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| DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS HOWARD COUNTY HOUSE DRIVE 1111 SCOTT CITY RD 21085 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800 | HOWARD COUNTY PERMIT APPLICATION | PERMIT NUMBER B07001306 |
| Building Address <u>12828 Forest View Ct</u> <u>Sykesville 21784</u> Suite/Apt. #: _____ SDPMP/Petition #: _____ Census Tract _____ Subdivision <u>Amberwoods Sec</u> Section _____ Area _____ Lot <u>16</u> Tax Map <u>9</u> Parcel <u>333</u> Grid <u>10</u> Zoning _____ Map Coordinates <u>5A-9</u> Lot size _____ | Property Owner's Name <u>Dana Hess + Nancy Myers</u> Address <u>12828 Forest View Ct</u> City <u>Sykesville</u> State <u>MD</u> Zip Code <u>21784</u> Home Phone <u>410-489-5086</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____ | |
| Existing Use <u>SPD</u> Proposed Use <u>SPD + Pool</u> Estimated Construction Cost \$ <u>25,000</u> Description of Work <u>Inground concrete pool 25' x 46' in rear yard w/ 48' high fence to code</u> | Contractor Company <u>Maryland Pools</u> Contact Person <u>JoAnn Latham</u> Address <u>9515 Benwig LA</u> City <u>Columbia</u> State _____ Zip Code <u>21046</u> License No. <u>6694</u> Phone <u>410-995-6600</u> 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 - <u>COMMERCIAL</u> | | BUILDING DESCRIPTION - <u>RESIDENTIAL</u> | |
|---|---|---|--|
| 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: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <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 _____ 1st floor: _____ 2nd floor: <u>3'-8"</u> Basement: _____ <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawlspace <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____ 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: _____ <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: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <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.

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| Applicant's Signature <u>J. Latham</u> Title/Company <u>agut</u> | Print Name <u>J. Latham</u> Date <u>4-18-07</u> |
|---|--|

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

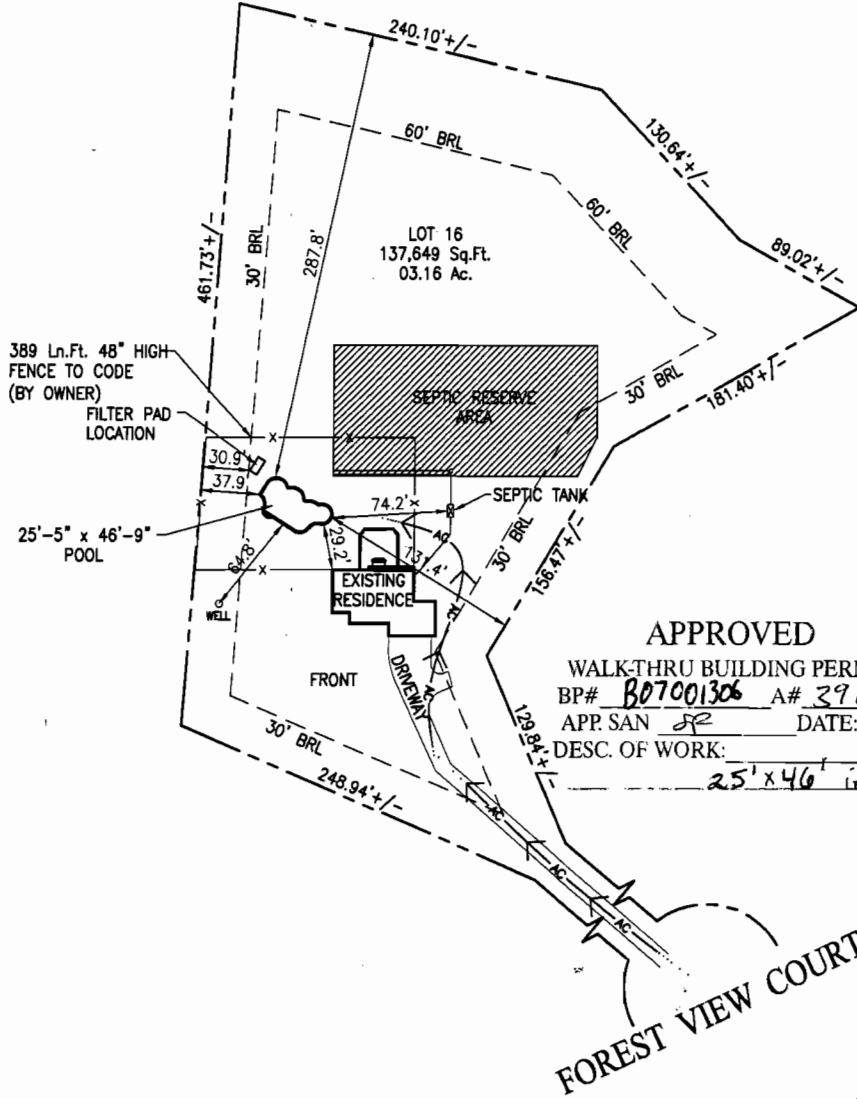
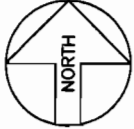
FOR OFFICE USE ONLY -

| AGENCY | DATE | SIGNATURE | APPROVAL | DPZ SETBACK INFORMATION | PROPERTY IDE |
|--|----------------|--------------------|----------|--|--------------------------|
| Land Development, DPZ | | | | Front: _____ | Filing fee \$ _____ |
| State Highways | | | | Rear: _____ | Permit fee \$ _____ |
| Building Official | | | | Side: _____ | Excise tax \$ _____ |
| Dev. Engineering, DEPZ | | | | Side St: _____ | Advt'l per. fee \$ _____ |
| Health | <u>4/17/07</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? | | | | 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? | Valuation # _____ |
| 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 _____ |
| | | | | SOP/Red-line approval date _____ | |

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SETBACKS:
 REAR PL. 10'
 SIDE PL. 30'
 HOUSE 0'
 SEPTIC 20'
 WELL 10'

PRIVATE WELL
& SEPTIC



SITE PLAN

1"=80'
 LOT 16

AMBERWOODS SEC 1
 TAX ACCOUNT # 314863
 MAP 9, GRID 10, PARCEL 339
 ELECTION DISTRICT NO. 3
 HOARD COUNTY, MARYLAND

APPROVED

WALK-THRU BUILDING PERMIT
 BP# B07001306 A# 39049
 APP. SAN SP DATE: 4/12/07
 DESC. OF WORK: 25' x 46' improved pool

PERMIT NUMBERS
 POOL:
 ELECT:
 OTHER:

PERMIT SET
 DATE: 04-18-07

Maryland POOLS Inc.

9515 GERWIG LANE SUITE 121 COLUMBIA, MD 21046
 11166 MAIN STREET SUITE 402 FAIRFAX, VA 22030
 410-995-6600 703-359-7191
 800-252-SWIM
 WWW.MARYLANDPOOLS.COM

EQUIPMENT LIST

DIRT/GRADING: STACK DIRT BEHIND FILTER LOCATION
 SPA: NONE
 RAISED BEAM: NONE
 TILE: SURF 240
 COPING: PA FULL RANGE FLAGSTONE-CUT
 PLASTER: WHITE MARBELITE
 FILTER SYS: C&C 420 SF CART. W/2 HP PUMP
 CLEANING SYS: PCC 2000
 TREATMENT SYS: MINERAL SPRINGS
 CONTROL SYS: NONE
 HEATER: AC 125 HEAT PUMP
 LIGHTS: (2) SAM WATTS: 300 VOLTS: 120
 LOVESEAT: (1) @ 6'6" (OUTSIDE)
 AQUA BENCH: NONE
 RAIL GOODS: NONE
 DECKING: NONE
 FENCE: BY OWNER
 POOL COVER: NONE TYPE: N/A
 CHEMICALS: \$50 CHEMICAL ALLOWANCE
 OTHER ITEMS: EQUIPOTENTIAL BONDING GRID, PLAY/LOUNGE AREA @ STEP ENTRY, COZY COVE W/ 24" OCTAGON TABLE & 16" BENCH
 WATERFALL PREP INCLUDES BOOSTER PUMP, PLUMBING, VALVE, EXTRA STEEL & EXTRA GUNITE
 ELECTRIC: 300 FT.

POOL DATA

SIZE/SHAPE: 25'-5" x 46'-9" - CUSTOM
 POOL AREA: 850 SPA: OTHER: 12
 TOTAL AREA: 862
 PERIMETER: 128 SPA:
 GALLONAGE: 25,860 DEPTH: 3'-0" TO 5'

DIRECTIONS TO SITE

DIRECTIONS:
 TAKE I-29 W/ COLUMBIA PIKE TOWARD BALTIMORE. I-70 W
 VIA EXIT 238 TOWARD FREDERICK. MERGE ONTO MD-32 N WA
 EXIT 80 TOWARD SKESVILLE. LEFT ONTO AMBERWOODS WAY,
 LEFT ONTO FORESTVIEW CT.

| | |
|-------|---|
| MAP # | 5 |
| GRID | |
| A-9 | |

Dana Hess & Nancy Myers
 12828 Forest View Court
 Sykesville, Maryland 21784
 Howard County

HOME PHONE: 410-489-5086
 CELL PHONE 1:
 CELL PHONE 2:
 OFFICE PHONE:

| | | | |
|-----------|-------------------|-----------|-------------|
| LOT: | SUBDIVISION NAME: | DISTRICT: | PIN # |
| 16 | AMBERWOODS | 3 | 314863 |
| SITE PLAN | | | SHEET #: |
| | | | 1 |
| SCALE: | BY: | DATE: | JOB NUMBER: |
| 1" = 80' | DB | 4/10/07 | DT07-9191 |

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER
 B07001830

Building Address 12828 Forest View Court
Sykesville MD 21784
 Suite/Apt. #: _____ SDP/MWP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot _____
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Dana Hess Nancy Mas
 Address 12828 Forest View Ct
 City Sykesville State MD Zip Code 21784
 Home Phone 410-489-5086 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon): _____
 Phone _____ Fax _____

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ _____
 Description of Work concrete walkway to
basement 5'x14'

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 Joey Dustin
 Address _____
 City _____ State _____ Zip Code _____
 Phone 301 346 9300 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics
 Height: _____
 No. of stories: _____
 Gross area, sq. ft. per floor: _____
 Use group: _____
 Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities
 Water Supply:
 Public
 Private
 Sewage Disposal:
 Public
 Private
 Electric Yes No
 Gas Yes No
 Heating System:
 Electric Oil
 Natural Gas
 Propane Gas
 Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads

Building Characteristics
 SF Dwelling SF Townhouse
 Depth _____ Width _____
 1st floor: _____
 2nd floor: _____
 Basement:
 Finished Basement Unfinished Basement
 Craw space Slab on Grade
 No. of Bedrooms: _____
 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

Utilities
 Water Supply:
 Public
 Private
 Sewage Disposal:
 Public
 Private
 Electric Yes No
 Gas Yes No
 Heating System:
 Electric Oil
 Natural Gas
 Propane Gas
 Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 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

 Title/Company

Joey Dustin
 Print Name
5/14/07
 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 Department | | | Rear: _____ | Permit fee \$ _____ |
| Building Official | | | Side: _____ | Excise fee \$ _____ |
| Dep. Enforcement DPZ | | | Side St: _____ | Add'l per fee \$ _____ |
| Health | <u>5/10/07</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 approved 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 # _____ |
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| Y:\Home\PERMIT.FRM | | | SDP/Rad-line approval date _____ | Accepted by _____ |

