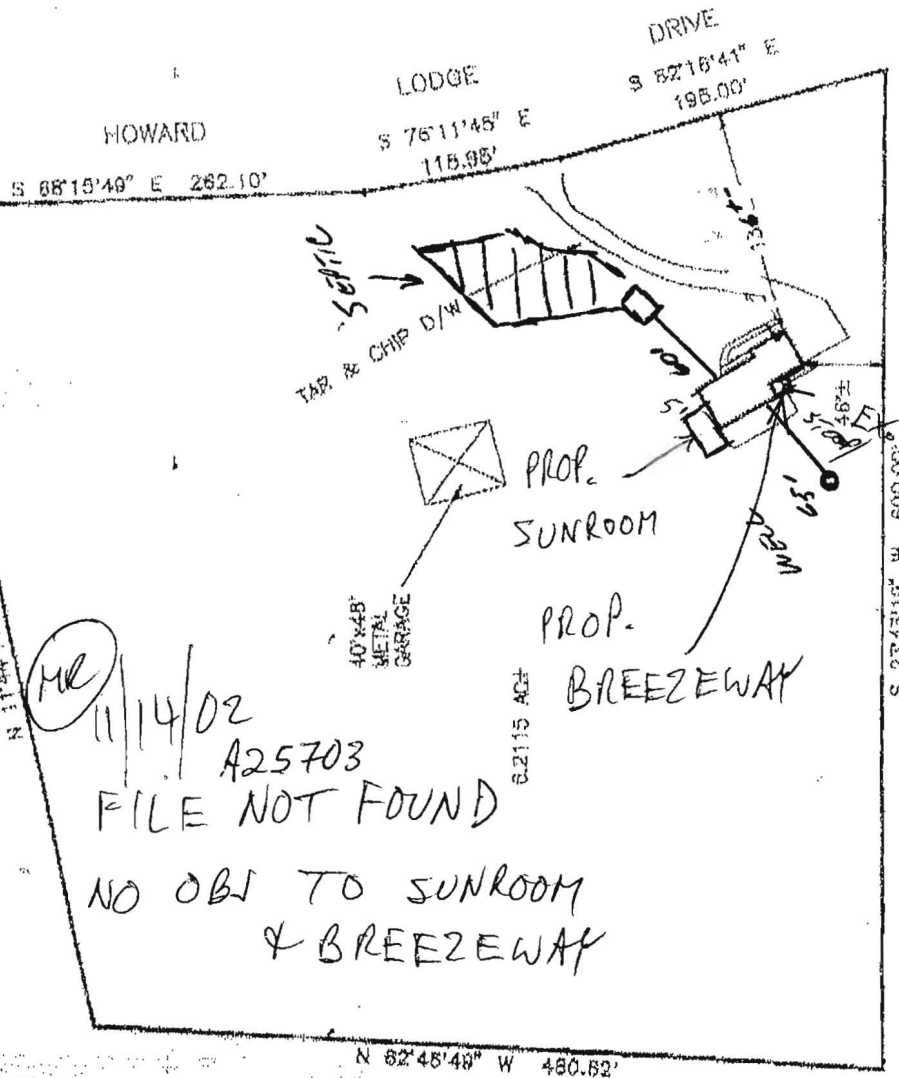


P.O.B.
CENTER OF
BURY/W

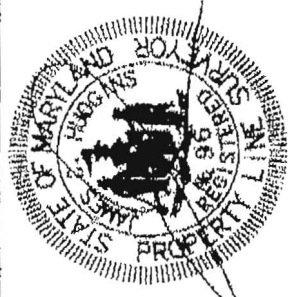


ME
11/14/02
A25703
FILE NOT FOUND
NO OBJ TO SUNROOM
& BREEZEWAY

LOCATION DRAWING
12455 HOWARD LODGE DRIVE
HOWARD COUNTY, MARYLAND
3RD ELECTION DISTRICT

Scale: 1" = 110'
Date: 09-10-02
Field By: J.B.C.
Drawn By: J.D.C.
Drawing # HSC05766

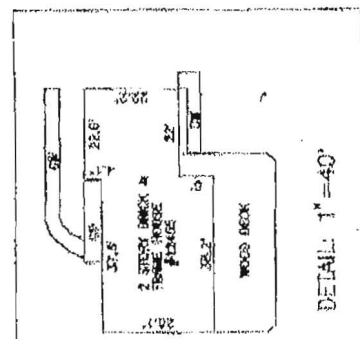
NTT Associates, Inc.
18206 Old Frederick Road
Mt. Airy, Maryland 21779
Ph: (410)442-2031
Fax Nos: (410)442-1318



J. Carl Hudgins
Property Line Surveyor #035

NOTES:
1) B.L.L. information if shown was obtained from existing record plat or book. Accuracy and is not guaranteed by NTT, Inc.
2) NT, Inc. does not warrant the information shown on this plat.
3) NT, Inc. does not warrant the information shown on this plat.
4) NT, Inc. does not warrant the information shown on this plat.
5) NT, Inc. does not warrant the information shown on this plat.
6) NT, Inc. does not warrant the information shown on this plat.

No property control found.



Subject: property is shown in Zone C on the RRW Map of Howard County, Maryland on Community Panel 240044 00098 Effective December 4, 1986

This is to certify that I have surveyed the property shown hereon, being known as 12455 HOWARD LODGE DRIVE and recorded among the land records of Howard County, Maryland in Liber 915 folio 741 for the purpose of locating the improvements thereon.

This plat is of benefit to the 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 purposes. This plat is not to be relied upon for the establishment of location of fences, porches, walkways, or other existing or future structures. 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 for securing financing with respect thereto.

A25703 P29017

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>B00139382</u>
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Building Address <u>12455 HOWARD LODGE RD.</u> <u>EM SYLVESTERVILLE, MD. 21784</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>603000</u> Subdivision _____ Section _____ Area _____ Lot <u>Par 1</u> Tax Map <u>9</u> Parcel <u>218</u> Grid <u>12</u> Zoning <u>RR</u> Map Coordinates <u>5E9</u> Lot size <u>6.2</u>	Property Owner's Name <u>CURRY, SKIP + KATHLEEN</u> Address <u>12455 HOWARD LODGE RD.</u> City <u>SYLVESTERVILLE</u> State <u>MD.</u> Zip Code <u>21784</u> Home Phone _____ Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): <u>STATED ABOVE</u> Phone _____ Fax _____
--	--

Existing Use <u>SINGLE FAMILY RESIDENCE</u> Proposed Use <u>SAME</u> Estimated Construction Cost \$ <u>20,000</u> Description of Work <u>ADD SUNROOM PER PLAN</u> <u>TO EXISTING 2-STORY COLONIAL</u> <u>ADJACENT W/ 828 BACKWAY BEHIND GARAGE.</u>	Contractor Company <u>THE GRIFFIN GRUPO LLC</u> Contact Person <u>STEVE GRIFFIN</u> Address <u>4231 LINTHICUM RD.</u> City <u>DAYTON</u> State <u>MD.</u> Zip Code <u>21036</u> License No. <u>1307</u> Phone <u>(410) 984-6944</u> Fax <u>(410) 531-8070</u>
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Occupant or Tenant <u>CURRY, SKIP + KATHLEEN</u> Contact Name _____ Address <u>SAME AS ABOVE</u> City _____ State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company <u>KNOTTMAN BLUMS</u> Contact Person _____ Address <u>8418 BELLAIR CRT.</u> City <u>BALTIMORE</u> State <u>MD.</u> Zip Code <u>21236</u> Phone <u>(410) 663-7866</u> Fax _____
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BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____ No. of stories: _____ 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 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	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: <u>22</u> <u>15</u> 2nd floor: <u>N/A</u> <u>N/A</u> Basement: <u>22</u> <u>15</u> 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> 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	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> 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.

<u>Signature</u> Applicant's Signature <u>Principal</u> Title/Company <u>MR 11/14/02</u>	<u>STEPHEN P. GRIFFIN</u> Print Name <u>11/14/02</u> Date
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Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
**** PLEASE WRITE NEATLY AND LEGIBLY. ****
FOR OFFICE USE ONLY

