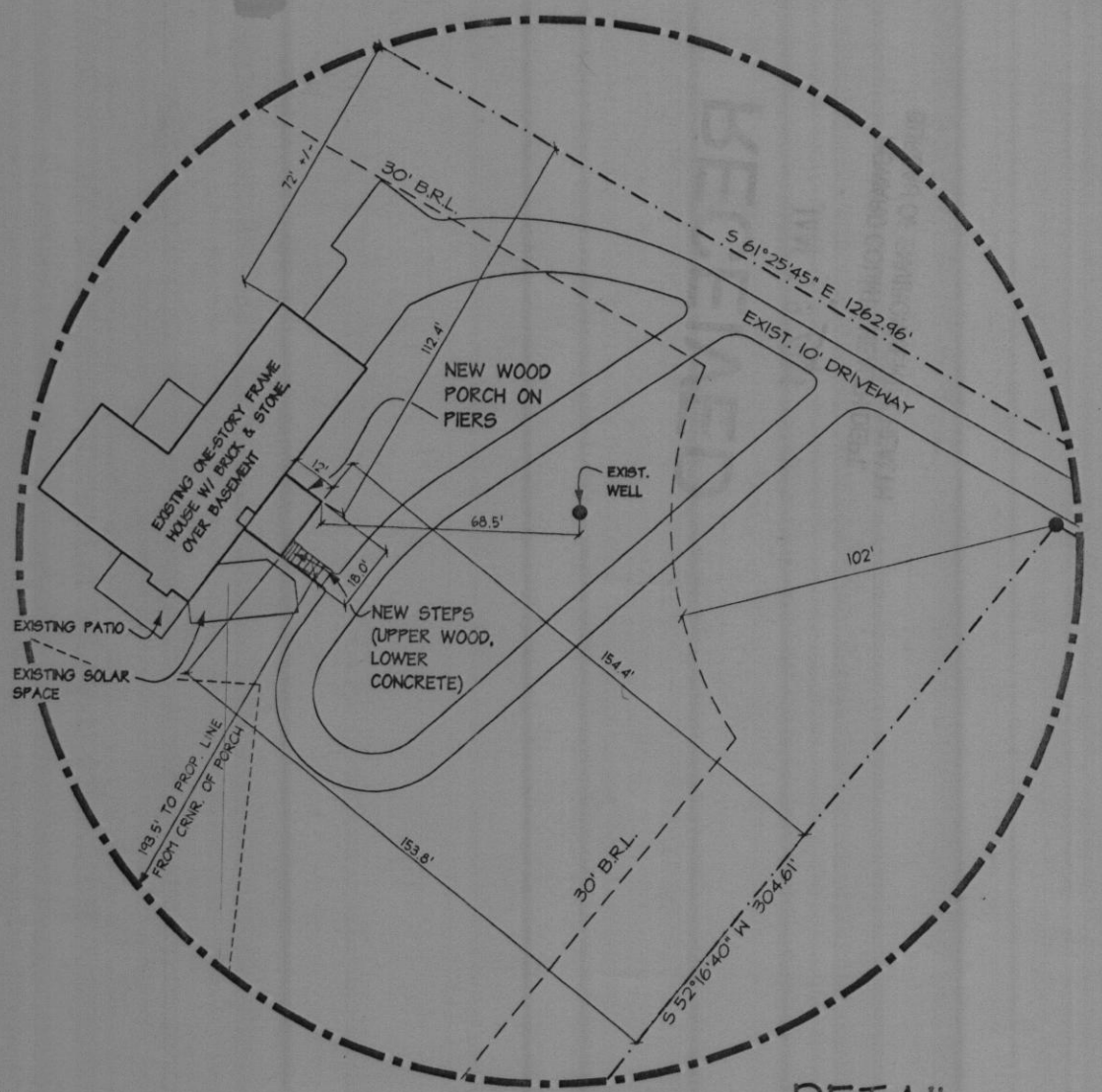
Approximate SDA
See approved
perc cert

Lot #4
4.97 ac. +/-

EXIST. SEPTIC TANK
EXIST. DRY WELL

EXIST. SEPTIC FIELD

SEE DETAIL



DETAIL
1" = 50'-0"



Septic field shown is not accurate, tank and drywell are accurately shown.

#1730 FLORENCE RD., LIBER 3399 FOLIO 296
ELECTION DISTRICT #4
HOWARD COUNTY, MD.

for BO8000127 for covered porch addition ok plan for front porch
2/11/08 88 HOUSE LOCATION PLAN

1" = 100'-0"

NOTE: DRAWING IS BASED ON PERCOLATION TEST PLAN BY VANMAR ASSOCIATES, INC. DATED 10/14/02

FLORENCE ROAD

S 16°20'38" W
20.46'

Fine Line Home Design LLC
2 Public Sq., Suite #205 Hagerstown, MD 21740
phone: 301.416.8499
fax: 301.733.8050
www.finehome.com
(Formerly DBA Precision Drafting Services)

TALON CONSTRUCTION
302 E. 4th St. Frederick MD 21701
301-620-8604
www.talon-construction.com



Proposed covered porch addition to:
THE BAKER RESIDENCE
1730 FLORENCE RD., MT. AIRY, MD. 21771
HOWARD COUNTY, MD.

FILE: Bake6sit.dwg
DRAWN BY: tim
DATE: 12-3-07
REV: 1-4-08