

RECEIVED
HOWARD COUNTY HEALTH DEPT
ENVIRONMENTAL HEALTH
2002 FE 22 PM 2:05

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLCOTT CITY, MD 21043
PERMITS (410)313-2455 INSPECTIONS (410)313-1810
AUTOMATED INFORMATION (410) 313-3800

**HOWARD COUNTY
PERMIT APPLICATION**

**PERMIT NUMBER
P00034505 RS**

Building Address 14576 TROTTICHELL DRIVE
COOKSDALE, MD 21723

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

Census Tract 001002 Subdivision Forsythe Heights

Section _____ Area _____ Lot 1358483

Tax Map 9 Parcel 333 Grid 17

Zoning MDP Map Coordinates 4 D11 Lot size _____

Existing Use SALE WITH ADDITION

Proposed Use SALE WITH ADDITION

Estimated Construction Cost \$ 500,000

Description of Work 2-STOREY ADDITION W/
CONCRETE SUPPORT AND ROOF

Occupant or Tenant OWNER

Contact Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Property Owner's Name DAVID KELLER

Address 14576 TROTTICHELL DRIVE

City COOKSDALE State MD Zip Code 21723

Home Phone 301-854-4848 Work Phone 301-854-4848

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

Phone _____ Fax _____

Contractor Company RESORC AND ASSOCIATES

Contact Person WILLIE

Address 2629 Melba Rd.

City Ellicott City State MD Zip Code 21042

License No. _____ Phone 410-465-6369 Fax _____

Engineer or Architect Company STANLEY DEAN ARCHITECTS

Contact Person NEO KERRAN

Address 8329 FAUST STREET.

City ELLCOTT CITY State MD Zip Code 21043

Phone 410-2465-7737 Fax 410-465-7687

BUILDING DESCRIPTION - COMMERCIAL

Building Characteristics

Height: _____

No. of stories: _____

Gross area, sq. ft. per floor: _____

Use group: _____

Construction type:
Reinforced Concrete _____
Structural Steel _____
Masonry _____
Wood Frame _____
State Certified Modular _____

Utilities

Water Supply: _____
Public _____ Private _____

Sewage Disposal: _____
Public _____ Private _____

Heating System: _____
Electric Oil
Natural Gas Propane Gas

Electric Yes No
Gas Yes No

Sprinkler system: _____
Full _____
Partial _____
Other Suppression _____
of Heads _____

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

SF Dwelling SF Townhouse

1st floor: _____
2nd floor: _____
Basement: _____

Finished Basement Unfinished Basement

Crawl space Slab on Grade

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: _____
Roof: _____

State Certified Modular _____
Manufactured Home _____

Utilities

Water Supply: _____
Public _____ Private _____

Sewage Disposal: _____
Public _____ Private _____

Electric Yes No
Gas Yes No

Heating System: _____
Electric Oil
Natural Gas Propane Gas

Sprinkler system: _____
NFPA #13U _____
NFPA #13R _____
Other: _____

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT I/HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT I/HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THEREIN; (4) THAT I/HE/SHE WILL PROPERLY NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT I/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 David Keller

Date 2/22/02
Print Name DAVID KELLER

Title/Company _____
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **

AGENCY _____ DATE _____ SIGNATURE APPROVAL _____

Land Development DPZ _____

State Highways _____

Building Official _____

Dev. Engineering DPZ John Mark Keller

Health _____

Fire Protection _____

Is Sediment Control approval required prior to issuance?
YES NO

CONTINGENCY CONSTRUCTION START
ONE STOP SHOP

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

PROPERTY ID# 34523

Filing fee \$ 25

Permit fee \$ _____

Excise tax \$ _____

Add'l per. fee \$ _____

TOTAL FEES \$ _____

Sub-total paid \$ _____

Balance due \$ _____

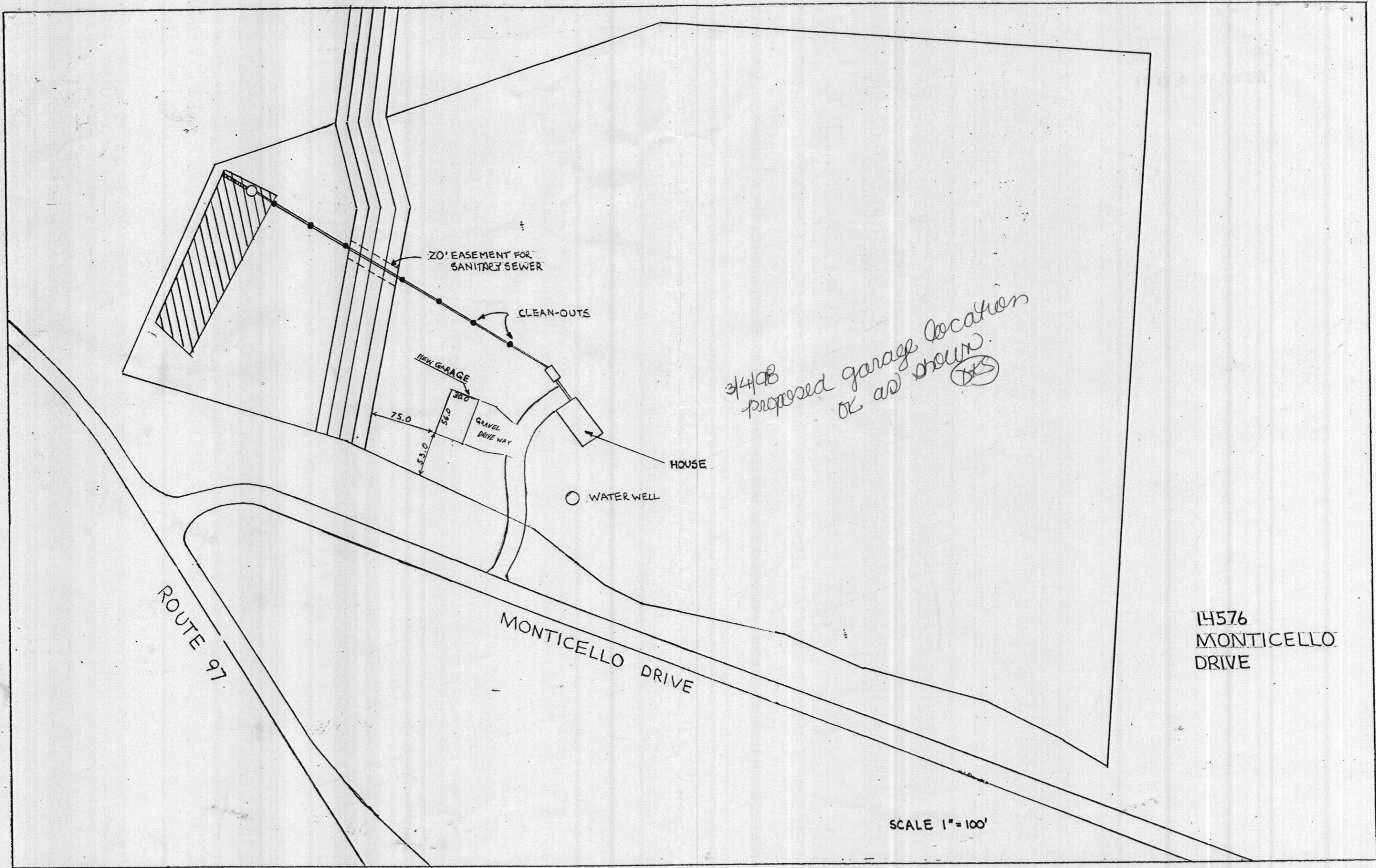
Check # _____

Validation # _____

Accepted by _____

Rev. 5/17/00





14576
MONTICELLO
DRIVE

SCALE 1" = 100'

Ronald and Diane Kelly
14576 Monticello Drive
Cooksville, MD 21723

MSU
CK 607
CR 47598

April 3, 2002

Avis L. Corbin
Howard County Department of Inspections, Licenses, and Permits
3430 Court House Drive
Ellicott City, Maryland 21043

Dear Ms. Corbin:

Due to unexpected site conditions, we would like to make an amendment to our building permit number B00-134505. The pool, which we had wanted to keep, is failing and the foundation and structure of the existing house is not the best. Because of these conditions and the difficulties and costs involved in building around them, we would like to move the new construction directly behind the existing house. Amended plans showing the location and work are included. The existing structure will be removed once the new work is completed. ^{new}

Please contact us if you have any questions.

Sincerely,

Diane Kelly

Diane Kelly

AMENDMENT
OK - NEW HOUSE
TO BE 4 BR
MR 7/11/02
HoCo Health

2002 AP - 9 PM 3:46
RECEIVED
HOWARD COUNTY HEALTH DEPT.
ENVIRONMENTAL HEALTH

Monticello Drive

House

See permit sheet

Driveway

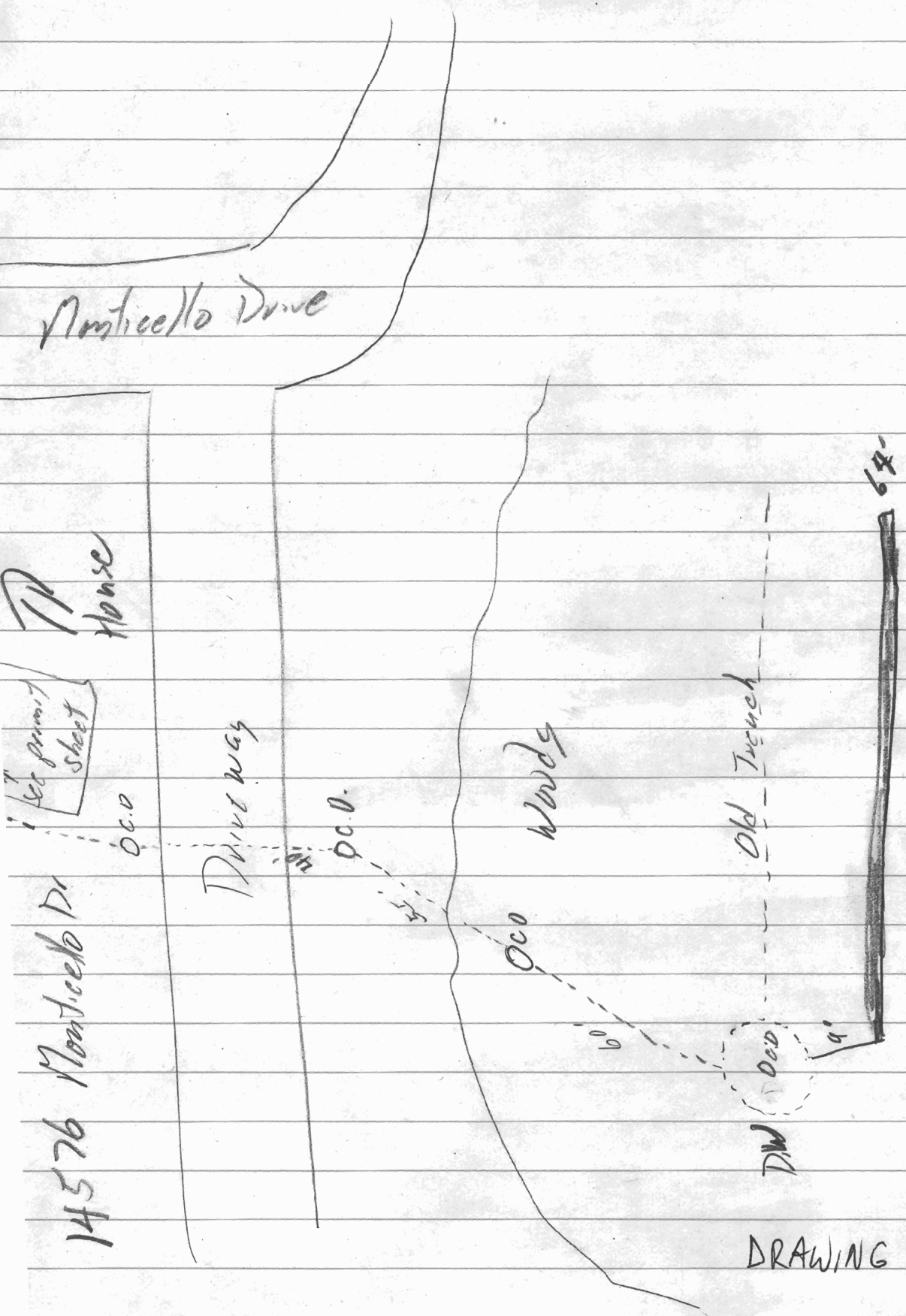
Woods

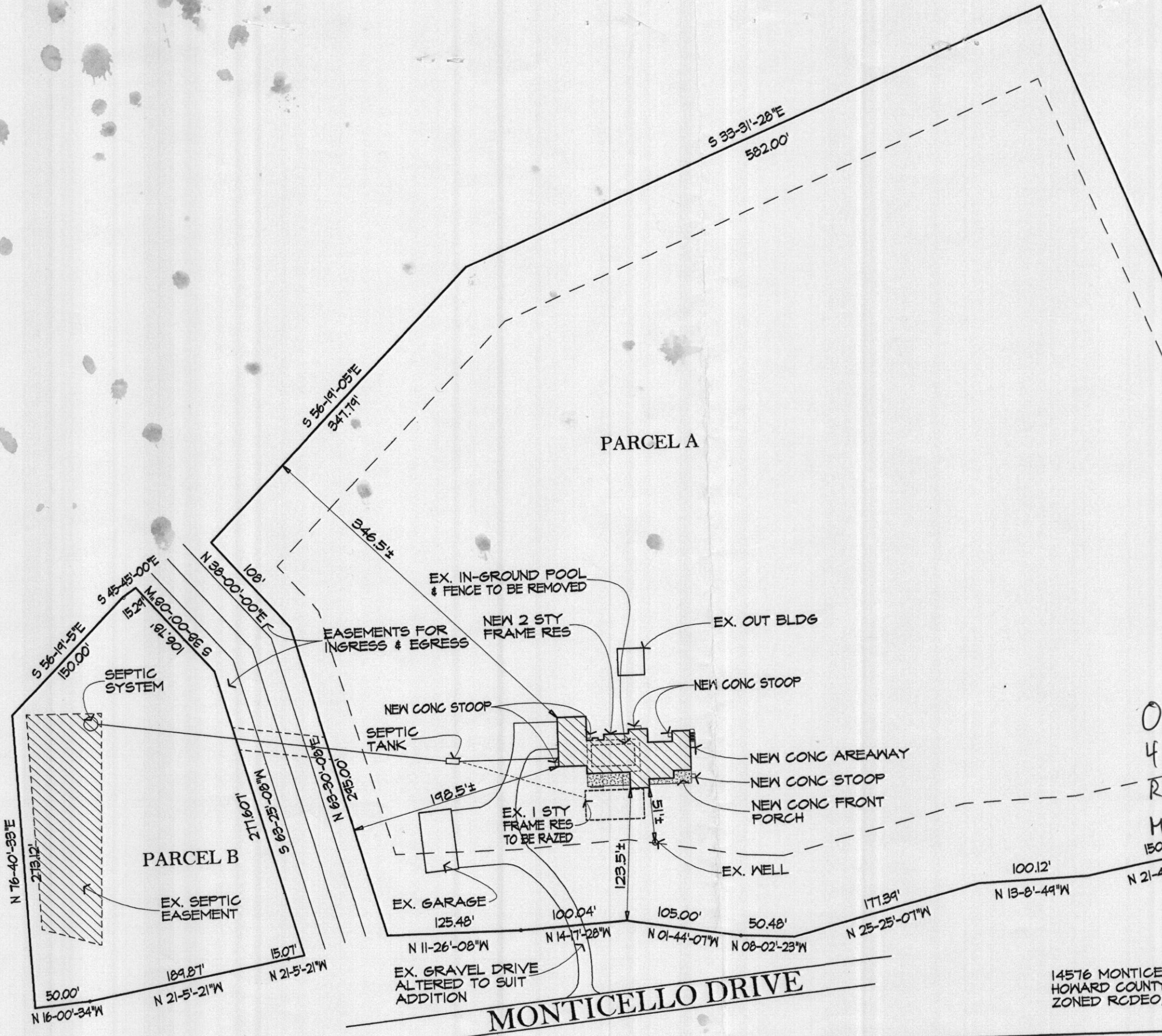
Old Trench

14576 Monticello Dr.

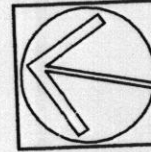
64'

DRAWING BY S. Oster
4/16/02





2013 APR 2 10 31 AM
 2013 APR 2 10 31 AM
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SITE PLAN
KELLY RESIDENCE