

**HOWARD COUNTY
PERMIT APPLICATION**

Walk-thru
**PERMIT NUMBER
B07003988**

Building Address 12050 HALL SHOP Rd
CLARKSVILLE, MD 21029
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision _____
Section _____ Area _____ Lot _____
Tax Map _____ Parcel _____ Grid _____
Zoning RR Map Coordinates _____ Lot size 3.72

Property Owner's Name Michael Wise
Address 12050 HALL SHOP Rd
City CLARKSVILLE State MD Zip Code 21029
Home Phone 410 977-9414 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone _____ Fax _____

Existing Use Garage (SFD)
Proposed Use Storage
Estimated Construction Cost \$ 26,000.00
Description of Work Put up 8 foot fence
Build 64x30 Garage

Contractor Company CB Structures INC
Contact Person MIKI BOYER
Address 344 E Main ST
City Leola State PA Zip Code 17540
License No. MHC # 84759
Phone 1-877-756-0732 Fax _____

Occupant or Tenant _____
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

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

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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

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.

Michael Wise
Applicant's Signature
Title/Company _____

Michael Wise
Print Name
9/20/07
Date

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#
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ	<u>9/20/07</u>	<u>[Signature]</u>	Side St.: _____	Add'l per. fee \$ _____
Health			All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
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 # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies:	White: Building Official	Green: LDD, DPZ	Lot Coverage for NewTown Zone _____	
T:Name/PERMIT.FRM			SDP/Red-line approval date _____	Accepted by _____
			Yellow: DED, DPZ	Gold: SHA
			Pink: Health	

APPROVED

WALK-THRU BUILDING PERMIT

BP# 807003900 A#

APP. SAN SFO DATE: 9/20/67

DESC. OF WORK: Fence
64' x 30' Garage

Plan of a subdivision of a property of

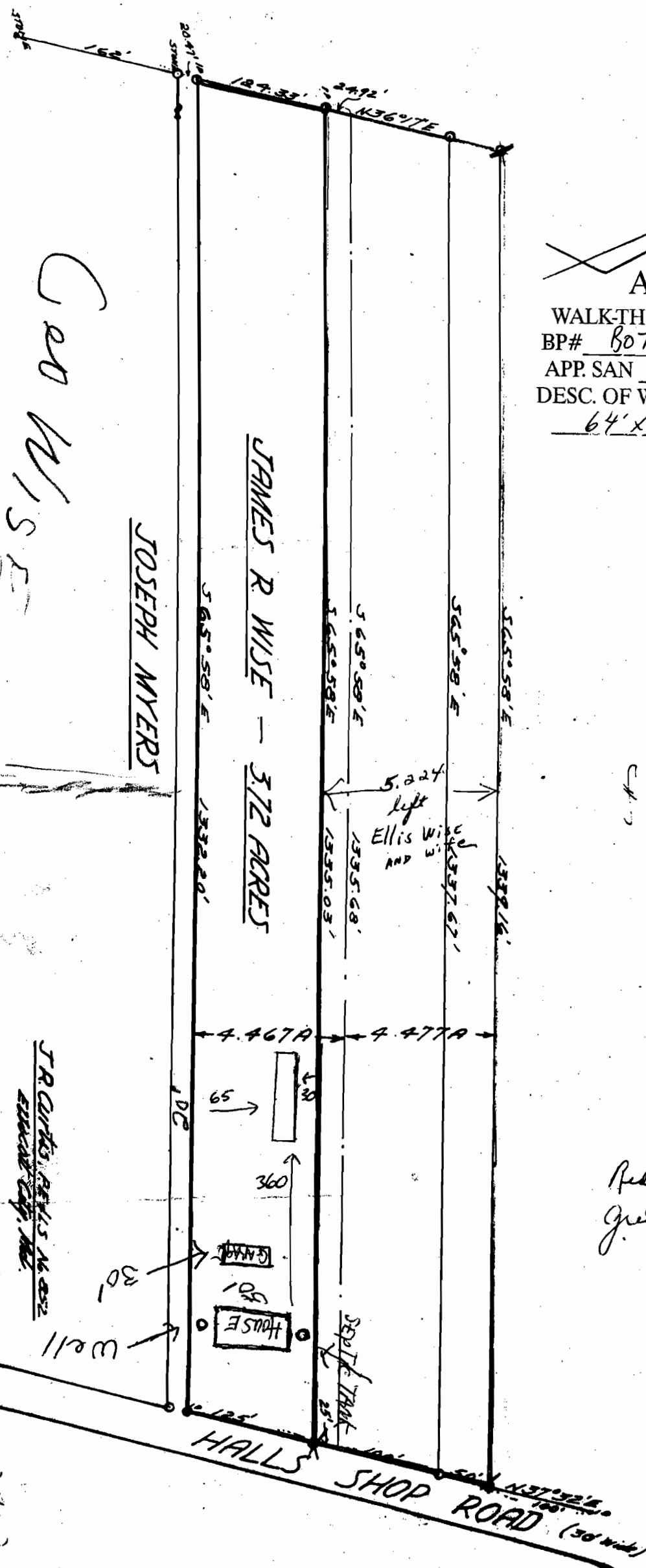
NEELSON E. JONES

Fifth ELECTION DISTRICT, HOWARD COUNTY, MD

Nov. 11, 1957

Scale: 1"=100'

Red	3.72 acres	
Green	5.224 "	
	<u>8.944</u>	
original tracts		
	4.467	8.944
	4.477	- 3.72
	<u>8.944</u>	<u>5.224</u>
		left



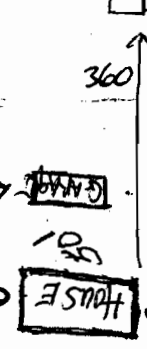
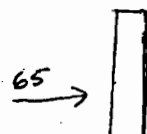
COO WISE

JOSEPH MYERS

JAMES R WISE - 3.72 ACRES

5.224
left
Ellis Wise
AND WIFE

4.467A 4.477A



SEPTIC TANK

HALLS SHOP ROAD (30' WIDE)

J.R. CURTIS REVIS N.E. 6522
ELECTION DIST. MD

3 ROAD

11/7/07

Avis L Corbin

I'm writting this letter to revise my permit
B07003988 to build a detached garage
on my property 12050 Hall Shop Rd CLARKSVILLE
MD 21029 TAX MAP 41 Parcel 258 The same
size as the one that I currently have which is
30x40 on the grounds that I will demo
the current Detached garage with in one year

cc: zoning
health

Michael Wix

11/15/07 OK 

November 7, 2007

Michael Wise
12050 Hall Shop Road
Clarksville, MD 21029-1513
410-977-9414 (C)

To: George Beisser

Re: Request to build an additional detached garage

Location: 12050 Hall Shop Road, Howard County Tax Map 41, Parcel 258:

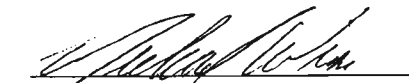
Issue: On Oct 4, 2007, I submitted a request for a permit to build a detached garage on the above stated property. Prior to the request, I had spoken to a representative at the planning and zoning commission to see what steps must be taken in regards to the changes I was planning to make on my property. The representative told me that the maximum restriction for building an additional structure is 2,200 square foot.

I submitted a proposal to build a 1,950 square feet garage but the proposal was rejected due to the size of the structure. Tamara Frank sent me a letter stating that an additional structure being built on my property could not exceed the current size of my house. This important information was not stated when I spoke to the representative at the planning and zoning commission.

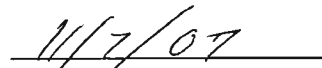
I currently have a detached garage that is 1,200 square feet. I would like to build a new garage with the same square footage to replace the existing garage. The new garage will be built on my land but it will not be built over my current garage. I plan to deconstruct my old garage within 12 calendar months of the new garage being built.

I have spent a considerable amount of time and money in order to get this project started. Please let me know what steps I must take in order to stay compliant with the planning and zoning regulations. I appreciate your consideration and look forward to hearing from you. Please feel free to contact me if you have any further questions or concerns.

Sincerely,



Michael Wise



Date



Account Identifier: District - 05 **Account Number -** 372895

Owner Information

Owner Name: WISE ELEANOR LAVINE **Use:** RESIDENTIAL
 WISE MICHAEL LAFFONTA **Principal Residence:** YES
Mailing Address: 12050 HALL SHOP RD **Deed Reference:** 1)
 CLARKSVILLE MD 21029-1513 2)

Location & Structure Information

Premises Address **Legal Description**
 12050 HALL SHOP RD 3.720 A
 CLARKSVILLE 21029 12050 HALL SHOP RD
 CLARKSVILLE

Map	Grid	Parcel	Sub District	Subdivision	Section	Block	Lot	Assessment Area	Plat No:
41	1	258						2	Plat Ref:

Special Tax Areas **Town**
Ad Valorem NO A/V, NO M/P, RURAL FIRE TAX
Tax Class

Primary Structure Built	Enclosed Area	Property Land Area	County Use
1957	980 SF	3.72 AC	
Stories	Basement	Type	Exterior
1	NO	STANDARD UNIT	BLOCK

Value Information

	Base Value	Value	Phase-in Assessments		
			As Of	As Of	As Of
			01/01/2005	07/01/2007	07/01/2008
Land	295,400	295,400			
Improvements:	68,690	68,690			
Total:	364,090	364,090	364,090	NOT AVAIL	
Preferential Land:	0	0	0	NOT AVAIL	

Transfer Information

Seller: WISE ELEANOR L **Date:** 08/31/2005 **Price:** \$0
Type: NOT ARMS-LENGTH **Deed1:** **Deed2:**
Seller: **Date:** **Price:**
Type: **Deed1:** **Deed2:**
Seller: **Date:** **Price:**
Type: **Deed1:** **Deed2:**

Exemption Information

Partial Exempt Assessments	Class	07/01/2007	07/01/2008
County	000	0	0
State	000	0	0
Municipal	000	0	0

Tax Exempt: NO **Special Tax Recapture:**
Exempt Class: * NONE *

