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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 <u>300137677</u>
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Building Address <u>6708 CORTINA DRIVE</u> <u>HIGHLAND, MARYLAND 20777</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>UC501</u> Subdivision <u>GREEN HILL MANOR</u> Section <u>THREE</u> Area _____ Lot <u>3</u> Tax Map <u>34</u> Parcel <u>354</u> Grid <u>20</u> Zoning <u>R1D10</u> Map Coordinates <u>131111</u> Lot size <u>1 ACRE</u>	Property Owner's Name <u>FLEMMING HALLMAN</u> Address <u>6708 CORTINA DRIVE</u> City <u>HIGHLAND</u> State <u>MD</u> Zip Code <u>20777</u> Home Phone <u>301-775-2337</u> Work Phone <u>301-854-1555</u> Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone <u>301-775-2337</u> Fax _____
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Existing Use <u>S.F. Residence</u> Proposed Use <u>SHAPE</u> Estimated Construction Cost \$ <u>17,000.00</u> Description of Work <u>ERECT A POLE</u> <u>BUILDING GARAGE 3</u> <u>W/ Motor Home</u>	Contractor Company <u>NA</u> <u>Orphan</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ License No. _____ Phone _____ Fax _____
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Occupant or Tenant <u>FLEMMING M. HALLMAN</u> Contact Name <u>FLO HALLMAN</u> Address <u>6708 CORTINA DRIVE</u> City <u>Highland</u> State <u>MD</u> Zip Code <u>20777</u> Phone <u>301-775-2337</u> Fax _____	Engineer or Architect Company <u>NA</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
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BUILDING DESCRIPTION - COMMERCIAL	BUILDING DESCRIPTION - RESIDENTIAL
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<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Building Characteristics</th> <th style="width:50%;">Utilities</th> </tr> <tr> <td style="padding: 5px;"> Height: _____ No. of stories: <u>ONE</u> 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 checked="" type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular </td> <td style="padding: 5px;"> 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: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <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 _____ </td> </tr> </table>	Building Characteristics	Utilities	Height: _____ No. of stories: <u>ONE</u> 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 checked="" 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: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <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 _____	<table border="1" style="width:100%; 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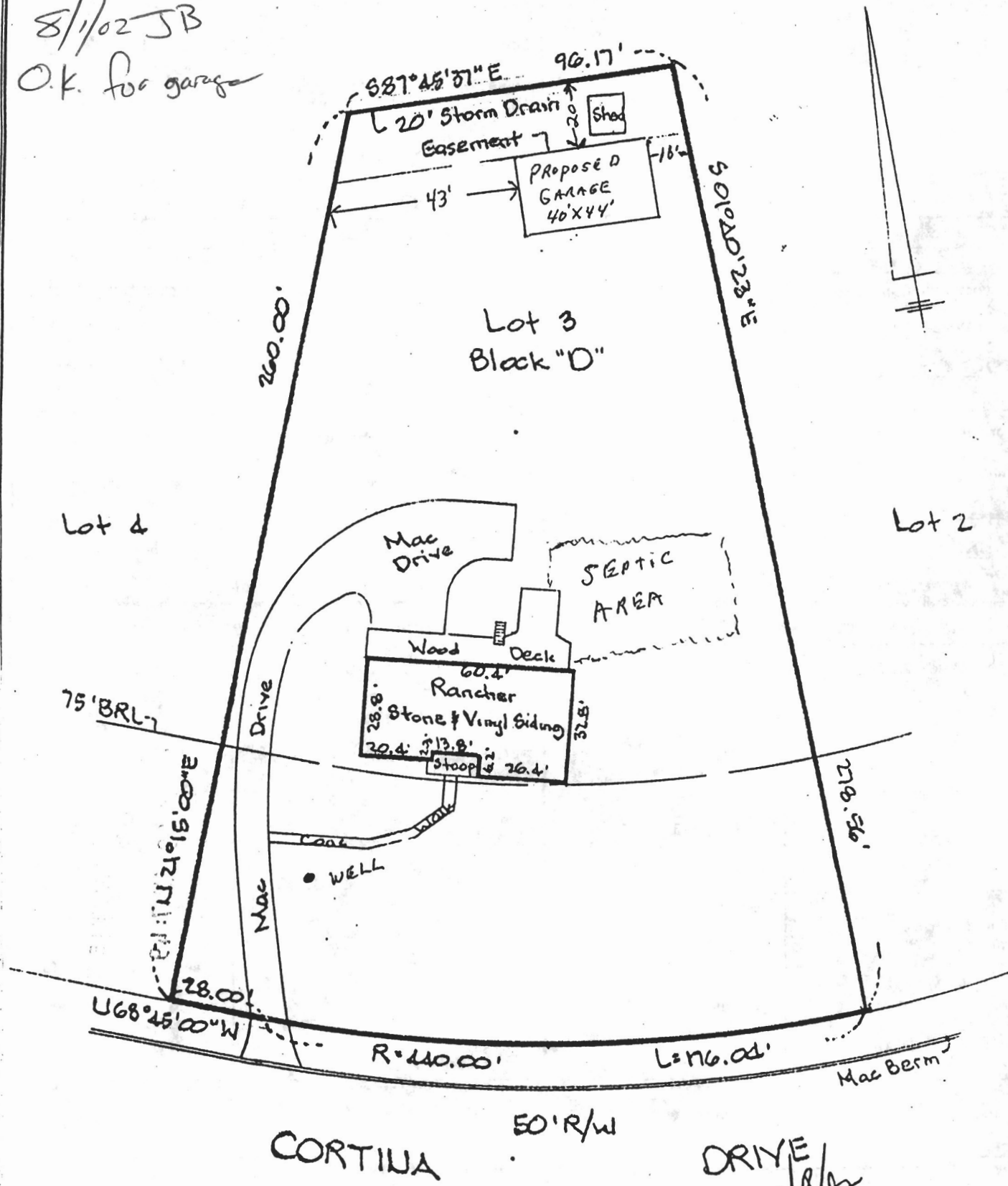
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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>Flo Hallman</u> Applicant's Signature	<u>FLO HALLMAN</u> Print Name
<u>Self</u> Title/Company	<u>July 2, 2002 7-25-02</u> Date

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

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#: <u>55655</u>
<input checked="" type="checkbox"/> Land Development, DPZ			Front: _____	Filing fee \$ <u>25</u>
<input checked="" type="checkbox"/> State Highways			Rear: _____	Permit fee \$ _____
<input checked="" type="checkbox"/> Building Official			Side: _____	Excise tax \$ _____
<input checked="" type="checkbox"/> Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
<input checked="" type="checkbox"/> Health <u>8/1/02</u> <u>JPLM.</u>			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
<input checked="" type="checkbox"/> Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
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"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	Check # <u>_____</u>
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # _____
Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA			Accepted by _____	

8/1/02 JB
 O.K. for garage



CORTINA DRIVE
 50' R/W
 24.7' Mac Paving
 4/8/02



LOCATION DRAWING
 ADDRESS: #6708 CORTINA DRIVE HOWARD COUNTY, MD.
 DEED REF.: 1547/80 PLAT REF.: 30/32 SUBDIVISION: "GREEN HILL MANOR"
 LOT: 3 BLOCK: 'D' SECTION: THREE FLOOD ZONE: C 240044-0032 SCALE: 1"=40'

1) THIS DRAWING 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 TRANSFER OR FINANCING OF PROPERTY AND HAS BEEN PREPARED FOR TITLE PURPOSES ONLY, WITHOUT THE BENEFIT OF A TITLE REPORT.
 2) THIS DRAWING IS NOT THE PRODUCT OF A BOUNDARY SURVEY AND THEREFORE IS NOT TO BE RELIED UPON FOR THE LOCATION OF EASES, GARAGES, DRIVE, ETC.

B00137970

Building Address <u>6708 Cortina Dr.</u> <u>Highland Md. 20777</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision <u>Green Hill Manor</u> Section <u>3</u> Area _____ Lot <u>3</u> Tax Map <u>34</u> Parcel <u>357</u> Grid <u>20</u> Zoning <u>BR-D10</u> Coordinates <u>13 H 11</u> Lot size _____	Property Owner's Name <u>Florence Hallman</u> Address <u>same 6078 Cortina Dr.</u> City <u>Highland</u> State <u>Md</u> Zip Code <u>20777</u> Home Phone <u>301-854-1555</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____
Existing Use <u>SFD</u> Proposed Use <u>SFD w attached garage</u> Estimated Construction Cost \$ <u>2800</u> Description of Work <u>Build 24'w x 25' deep garage Footing block slab frame wall truss roof</u>	Contractor Company <u>Potts cons + Co. Inc</u> Contact Person <u>Jim Potts</u> Address <u>6542 Main Hollow Rd.</u> City <u>Highland</u> State <u>Md</u> Zip Code <u>20777</u> License No. <u>5711</u> Phone <u>410-531-6650</u> Fax <u>301-854-2862</u>
Occupant or Tenant _____ Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company <u>N/A</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics		Utilities	
Height:		Water Supply:	
No. of stories:		Public <input type="checkbox"/>	Private <input type="checkbox"/>
Gross area, sq. ft. per floor:		Sewage Disposal:	
Use group:		Public <input type="checkbox"/>	Private <input type="checkbox"/>
Construction type:		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	
<input type="checkbox"/> Reinforced Concrete		Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	
<input type="checkbox"/> Structural Steel		Heating System:	
<input type="checkbox"/> Masonry		Electric <input type="checkbox"/> Oil <input type="checkbox"/>	
<input type="checkbox"/> Wood Frame		Natural Gas <input type="checkbox"/>	
<input type="checkbox"/> State Certified Modular		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 checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>		Water Supply:	
Depth _____ Width _____		Public <input type="checkbox"/>	Private <input checked="" type="checkbox"/>
1st floor:		Sewage Disposal:	
2nd floor:		Public <input type="checkbox"/>	Private <input checked="" type="checkbox"/>
Basement:		Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>		Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>		Heating System:	
No. of Bedrooms _____		Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/>	
Multi-family dwellings:		Natural Gas <input type="checkbox"/>	
No. of efficiency units: _____		Propane Gas <input type="checkbox"/>	
No. of 1 BR units: _____		Sprinkler system: N/A <input type="checkbox"/>	
No. of 2 BR units: _____		NFPA #13D _____	
No. of 3 BR units: _____		NFPA #13R _____	
Other Structure: _____		Other: _____	
Dimensions: _____			
Footings: _____			
Roof: _____			
<input type="checkbox"/> State Certified Modular			
<input type="checkbox"/> Manufactured Home			

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[Signature]
Applicant's Signature
James Potts
Title/Company

James Potts
Print Name
8/14/02
Date

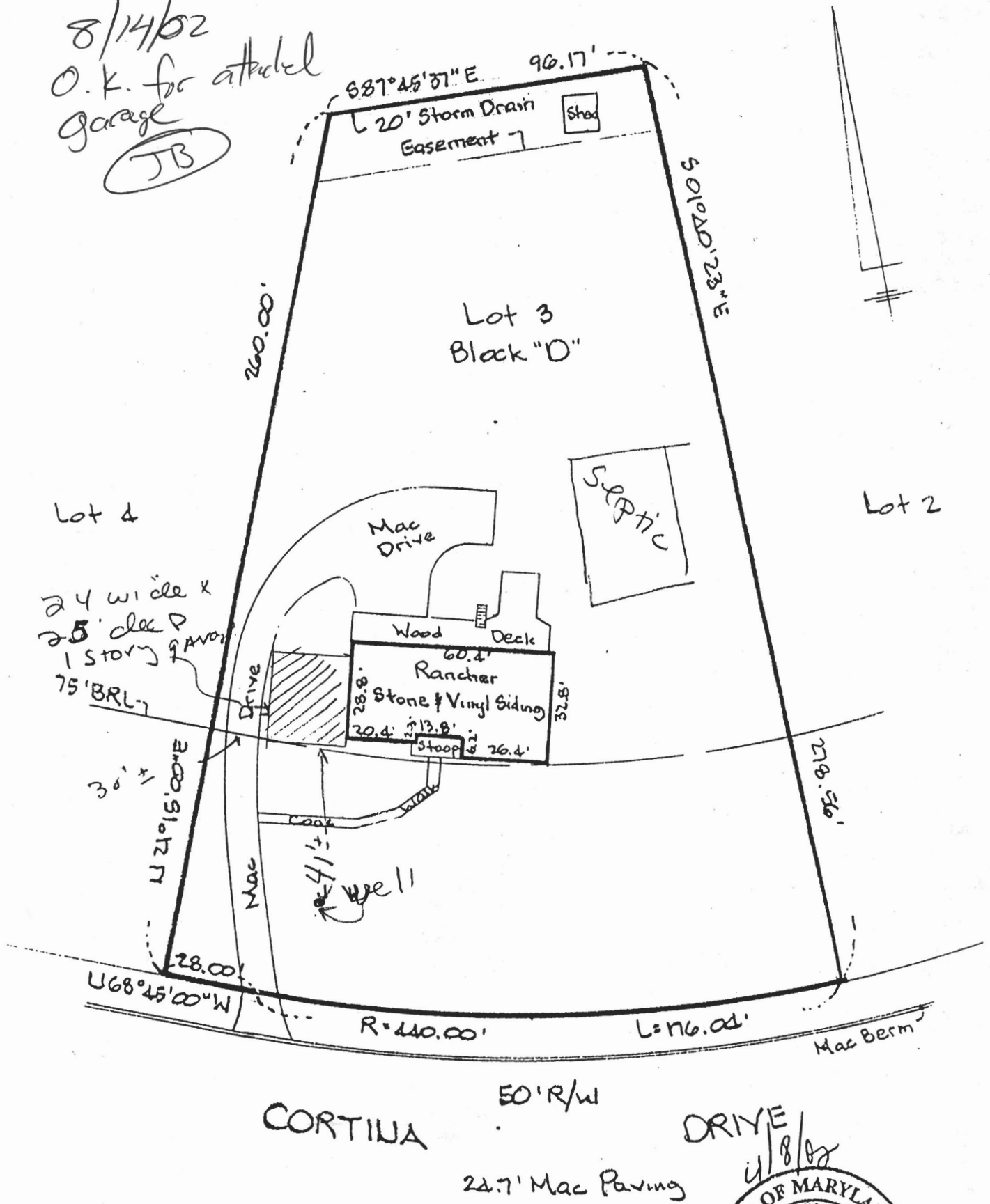
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** PLEASE WRITE NEATLY AND LEGIBLY. **

FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
<input checked="" type="checkbox"/> Land Development, DPZ			Front: _____	55653
<input checked="" type="checkbox"/> State Highways			Rear: _____	Filing fee \$ _____
<input checked="" type="checkbox"/> Building Official	<u>8/14/02</u>	<u>[Signature]</u>	Side: _____	Permit fee \$ <u>101</u>
<input checked="" type="checkbox"/> Dev. Engineering, DPZ			Side St.: _____	Excise tax \$ <u>150</u>
<input checked="" type="checkbox"/> Health	<u>8/14/02</u>	<u>[Signature]</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per fee \$ _____
<input checked="" type="checkbox"/> Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>613</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 \$ _____
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>11650</u>
				Validation # <u>10262</u>

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

8/14/02
 O.K. for attached
 garage
 JB



LOCATION DRAWING

ADDRESS: #6708 CORTINA DRIVE HOWARD COUNTY, MD.

DEED REF: 1847/80 PLAT REF: 30/02 SUBDIVISION: "GREEN HILL MANOR"

LOT: 3 BLOCK: 'D' SECTION: THREE FLOOD ZONE: C 240044-00328 SCALE: 1"=40'

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