

13 11000398

Building Address: 11210 Melvin Ct
Laurel Md 20723

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

Census Tract: _____ Subdivision: Scaggsville Knolls

Section: _____ Area: _____ Lot: _____

Tax Map: 46 Parcel: 118 Grid: 9

Zoning: _____ Map Coordinates: _____ Lot Size: 1.0366

Existing Use: SFD

Proposed Use: SFD

Estimated Construction Cost: \$ 8000

Description of Work:
Install 1000 gal in ground
propane tank

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: OWNER

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: NUR INC

Address: 6085 Marshalee Dr

City: Elkridge State: MD Zip Code: 21075

Home Phone: _____ Work Phone: _____

Applicant's Name & Mailing Address, (if other than stated herein):
Jeremy Clancy 7051 Macbeth Way
Edgewater Md 21287

Phone: 443-340-1229 Fax: _____

Email: AppliedAndApproved@44100.com

Contractor Company: Valley National Excavators

Contact Person: William Cieslowski

Address: 7201 Masterville Rd

City: Jessup State: MD Zip Code: 20794

License No.: 67793

Phone: 410-799-1114 Fax: _____

Email: _____

Engineer/Architect Company: _____

Responsible Design Prof.: _____

Address: CONTRACTOR

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit #	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input checked="" type="checkbox"/> Public
1 st floor:	<input checked="" type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input checked="" type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	Roadside Tree Project Permit #
<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 NOTICE.

Applicant's Signature: _____

Email Address: AppliedAndApproved@44100.com

Title/Company: permits

Print Name: Jeremy Clancy

Date: 2/10/11

RECEIVED
 FEB 10 2011
 LICENSES & PERMITS DIVISION

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		
Fire Protection		

DPZ SETBACK INFORMATION

Front: _____

Rear: _____

Side: _____

Side St.: _____

All minimum setbacks met? Yes No

Is Entrance Permit Required? Yes No

Historic District? Yes No

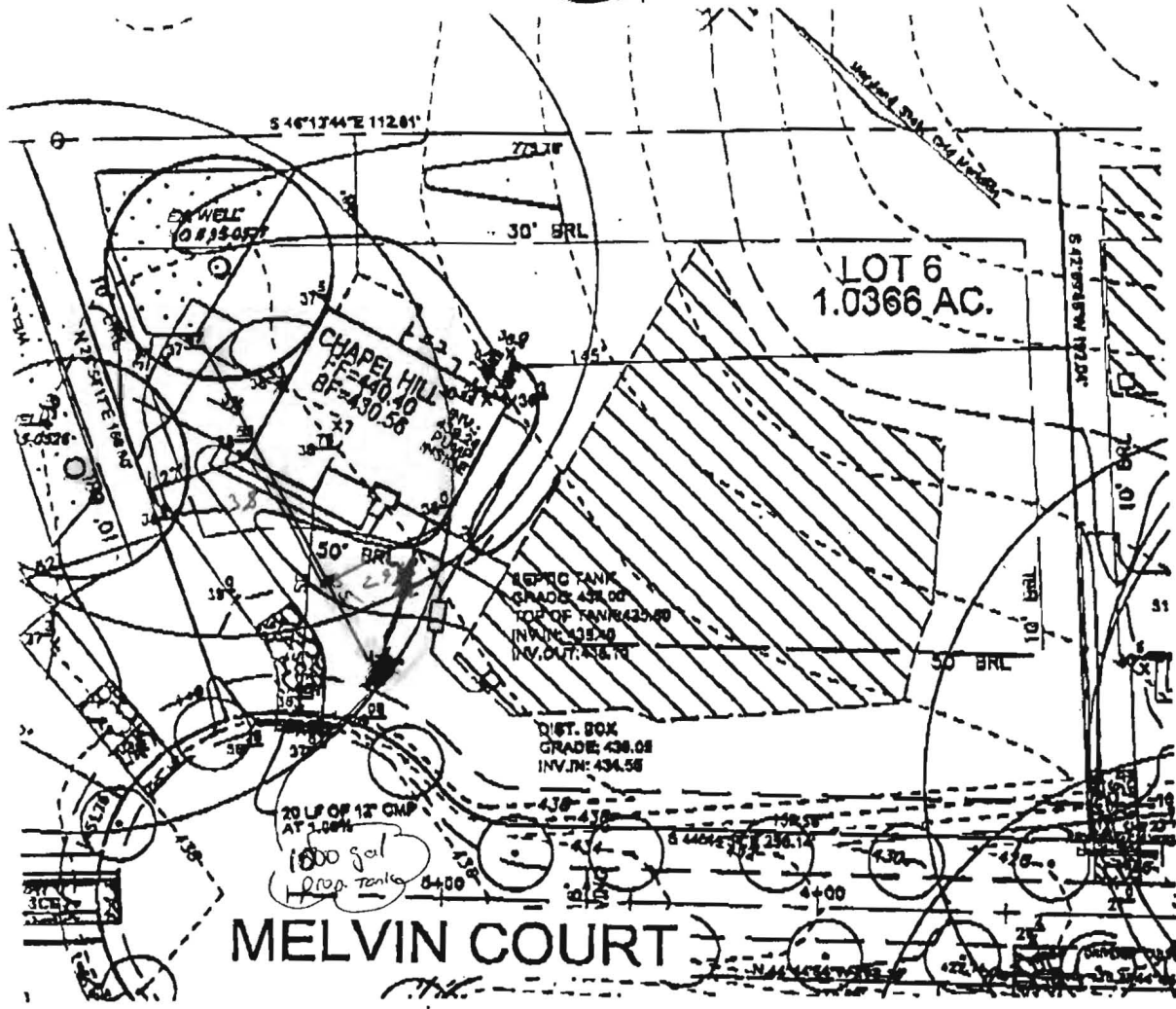
Lot Coverage for New Town Zone: _____

SDP/Red-line approval date: _____

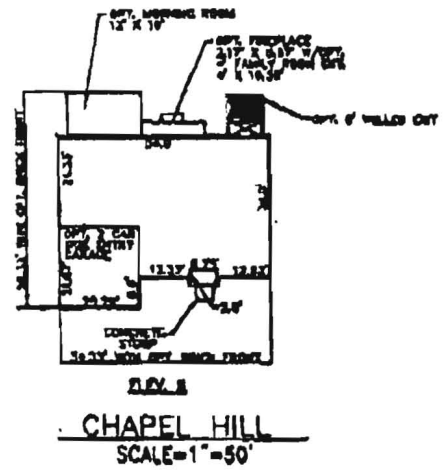
Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

11000

OK# 2288



THE EXISTING WELL SHOWN ON
 LOT 6 TAG NO. HO-95-0527
 HAVE BEEN FIELD LOCATED BY
 ROBERT H. VOGEL ENGINEERING,
 INC.
 BUILDING OF LOT 6
 GROSS FLOOR AREA: 3,300 SF.



VA **ROBERT H. VOGEL**
ENGINEERING, INC.
 ENGINEERS - SURVEYORS - PLANNERS
 2407 MAIN STREET TEL: 410-281-7888
 COLLEGE PARK, MD 21043 FAX: 410-281-8981

NV HOMES
SCAGGSVILLE KNOLLS

F-06-091
LOT 6
11210 MELVIN COURT

TAX MAP 46 BLOCK 3&9 PARCEL 118
 5TH ELECTION DISTRICT HOWARD COUNTY, MARYLAND

SCALE: 1"=50'
 DRAWN BY: HS
 CHECKED BY: JTD
 DATE: SEPTEMBER, 2010
 W. O. #: 04-49
 SHEET # 1 OF 1

APPROVED FOR CONSTRUCTION

NO. 0213 P. 10/1/10

Dec. 29, 2010 9:39AM NVR

B10003213

Building Address 11210 Melvin Court
Scuppernon, MD 21082
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot 6
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot Size _____

Property Owner's Name NUC 301
 Address 11210 Melvin Court
 City _____ State MD Zip Code 21082
 Home Phone _____ Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated herein):

 Phone _____ Fax _____

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ _____
 Description of Work _____
 Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Contractor Company NUC 11 WPS
 Contact Person _____
 Address _____
 City _____ State MD Zip Code 21082
 License No. 56
 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 _____ 1 st floor: _____ 2 nd floor: _____ Basement: _____	Water Supply: _____ Public _____ Private _____
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sewage Disposal: _____ Public _____ Private _____
No. of Bedrooms _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
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 _____
 Email Address _____
 Title/Company _____

Print Name Jim K...
 Date 10/13/2010

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

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID #
Land Development, DPZ			Front: _____	Filing fee \$ <u>150.00</u>
State Highways			Rear: _____	Permit fee \$ _____
Building Officials			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St: _____	Add'l per fee \$ _____
Health <u>10-28-10</u> <u>Dora Bernard</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 checked="" type="checkbox"/> NO <input type="checkbox"/>			Is Entrance Permit Required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>420100</u>
			Lot Coverage for New Town Zone _____	Validation # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			SDP/Red-line approval date _____	Accepted by <u>[Signature]</u>
ONE STOP SHOP: <input type="checkbox"/>				