

Building Address 6010 Red Berry Road
Clarksville MD 21029

Suite/Apt. #: _____ SDP/WP/Petition #: 1-210

Census Tract 05102 Subdivision Dogliwood Sub

Section _____ Area _____ Lot 15

Tax Map 41 Parcel 205 Grid 1

Zoning RRD17 Map Coordinates 14611 Lot size 112,000 sq ft

Property Owner's Name FURMAN P. PHYLLIS O. HILL JR

Address 6510 REDBERRY RD

City CLARKSVILLE State MD Zip Code 21029

Home Phone 501-851-2529 Work Phone _____

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

Phone _____ Fax _____

Existing Use SED

Proposed Use SAME

Estimated Construction Cost \$ 25,000.00

Description of Work ADDITION TO KITCHEN
AREA APPROX 10'2" X 14' To be
placed on existing porch

Contractor Company LLOYD ROBERTS PA

Contact Person LLOYD

Address 1838 EVERFIELD DRIVE

City HYGAND State MD Zip Code 20774

License No. _____

Phone 410-321-1177 Fax _____

Occupant or Tenant Same

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Engineer or Architect Company H. W. & P. W. WITH MS INC.

Contact Person SEBASTIAN ADRIAN

Address 4777 PARKWAY RD

City COLUMBIA State MD Zip Code 21046

Phone 410-351-2050 Fax 410-391-5440

BUILDING DESCRIPTION - <u>ERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____	1st floor: _____ 2nd floor: _____ Basement: _____	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"/>	Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>3</u>	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"/>	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 type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ _____ State Certified Modular _____ Manufactured Home	Sprinkler system: <u>N/A</u> <input type="checkbox"/> _____ NFPA #13D _____ 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 PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Furman P. Hill, Jr.
 Applicant's Signature

FURMAN P. HILL, JR
 Print Name

3/15/02
 Date

Title/Company _____

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

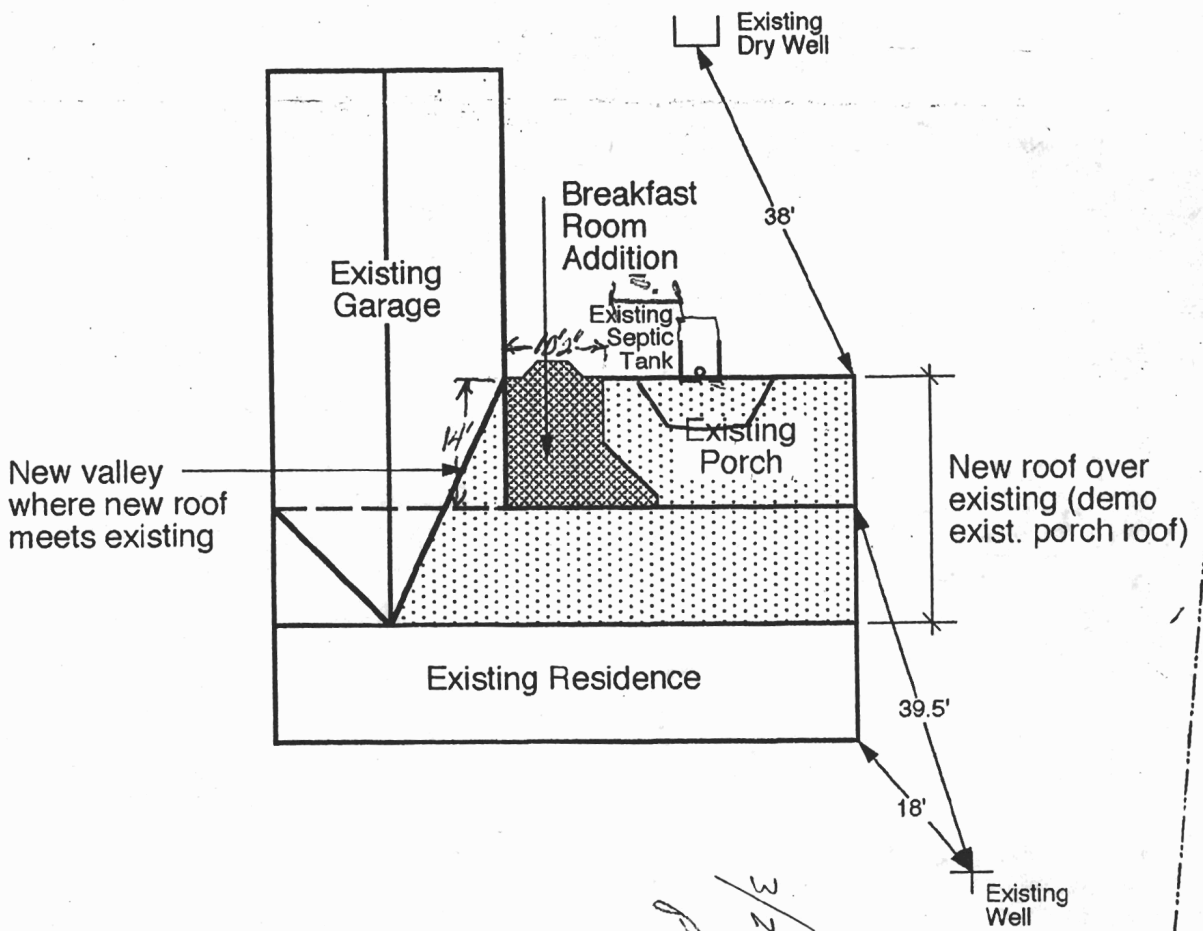
AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#	
Land Development, DPZ			Front: <u>00ft</u>	53931	
State Highways			Rear: _____	Filing fee \$ <u>25</u>	
Building Official	<u>3/20/02</u>	<u>[Signature]</u>	Side: _____	Permit fee \$ <u>1529</u>	
Dev. Engineering, DPZ			Side St.: _____	Excise tax \$ <u>158</u>	
Health	<u>3/22/02</u>	<u>[Signature]</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per. fee \$ _____	
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>1642.00</u>	
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"/>	Sub-total paid \$ <u>162</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>1172</u>	
Distribution of Copies: _____	White: Building Official	Green: LDD, DPZ	Yellow: DED, DPZ	Pink: Health	Validation # _____
					Accepted by <u>[Signature]</u>

N 69° 64' 20" E

321.71'

368.93'

N 80° 17' 28" E



DOGWOOD LOT No. 16

*3/21/02 Ex. S.T. 10' from
 proposed new construction
 (Signature)*

L = 111.60'

111.60'