

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

BO7004883

Building Address 7394 Hallmark Rd.
Clarksville, MD 21029
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot _____
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Amen Young
 Address 7394 Hallmark Rd.
 City Clarksville State MD Zip Code 21029
 Home Phone 201-776-1110 Work Phone 703-601-9430
 Applicant's Name & Mailing Address, (if other than stated hereon):

 Phone _____ Fax _____

Existing Use SEH
 Proposed Use SEH
 Estimated Construction Cost \$ 207000
 Description of Work Close in existing
porch 8'x22'

Contractor Company Renovation + Remodeling
 Contact Person Paul Hoff / Rocky Mills
 Address 1105 Hows Mill Rd.
 City Woodbine State MD Zip Code 21797
 License No. 120810
 Phone 410-549-7703 Fax _____

Occupant or Tenant Amen Young
 Contact Name Amen Young
 Address 7394 Hallmark Rd.
 City Clarksville State MD Zip Code 21029
 Phone _____ Fax _____

Engineer or Architect Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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
 Electric Yes No
 Gas Yes No
 Heating System:
 Electric Oil
 Natural Gas
 Propane Gas
 Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads

Building Characteristics
 SF Dwelling SF Townhouse
 Depth _____ Width _____
 1st floor: _____
 2nd floor: _____
 Basement:
 Finished Basement Unfinished Basement
 Crawlspace Slab on Grade
 No. of Bedrooms: _____
 Height: _____
 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 Height: _____
 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: N/A
 NFPA #13D
 NFPA #13R
 Other:

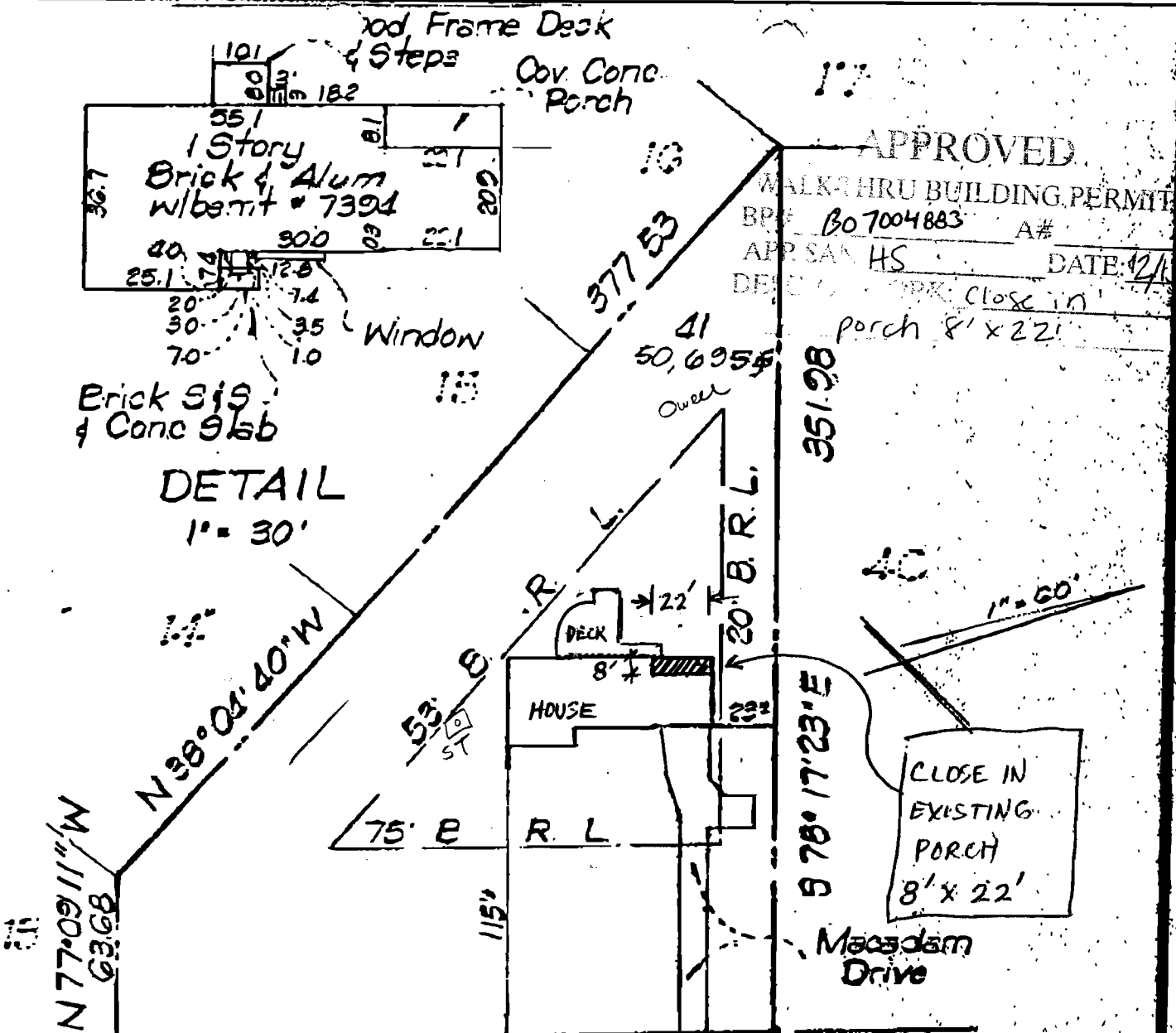
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION, (2) THAT THE INFORMATION IS CORRECT, (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO, (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED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

Paul Hoff
 Applicant's Signature
Renovation + Remodeling
 Title/Company

Justin Wood
 Print Name
12/15/07
 Date

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

AGENCY	DATE	SIGNATURE APPROVAL	DEZ SETBACK INFORMATION	PROPERTY ID
Land Development, DEZ			Front: _____	Filing fee \$ _____
State Highway			Rear: _____	Partial fee \$ _____
Building Official			Side: _____	Electrical fee \$ _____
Development DEZ <u>12/13/07</u>			Side DEZ _____	Admin. per. fee \$ _____
Public Health			All setbacks satisfied? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Fire Protection			Is Eminent Permits required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-station paid \$ _____
Is Sewerage Control Approval Required prior to Issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Health District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Business fee \$ _____
CONTINGENCY CONSTRUCTION STARTS: <input type="checkbox"/>			Let Coverage for New Town Zone _____	Check \$ _____
ONE STOP SHOP: <input type="checkbox"/>			SDP (Permit) approval date _____	Validation \$ _____
Distribution of Copies: _____	Public Health Official _____	Owner LDD, DEZ _____	Valuer, DEZ, DEZ _____	Public Health _____
_____	_____	_____	_____	_____



APPROVED
 WALK THRU BUILDING PERMIT
 BPE # 607004883 A#
 APPR SAN HS DATE: 12/13/05
 DEPT. OF PK. Close in
 porch 8' x 22'

DETAIL
 1" = 30'

CLOSE IN
 EXISTING
 PORCH
 8' x 22'

S 11° 42' 37" W 245.00
 364.4 to corner @ John Hopkins Road. 7394
 SCALE 1/4" = 15' 0"
 HALLMARK ROAD

Information shown hereon should not be relied upon for establishing boundary lines. Const. of Improvements and/or prop. lines prepared without the benefit of a title report.

NOTES: Not in flood plain as per
 Not to be used for construction. 290049-00388
 Lot corners have not been set by this survey unless otherwise indicated.

<p>1. Survey of the Hallmark survey of the property shown on the attached plat. The survey was made on the 11th day of August, 2007, and the same is hereby certified to be correct.</p>	<p>LIGHT, ELLIOTT & ASSOCIATES ENGINEERS, PLANNERS, SURVEYORS 8208 ADELPHI ROAD ADELPHI, MARYLAND 20783 422-6080</p>	<p>HOUSE LOCATION SURVEY 7994 Hallmark Road Lot 21 Block - Section 1 HALLMARK Clarkville Howard</p>
	<p>Book H1540-17 Job no. M1044 Drawn by B.H./D.W.</p>	<p>Ch. by IS Case no. 30592 Haddon</p>