

4312000456

Building Address: 12241 Running Fence Lane
Clarksville MD 21029

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

Census Tract: _____ Subdivision: Walnut Grove

Section: _____ Area: _____ Lot: 26

Tax Map: 28 Parcel: 74 Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: 1 Acre

Existing Use: VACANT LOT

Proposed Use: NEW SFD

Estimated Construction Cost: \$ 800,000

Description of Work: Custom 2 story SFD
3 CAR GARAGE 5 X BEDROOM 516 SQ FT
Finished Basement, 3 F/P Screened Deck

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Applicant's Name & Mailing Address, (If other than stated herein): _____

Phone: _____ Fax: _____

Email: _____

Contractor Company: JAMES H. SMITH & SONS

Contact Person: TIM MANN

Address: 4701 TOWN CENTER

City: _____ State: MD Zip Code: 21034

License No.: 129

Phone: 410-331-0600 Fax: 410-331-0151

Email: James.smith@jhs-build.com

Engineer/Architect Company: RON J. SMITH

Responsible Design Prof.: RON J. SMITH

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: 410-332-3607 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
<u>Roadside Tree Project Permit #</u>	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor: _____	<input checked="" type="checkbox"/> Private
2 nd floor: _____	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms: <u>2</u>	<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 type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<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.

Applicant's Signature: James Smith

Email Address: VP of Production

Title/Company: _____

Print Name: _____

Date: 2/14/12

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	<u>3-2-12</u>	<u>Walter Scott</u>
Fire Protection		

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

DPZ SETBACK INFORMATION

Front: _____

Rear: _____

Side: _____

Side St.: _____

All minimum setbacks met? Yes No

Is Entrance Permit Required? Yes No

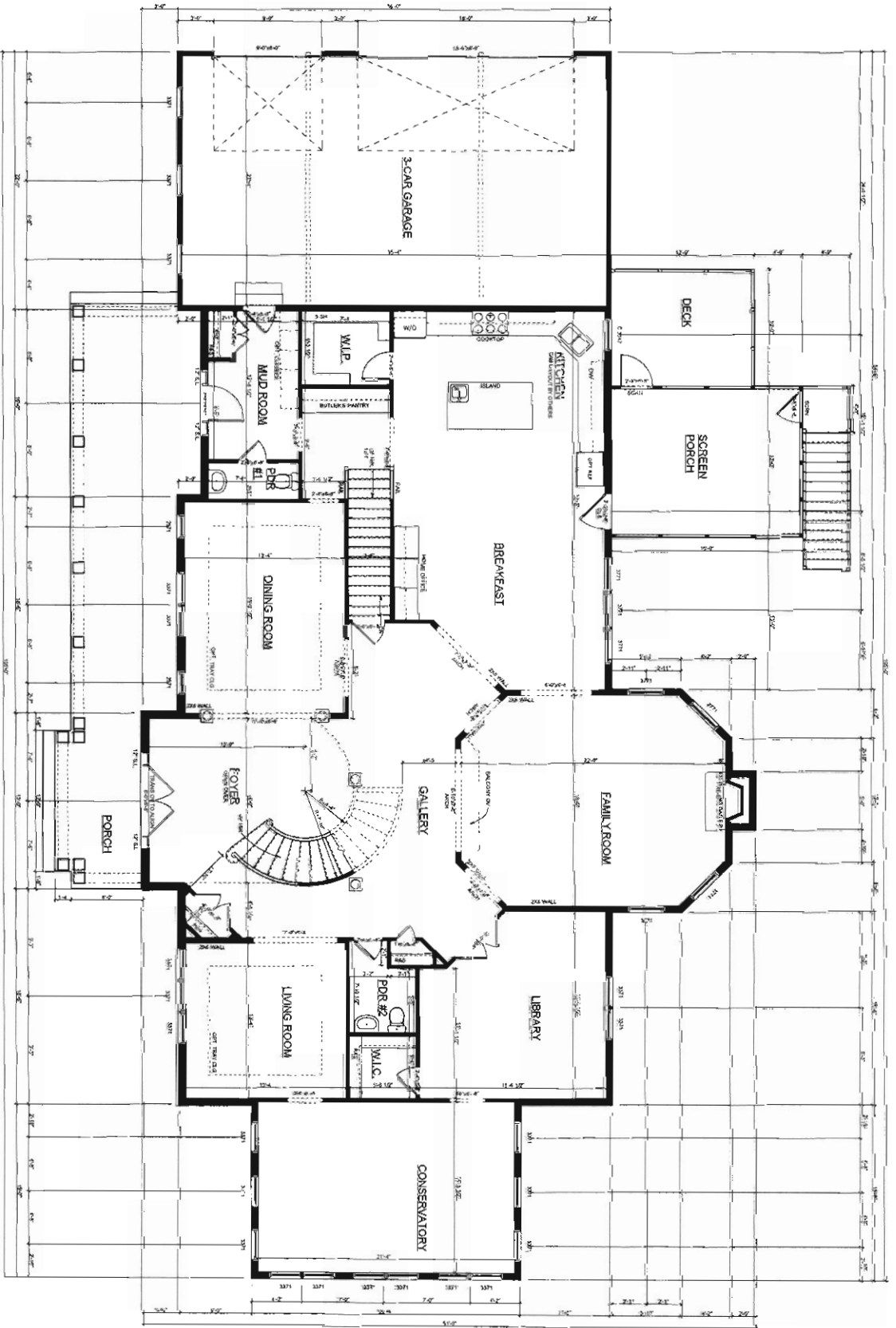
Historic District? Yes No

Lot Coverage for New Town Zone: _____

SDP/Red-line approval date: _____

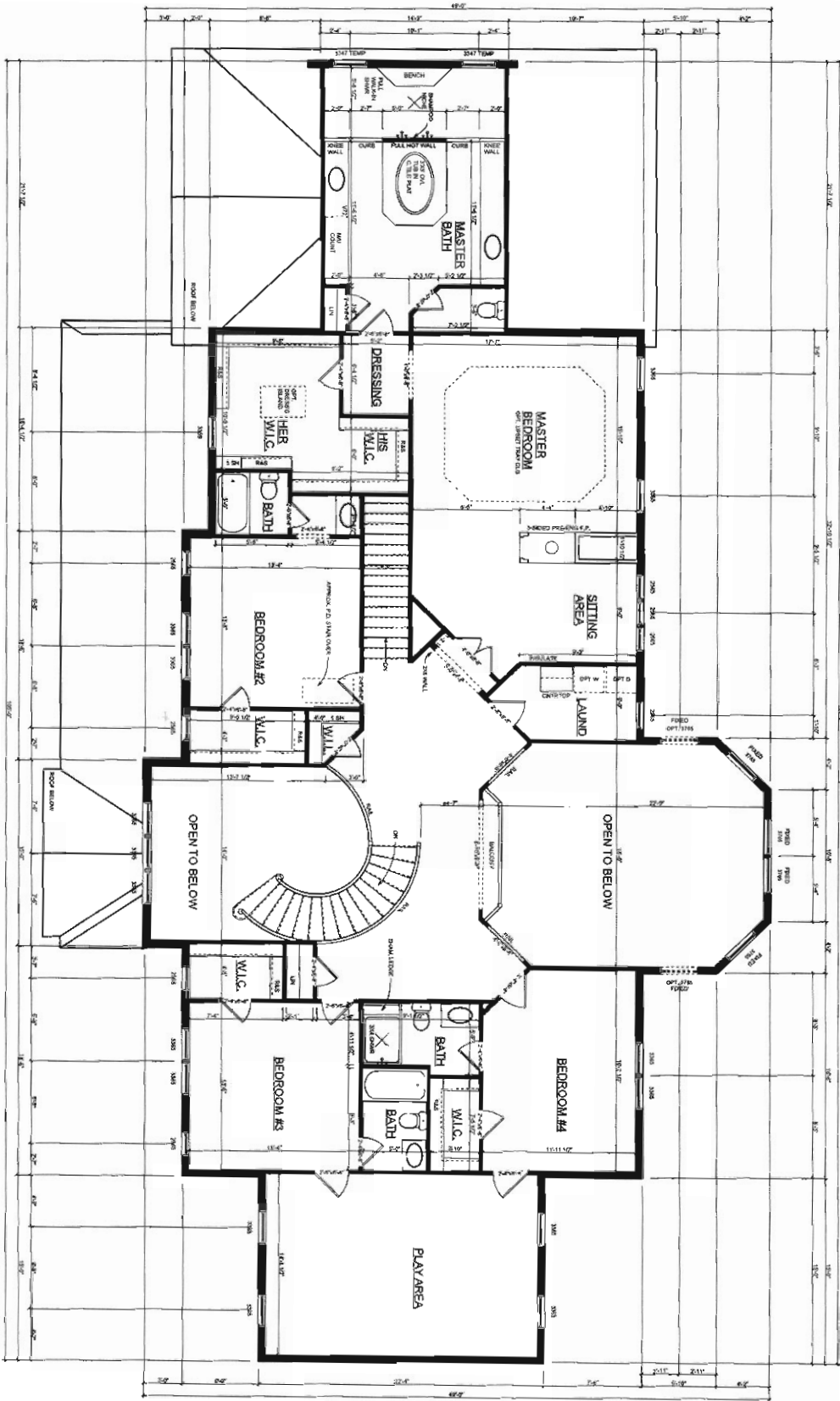
Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

First Floor Plan
 1/8" = 1'-0"
 The Guerrasio Residence
 1/19/2012



Approved 2/27/12 by R. Peter Bauer
 Architect of Record
 Approved 5/20/12 by M. F. Foul
 Architect

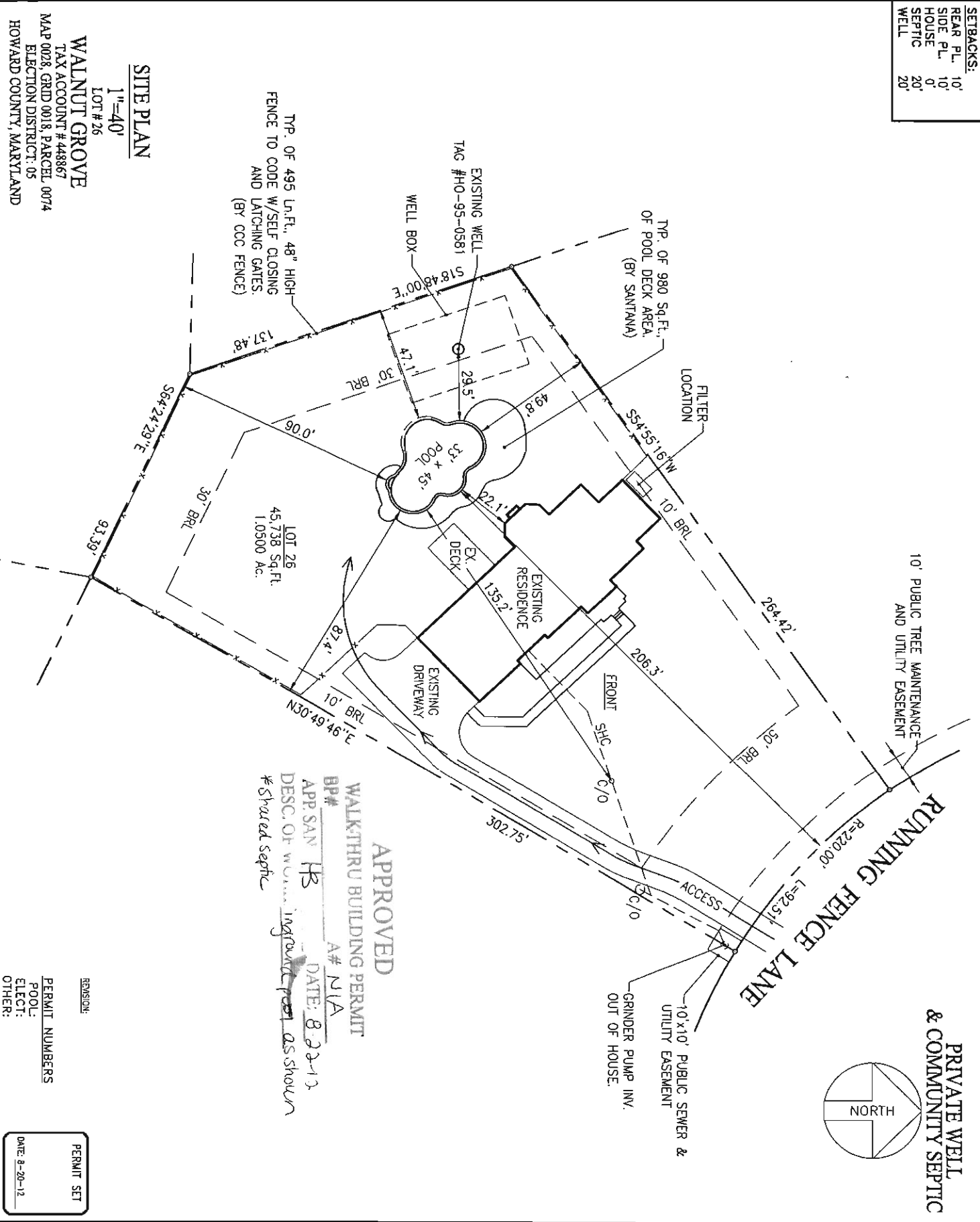
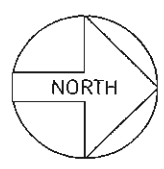
Second Floor Plan
 1/8" = 1'-0"
 The Guerrasio Residence
 1/19/2012



SETBACKS:	10'
REAR P.L.	10'
HOUSE	0'
SEPTIC	20'
WELL	20'

10' PUBLIC TREE MAINTENANCE AND UTILITY EASEMENT

PRIVATE WELL & COMMUNITY SEPTIC



SITE PLAN
1"=40'

LOT #26

WALNUT GROVE

TAX ACCOUNT #448867
MAP 0028, GRID 0018, PARCEL 0074
ELECTION DISTRICT: 05
HOWARD COUNTY, MARYLAND

TOP OF 495 L.F.T., 48" HIGH FENCE TO CODE W/SELF CLOSING AND LATCHING GATES. (BY CCC FENCE)

LOT 26
45,738 Sq.Ft.
1.0500 Ac.

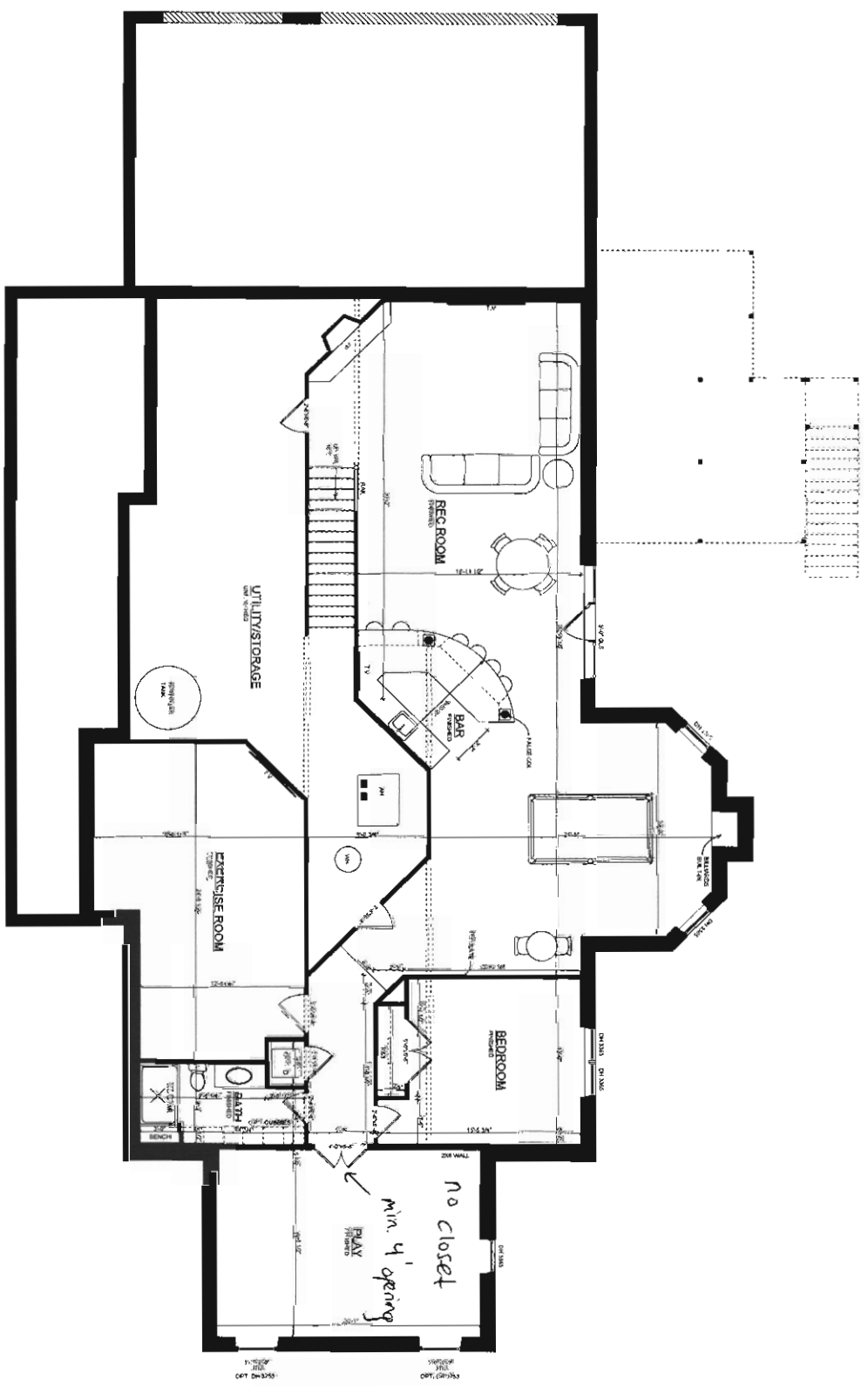
APPROVED
WALKTHRU BUILDING PERMIT
BP# _____ A# N/A
APP. SAN HB DATE: 8-22-12
DESC. OF WORK: inground pool as shown
* Shared septic

REVISION:
PERMIT NUMBERS
POOL:
ELECT:
OTHER:

PERMIT SET
DATE: 8-26-12

Finished Basement Plan
 1/8" = 1'-0"
The Guerrasio Residence
 1/19/2012

APPROX. 2130 SF FINISHED BASEMENT



Building Address: 12241 Running Fence LA
Clarksville 21029

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

Census Tract: _____ Subdivision: Walnut Grove

Section: _____ Area: _____ Lot: 21

Tax Map: 0028 Parcel: 0077 Grid: 0018

Zoning: _____ Map Coordinates: 4933J-4 Lot Size: _____

Property Owner's Name: MARCE + ROBYN GUERRASIO

Address: 12241 Running Fence LA

City: Clarksville State: _____ Zip Code: 21029

Home Phone: 410-795-7535 Work Phone: _____

Applicant's Name & Mailing Address, (If other than stated herein): _____

Phone: _____ Fax: _____

Email: _____

Existing Use: SFD

Proposed Use: SFD + Pool

Estimated Construction Cost: \$ 25,000

Description of Work: Inground concrete
pool 33x45 in rear yard w/48"
high fence to side

Occupant or Tenant: _____

Contractor Company: MARYLAND POOL

Contact Person: BOB BROOKS

Address: 9515 Gerwig Lane

City: Columbia State: _____ Zip Code: 21046

License No.: 6694

Phone: 410-993-6604 Fax: _____

Email: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Engineer/Architect Company: _____

Responsible Design Prof.: _____

Address: _____

City: _____ State: _____ Zip Code: _____

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Applicant's Signature: [Signature]

Email Address: [Signature]

Title/Company: _____

Print Name: J. CARROLL CATHAN

Date: 8-22-12

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
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PSZA (Engineering)		
Health		<u>[Signature]</u>
Fire Protection		

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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	\$

