

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER
 B07001727

Building Address 12200 BENSON BRANCH RD.
ELICOTT CITY, MD. 21032

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

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

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

Phone _____ Fax _____

Existing Use _____

Proposed Use _____

Estimated Construction Cost \$ 50,000.00

Description of Work REMOVE EXISTING SUNROOM
Replace w/ 7'4" x 22' LIVING RM ADDITION

Contractor Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. 90571

Phone _____ Fax _____

Occupant or Tenant MR. ALLEN SHAPIRO

Contact Name _____

Address 12200 BENSON BRANCH RD.

City ELICOTT CITY State MD Zip Code 21032

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: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> 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: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame	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"/>
<input type="checkbox"/> State Certified Modular	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <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"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
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: _____	
<input type="checkbox"/> State Certified Modular <input type="checkbox"/> 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.

M. Sturgeon, CEO
 Applicant's Signature
CEO
 Title/Company

MATHEW STURGEON
 Print Name
5/10/07
 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>5/10/2007</u>	<u>[Signature]</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

Front: _____

Rear: _____

Side: _____

Side St.: _____

All minimum setbacks met?
 YES NO

Is Entrance Permit required?
 YES NO

Historic District?
 YES NO

Lot Coverage for NewTown Zone _____

SDP/Red-line approval date _____

PROPERTY ID#:

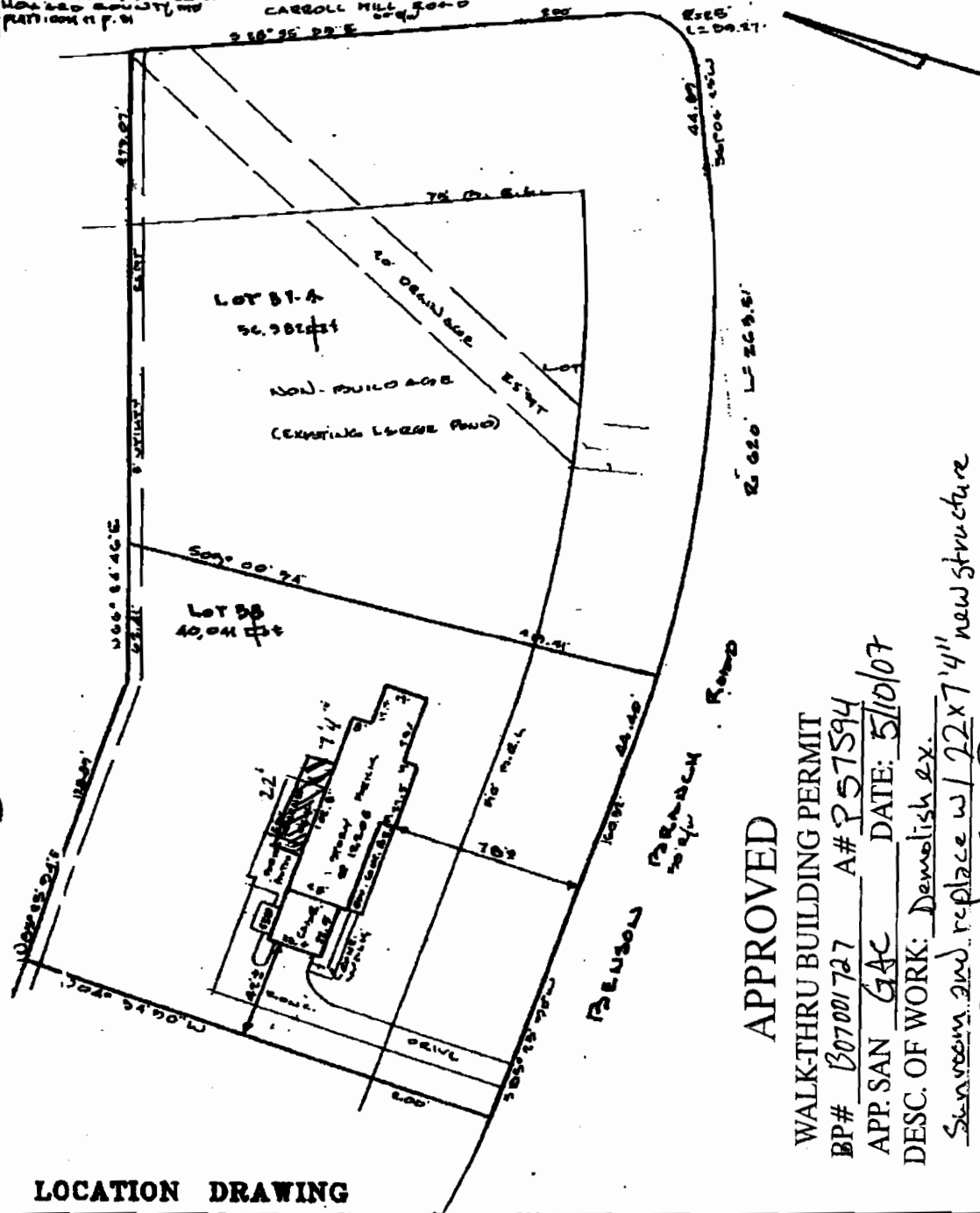
Filing fee \$	_____
Permit fee \$	_____
Excise tax \$	_____
Add'l per. fee \$	_____
TOTAL FEES \$	_____
Sub-total paid \$	_____
Balance due \$	_____
Check #	_____
Validation #	_____

Accepted by _____

Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

PROPERTY KNOWN AS: LOTS 81-A & 82
 REVISED PLAT SECTION 15
 WASHINGTON, DISTRICT OF COLUMBIA
 CARROLL HILL ROAD
 PLAT BOOK 11 P. 14

THIS PLAT CAN NOT BE USED TO ESTABLISH
 PROPERTY LINES OR CORNERS.



APPROVED

WALK-THRU BUILDING PERMIT

BP# 07001727 A# P57594

APP. SAN GAC DATE: 5/10/07

DESC. OF WORK: Demolish ex.

Structure and replace w/ 22x7'4\"/>

Exempt from Perc Cert Requirement

LOCATION DRAWING

CERTIFICATION	SEAL	SCALE 1"=50'	DATE 5-1-07
<p>This is to certify that I have surveyed the property known as: <u>1220</u> <u>WENSOL BRANCH ROAD</u></p> <p>The information shown has been established by current acceptable survey procedures and from available record information. This drawing is to be used for Title Transfer Financing or Refinancing Only and IS NOT to be used for the Establishment of Property Lines, Location for Fences, Garages, Buildings, or other Existing or Future Improvements.</p>		<p>LDE Inc. 9250 Rumsey Road Suite 106 Columbia, Maryland 21045</p> <p>(410) 715-1070 (Balt.) (301) 596-3424 (Wash.) (410) 715-9540 (Fax)</p>	