

**800131747**

Building Address <u>16917A Sawmill Rd.</u> <u>Woodbine via Maryland 21797</u> Suite/Apt. #: <u>---</u> SDP/WP/Petition #: <u>N/A</u> Genus Tract <u>---</u> Subdivision <u>Westwood At Cherry Grove</u> Section <u>N/A</u> Area <u>N/A</u> Lot <u>18</u> Tax Map <u>13</u> Parcel <u>16</u> Grid <u>15</u> Zoning <u>RC-450</u> Map Coordinates <u>885</u> Lot size <u>---</u>	Property Owner's Name <u>D. R. Horton, Inc.</u> Address <u>1370 Piccard Dr., St. 230</u> <u>Rockville, MD 20850</u> City _____ State _____ Zip Code _____ Home Phone _____ Work Phone <u>301-676-6144</u> Applicant's Name & Mailing Address, (if other than stated hereon): <u>Victoria Meyer</u> <u>Maryland Bldg. Permits, Inc</u> Phone <u>410-602-8779</u> Fax _____
Existing Use <u>VACANT LOT</u> Proposed Use <u>SINGLE-FAM DWELL</u> Estimated Construction Cost \$ <u>285,000</u> (2.44, EX) Description of Work <u>BAWNAI W/ HARM 3CA1</u> <u>2 STORY, FULL BSMT, 12R, 3FR, 1HB,</u> <u>FP, SWAMP &amp; LAIAC</u> (11/16/01)	Contractor Company <u>D. R. Horton, Inc.</u> <u>1370 Piccard Dr., St. 230</u> <u>Rockville, MD 20850</u> Contact Person <u>FAM. KMopt.</u> Address _____ City _____ State _____ Zip Code _____ License No. <u>535</u> Phone <u>301-676-6144</u> Fax _____
Occupant or Tenant <u>---</u> Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company <u>Benchmark Engineer</u> Contact Person <u>8480 Balto. Nat'l Pk.</u> <u>Elliot City, MD 21043</u> Address _____ City _____ State <u>MD</u> Zip Code <u>21043</u> Phone <u>410-465-6103</u> Fax _____

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
<b>Building Characteristics</b> Weight: _____ 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	<b>Utilities</b> 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: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____	<b>Building Characteristics</b> SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u> 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	<b>Utilities</b> 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 checked="" type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> 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 PURPOSES OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature V. Meyer Agent  
 Title/Company \_\_\_\_\_  
 Print Name Vicky Meyer  
 Date 7/31/01

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY  
 \*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*  
 - FOR OFFICE USE ONLY -

AGENCY _____ DATE _____ SIGNATURE APPROVAL _____ <input checked="" type="checkbox"/> Land Development, DPZ <input checked="" type="checkbox"/> State Highways <input checked="" type="checkbox"/> Building Official <input checked="" type="checkbox"/> Dev. Engineering, DPZ <input checked="" type="checkbox"/> Health <u>9-1-01</u> <u>Errol Shum</u> <input checked="" type="checkbox"/> Fire Protection As Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>	DPZ SETBACK INFORMATION Front: _____ Rear: _____ Side: _____ Side St.: _____ All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> Lot Coverage for New Town Zone _____ SDP/Red-line approval date _____ Accepted by <u>AR</u>	PROPERTY ID# <u>51727</u> Filing fee \$ <u>100</u> Permit fee \$ _____ Excise tax \$ _____ Sub-total paid \$ _____ Add'l permit fee \$ _____ TOTAL FEES \$ _____ Balance due \$ _____ Check # <u>40148</u> Validation # <u>44226</u>
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