

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER  
300117783

Building Address 2125 Mt. View Rd  
Marrimottsville MD 21104

Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_

Census Tract 6030 Subdivision \_\_\_\_\_

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_

Tax Map 15 Parcel 173 Grid 6

Zoning RR-DEO Map Coordinates 10F1 Lot size \_\_\_\_\_

Property Owner's Name Robert E. & Ellen W. McManus

Address 2054 Mt. View Rd

City Marrimottsville State MD Zip Code 21104

Home Phone 410/442-1535 Work Phone SAME

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use SFD

Proposed Use SFD w/ porch

Estimated Construction Cost \$ 20,000

Description of Work To enclose existing porch  
framing with 2x4s stud, install  
windows doors, floor, make to walls  
cover wall with drywall - Sun room

Contractor Company Parrott Construction Co., Inc

Contact Person John Parrott

Address 30 E. Susquehanna Ave

City Towson State MD Zip Code 21286

License No. 34588

Phone 410/823-2456 Fax \_\_\_\_\_

Occupant or Tenant SHA

Contact Name Ellen W. McManus

Address 2054 Mt. View Rd

City Marrimottsville State MD Zip Code 21104

Phone 410/442-1535 Fax 410/442-7704

Engineer or Architect Company \_\_\_\_\_

Contact Person H 7525

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 <input type="checkbox"/> State Certified Modular	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 # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private
Depth _____ Width _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
2nd floor: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	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"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <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: _____
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: _____	
<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 HIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature Ellen W. McManus

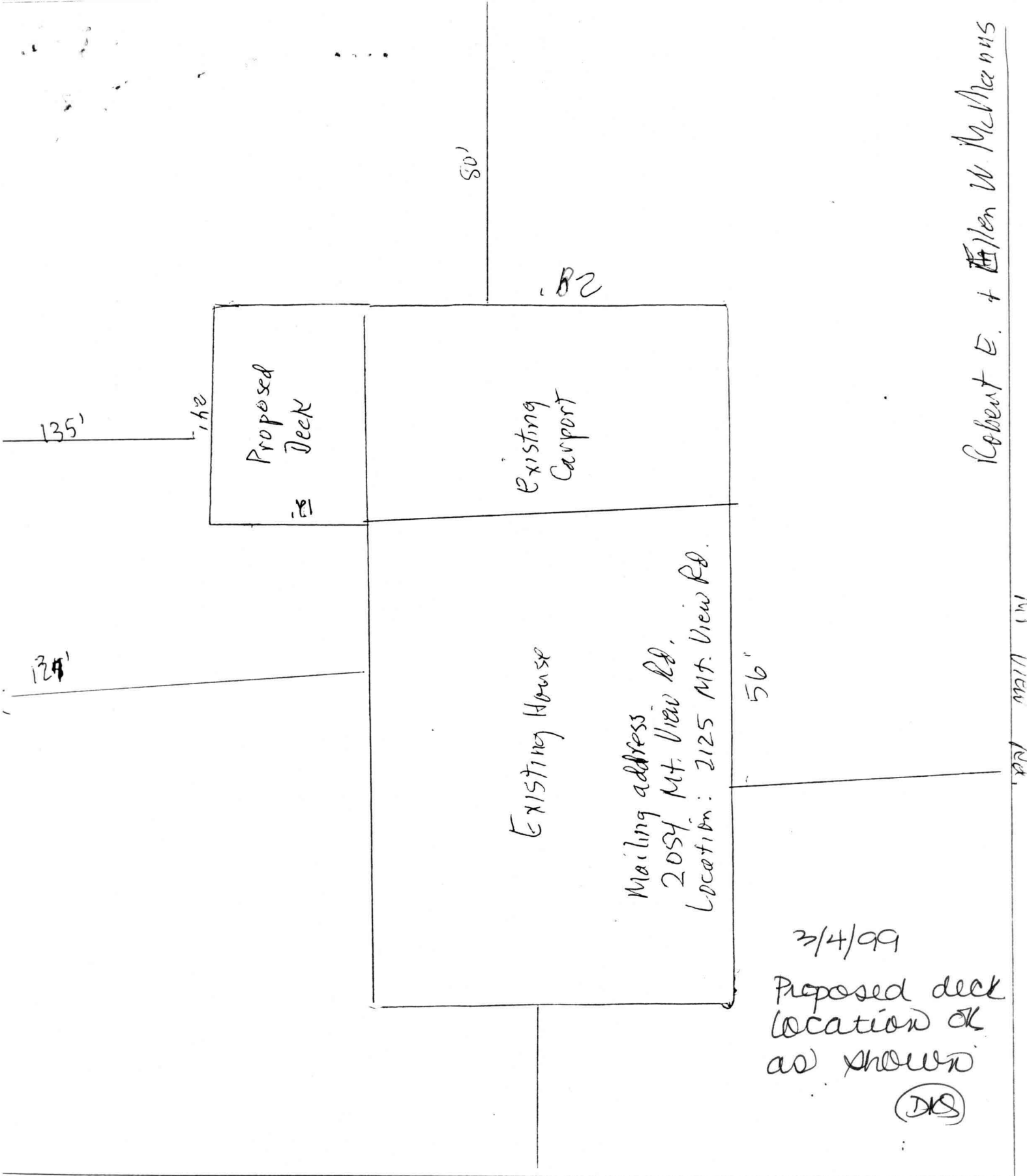
Title/Company \_\_\_\_\_

Print Name ELLEN W. McMANUS

Date 5/6/99

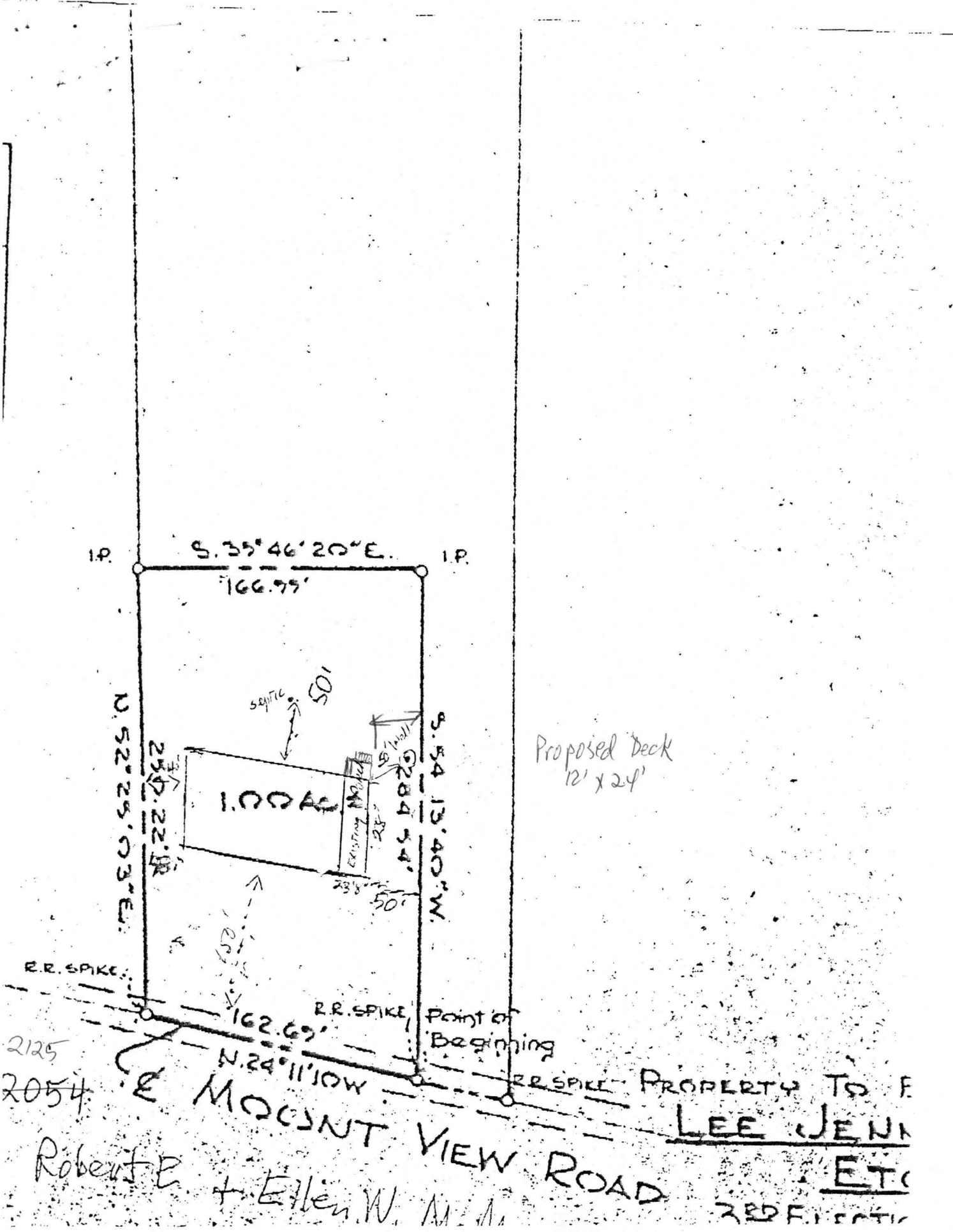
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
**\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\***

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: _____	33561
State Highways			Rear: _____	Filing fee \$ _____
Building Official	<u>5/6/99</u>	<u>A. McManus</u>	Side: _____	Permit fee \$ <u>60</u>
Dev. Engineering DPZ			Side St.: _____	Excise tax \$ <u>5.30</u>
Health			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
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"/>	TOTAL FEES \$ <u>6.21</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	Balance due \$ _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Check # <u>7933</u>
			Accepted by _____	Validation # _____



Robert E. + Ellen W. McManis

PA 11/11 11/11



S. 35° 46' 20" E.

166.79'

N. 52° 25' 03" E.

250.22'

1.00 AC

50' septic



S. 54° 13' 40" W.

50'

Proposed Deck  
12' x 24'

R.R. SPIKE

162.69'

R.R. SPIKE Point of Beginning

N. 24° 11' 10" W.

2125  
2054

E MOUNT VIEW ROAD

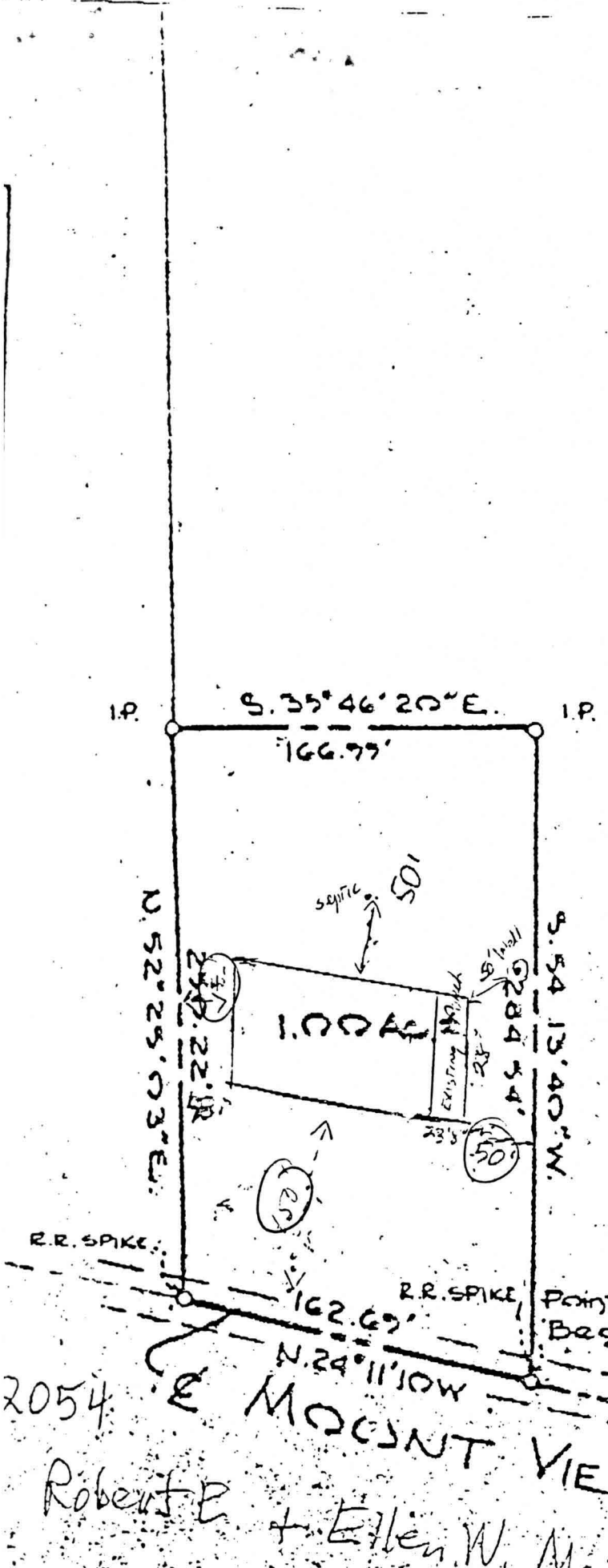
PROPERTY TO E

LEE JENN

ETC

Robert E + Ellen W. M. M.

REFLECTIVE



5/6/99  
 Enclosure of the  
 existing car port  
 w/ glass (turn into  
 sun room) will have  
 no impact on the  
 existing well or  
 septic.

A. McMill

2054 E MOUNT VIEW ROAD  
 Robert E + Ellen W. McMill  
 PROPERTY TO E LEE JENK ETC