

Call contractor **KC**

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| DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410)313-2455 INSPECTIONS (410)313-1810 AUTOMATED INFORMATION (410) 313-3800 | HOWARD COUNTY PERMIT APPLICATION | PERMIT NUMBER B0034834 |
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| Building Address <u>2512 Daisy Rd</u> <u>Woodbine Md 21797</u> | Property Owner's Name <u>Dennis + Alma Wickenden</u> |
| Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>1011002</u> Subdivision <u>River Farms</u> Section <u>N/A</u> Area <u>N/A</u> Lot <u>10</u> Tax Map <u>13</u> Parcel <u>93</u> Grid <u>12</u> Zoning <u>RD-DT</u> Map Coordinates <u>86A</u> Lot size <u>3.291</u> | Address <u>2512 Daisy Road</u> City <u>Woodbine</u> State <u>md</u> Zip Code <u>21797</u> Home Phone <u>301-854-5675</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): <u>Contractor.</u> |
| Existing Use <u>SF Dwelling</u> Proposed Use _____ Estimated Construction Cost \$ <u>54,000</u> | Contractor Company <u>Thomas General Contractor</u> Contact Person <u>Tom Biden</u> Address <u>327 Shamer run drive</u> City <u>Hampstead</u> State <u>md</u> Zip Code <u>21074</u> License No. _____ Phone <u>410-297-3619</u> Fax _____ |
| Description of Work <u>Detached double car garage w/storage above</u> <u>32x28</u> | Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____ |
| Occupant or Tenant <u>Dennis + Alma Wickenden</u> Contact Name <u>Dennis</u> Address <u>2512 Daisy Rd</u> City <u>Woodbine</u> State <u>md</u> Zip Code <u>21797</u> Phone <u>301-854-5675</u> Fax _____ | Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____ |

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| BUILDING DESCRIPTION - COMMERCIAL | BUILDING DESCRIPTION - RESIDENTIAL |
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| Building Characteristics | Utilities | Building Characteristics | Utilities |
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| Height: _____ 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 | 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: <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 <input type="checkbox"/> # of Heads | SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> <u>Depth</u> <u>Width</u> 1st floor: _____ 2nd floor: _____ Basement: _____ <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> 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: <u>2 car Garage</u> Dimensions: <u>32x28</u> Footings: <u>Concrete</u> Roof: <u>Gable</u> <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home | 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 checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" 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"/> Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> 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 PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

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| <u>Thomas Biden</u> Applicant's Signature <u>Resident / Thomas General Contractor</u> Title/Company | <u>Thomas Biden</u> Print Name <u>3-14-02</u> Date |
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Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

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| AGENCY <input checked="" type="checkbox"/> Land Development DPZ <input type="checkbox"/> State Highways <input checked="" type="checkbox"/> Building Official <input checked="" type="checkbox"/> Dev. Engineering DPZ <input checked="" type="checkbox"/> Health <input type="checkbox"/> Fire Protection | DATE <u>3/15/02</u> | SIGNATURE APPROVAL <u>Kare Goedeking</u> | DPZ SETBACK INFORMATION Front: <u>100ft</u> 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 NewTown Zone _____ SDP/Red-line approval date _____ | PROPERTY ID#: <u>53887</u> Filing fee \$ <u>25</u> Permit fee \$ _____ Excise tax \$ _____ Sub-total paid \$ _____ Add'l permit fee \$ _____ TOTAL FEES \$ _____ Balance due \$ _____ Check # <u>5513</u> Validation # <u>46593</u> |
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CONTINGENCY CONSTRUCTION START: 5005 MB 17
 ONE STOP SHOP:

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