

Building Address 10006 FOXDEN ROAD
ELLICOTT CITY, MD 21042

Property Owner's Name Cecilia SITZMAN
 Address same
 City _____ State _____ Zip Code _____

Suite/Apt. #: _____ SDP/WP/Petition #: _____
 City _____ State _____ Zip Code _____

Census Tract _____ Subdivision Bethany Manor
 Home Phone 410-461-9782 Work Phone 410-964-3600
 Applicant's Name & Mailing Address, (if other than stated hereon): _____

Section 1 Area _____ Lot 1
 Tax Map 17 Parcel 662 Grid _____

Zoning _____ Map Coordinates _____ Lot size _____
 Phone _____ Fax _____

Existing Use SFD
 Proposed Use ADDITONAL ROOM TO EXPAND KITCHEN
 Estimated Construction Cost \$ 20,000

Contractor Company COASTAL BUILDERS, INC.
 Contact Person John M. WATTS
 Address PO Box 1613
 City ELLICOTT CITY State MD Zip Code 21041
 License No. 49765-KC HANSO
 Phone 410-461-5988 Fax 410-750-3570

Description of Work ADD 8'x12' ADDITION TO
EXPAND EXISTING KITCHEN - 15 SQ FT
ON CRAWL SPACE

Occupant or Tenant OWNER
 Engineer or Architect Company _____

Contact Name _____
 Contact Person _____
 Address _____
 Address _____
 City _____ State _____ Zip Code _____
 City _____ State _____ Zip Code _____

Phone _____ Fax _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL **BUILDING DESCRIPTION - RESIDENTIAL**

BUILDING CHARACTERISTICS		UTILITIES	
Height:		Water Supply:	
No. of stories:		Public <input type="checkbox"/>	
Gross area, sq. ft. per floor:		Private <input type="checkbox"/>	
Use group:		Sewage Disposal:	
Construction type:		Public <input type="checkbox"/>	
Reinforced Concrete <input type="checkbox"/>		Private <input type="checkbox"/>	
Structural Steel <input type="checkbox"/>		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	
Masonry <input type="checkbox"/>		Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	
Wood Frame <input type="checkbox"/>		Heating System:	
State Certified Modular <input type="checkbox"/>		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"/>	
		Full <input type="checkbox"/>	
		Partial <input type="checkbox"/>	
		Other Suppression <input type="checkbox"/>	
		# of Heads _____	

BUILDING CHARACTERISTICS		UTILITIES	
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>		Water Supply:	
Depth _____ Width _____		Public <input checked="" type="checkbox"/>	
1st floor: _____		Private <input type="checkbox"/>	
2nd floor: _____		Sewage Disposal:	
Basement: _____		Public <input checked="" type="checkbox"/>	
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>		Private <input type="checkbox"/>	
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>		Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
No. of Bedrooms _____		Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Multi-family dwellings:		Heating System:	
No. of efficiency units: _____		Electric <input type="checkbox"/> Oil <input type="checkbox"/>	
No. of 1 BR units: _____		Natural Gas <input checked="" type="checkbox"/>	
No. of 2 BR units: _____		Propane Gas <input type="checkbox"/>	
No. of 3 BR units: _____		Sprinkler system: N/A <input type="checkbox"/>	
Other Structure: <u>ADDITION</u>		NFPA #13D _____	
Dimensions: <u>8' x 12'</u>		NFPA #13R _____	
Footings: <u>2' x 16' CONTINUOUS</u>		Other: _____	
Roof: <u>Cable</u>			
State Certified Modular <input type="checkbox"/>			
Manufactured Home <input type="checkbox"/>			

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 THEREON; (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 THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature John M. Watts Print Name John M. Watts
 Title/Company President, Coastal Builders, Inc. Date 4/14/02

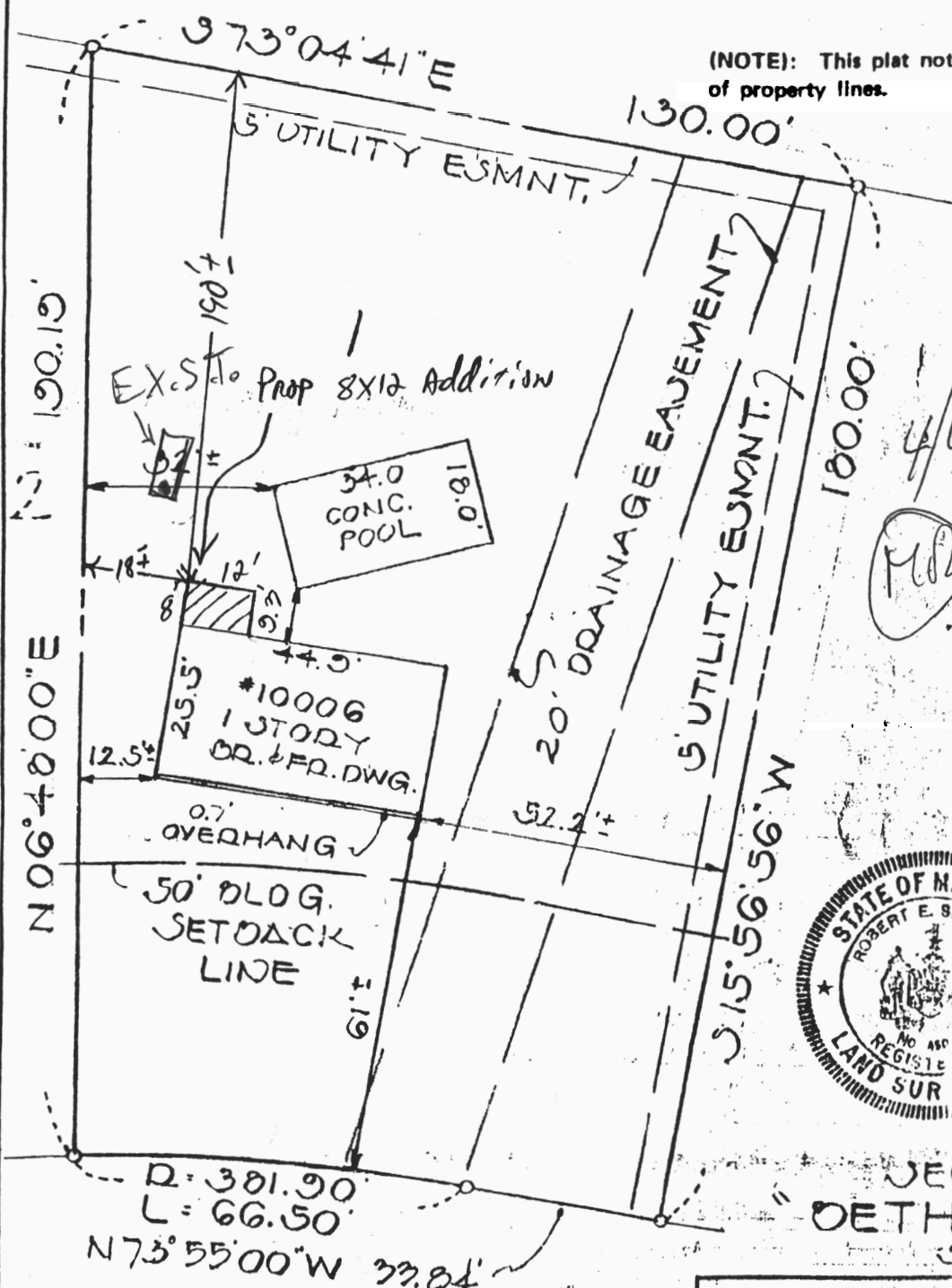
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
**** PLEASE WRITE NEATLY AND LEGIBLY. ****
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPER
<input checked="" type="checkbox"/> Land Development, DPZ			Front: _____	Filing fee \$ <u>7.45</u>
<input type="checkbox"/> State Highways			Rear: _____	Permit fee \$ _____
<input checked="" type="checkbox"/> Building Official	<u>4/14/02</u>	<u>Mark Miller</u>	Side: _____	Excise tax \$ _____
<input checked="" type="checkbox"/> Dev. Engineering, DPZ	<u>4/14/02</u>		Side St.: _____	Sub-total paid \$ _____
<input type="checkbox"/> Health			All minimum setbacks met?	Add'l permit fee \$ _____
<input type="checkbox"/> Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>4.2</u>
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>14443</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # <u>62119</u>
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
			Lot Coverage for New Town Zone _____	Accepted by <u>[Signature]</u>
			SDP/Red-line approval date _____	

This is to certify that I have surveyed the property shown on this Plat for the purpose of locating the improvements on said lot and said improvements are located as shown.

Robert E. Spellman
SURVEYOR.

(NOTE): This plat not to be used for physical location of property lines.



Sitzman Addition
1006 Fox Den Road
COASTAL BUILDERS
410-461-9908

4/4/02 NO OBJ. TO
KIT. EXPANSION,
POOL IN
SEPTIC REPAIR
AREA BUT
PUB. SEWER
AVAIL.



SECTION 1
"DETHANY MANOR"
9/30

FOX DEN ROAD
(50' WIDE)

SPELLMAN, LARSON & ASSOCIATES, INC.
110 JEFFERSON BLDG., TOWSON, MARYLAND

SCALE: 1" = 30' APRIL 15, 1976

CECILIA SITZMAN