

Health copy

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	<b>HOWARD COUNTY PERMIT APPLICATION</b>	<b>PERMIT NUMBER</b> B00139827
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Building Address <u>5029 Durham Rd EAST</u> <u>Columbia md 21044</u>	Property Owner's Name <u>Wesley W DAVIS</u>
Suite/Apt. #: _____ SDP/WP/Petition #: _____	Address <u>5029 Durham Road East</u>
Census Tract <u>6054</u> Subdivision _____	City <u>Columbia</u> State <u>md</u> Zip Code <u>21044</u>
Section _____ Area _____ Lot <u>13</u>	Home Phone <u>410 997 3315</u> Work Phone <u>301 674 7663</u>
Tax Map <u>30</u> Parcel <u>321</u> Grid _____	Applicant's Name & Mailing Address, (if other than stated hereon): <u>call w #</u>
Zoning <u>R-20</u> Map Coordinates <u>15F3</u> Lot size _____	Phone <u>301 674 7663</u> Fax <u>410 997 3315</u>

Existing Use <u>SFD</u>	Contractor Company <u>Owner</u>
Proposed Use <u>Attached garage</u>	Contact Person _____
Estimated Construction Cost \$ <u>26,000</u>	Address _____
Description of Work <u>2500 sq ft two car garage with Rec Room &amp; bath over top.</u>	City _____ State _____ Zip Code _____
	License No. _____ Phone _____ Fax _____

Occupant or Tenant <u>Owner</u>	Engineer or Architect Company _____
Contact Name _____	Contact Person _____
Address _____	Address _____
City _____ State _____ Zip Code _____	City _____ State _____ Zip Code _____
Phone _____ Fax _____	Phone _____ Fax _____

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private	1st floor: Depth <u>30'</u> Width <u>24'</u>	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	2nd floor: <u>30'</u> <u>24'</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Basement: _____	Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/>	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas <input type="checkbox"/>
<input type="checkbox"/> State Certified Modular	Sprinkler system: N/A <input type="checkbox"/>	Crawl space <input type="checkbox"/> Slab on Grade <input checked="" type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/>
	<input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____	No. of Bedrooms <u>0</u>	_____ NFPA #13D _____ NFPA #13R _____ Other: _____
		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: _____	
		Footings: _____	
		Roof: _____	
		<input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	

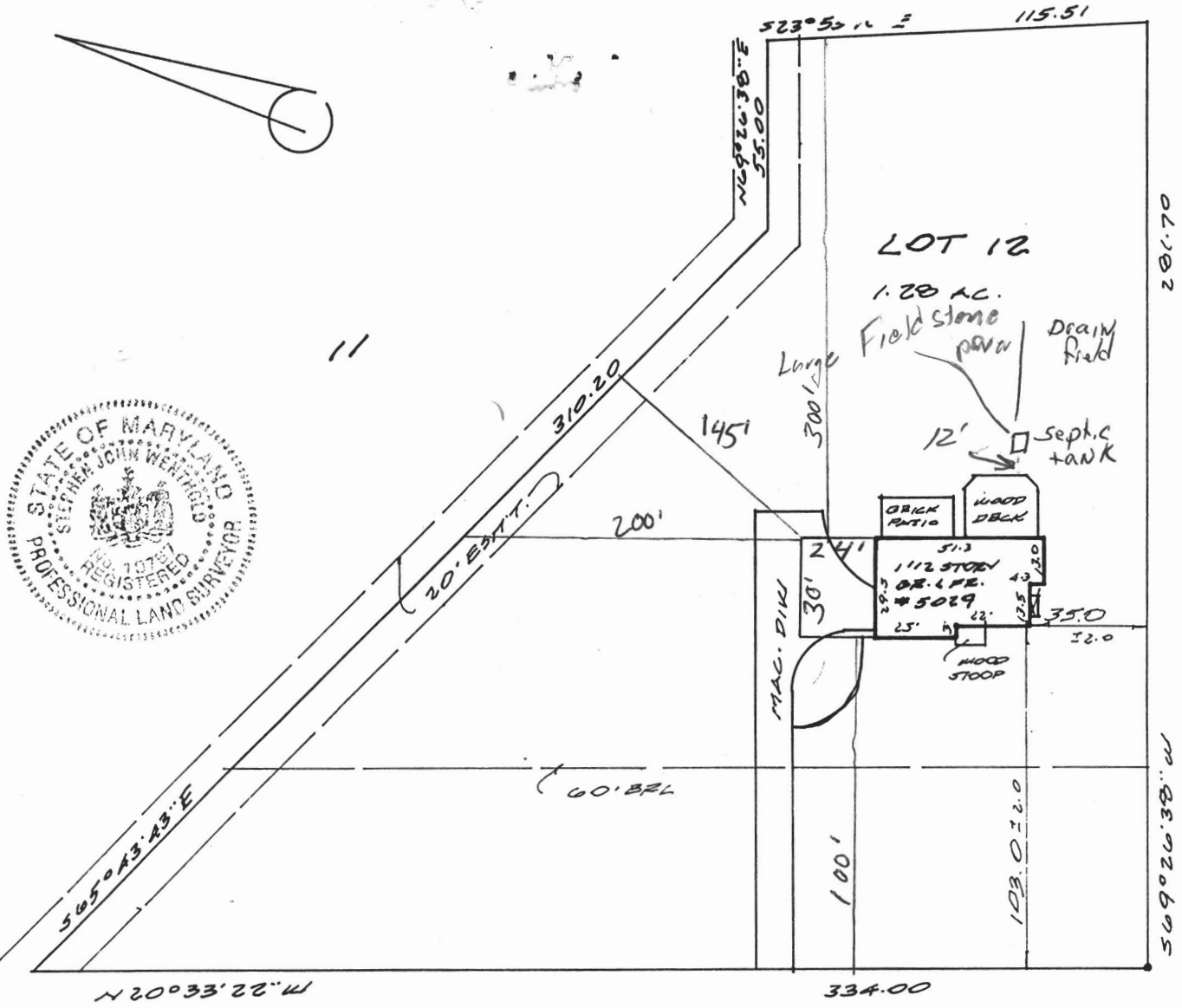
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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.

<u>Wesley W Davis</u> Applicant's Signature	<u>Wesley W DAVIS</u> Print Name
_____	<u>10/9/02</u> <u>12:30-02</u> 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#
<input checked="" type="checkbox"/> Land Development, DPZ			Front: _____	33268
<input type="checkbox"/> State Highways			Rear: _____	Filing fee \$ <u>25</u>
<input checked="" type="checkbox"/> Building Official			Side: _____	Permit fee \$ _____
<input checked="" type="checkbox"/> Dev. Engineering, DPZ			Side St.: _____	Excise tax \$ _____
<input checked="" type="checkbox"/> Health	<u>1-10-03</u>	<u>Kacey Noonan</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per. fee \$ _____
<input type="checkbox"/> Fire Protection			Is Estimator Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
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 \$ _____
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 # _____
				Validation # <u>16907</u>
				Accepted by <u>[Signature]</u>

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**DURHAM ROAD EAST**

No evidence of property corners was found. Apparent occupation is shown.

Date: 07-09-02      Scale: 1"=50'      Dmn: B.D.  
 Plat Book: 5  
 Plat No.: 61      NO TITLE REPORT FURNISHED  
 Work Order: 02-3389  
 Address: 5029 DURHAM ROAD EAST  
 District: 5  
 Jurisdiction: HOWARD COUNTY, MD

**Surveyor's Certification**

I hereby certify that the survey shown hereon is correct to the best of my knowledge and that, unless noted otherwise, it has been prepared utilizing description of record. This survey is not a boundary survey and the location of existence of property corners is neither guaranteed nor implied. Fence lines if shown, are approximate in location. This property does not lie within a 100 year flood plain according to FEMA insurance maps as interpreted by the originator unless otherwise shown hereon. Building restriction lines shown are as per available information and are subject to the interpretation of the originator.

LOCATION DRAWING  
 LOT 12  
 BLOCK B  
 SECTION ONE  
 BEAVERBROOK

*Stephen J. Wentzold*

NOTE: This plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing. This plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements. This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing.



Meridian Surveys, Inc.  
 811 Russell Avenue  
 Suite #303  
 Gaithersburg, MD 20879  
 (301) 721-9400