

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

306007631

Building Address 12819 HALL SHOP RD
HIGHLAND, MD 20777
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision _____
Section _____ Area _____ Lot _____
Tax Map _____ Parcel _____ Grid _____
Zoning RR Map Coordinates _____ Lot size _____

Property Owner's Name WILLIAM C. GEARHART
Address 12819 HALL SHOP RD
City HIGHLAND State MD Zip Code 20777
Home Phone 443 812 4522 Work Phone 410 328 6152
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone 443 812 4522 Fax _____

Existing Use RESIDENTIAL
Proposed Use RESIDENTIAL
Estimated Construction Cost \$ 1,600.00
Description of Work OPEN PORCH - DECK
12' x 20' NO STEPS - 18" AFG

Contractor Company OWNER
Contact Person BILL GEARHART
Address 12819 HSR
City HIGHLAND State MD Zip Code 20777
License No. _____
Phone _____ Fax _____

Occupant or Tenant _____
Contact Name BILL GEARHART
Address 12819 HSR
City HIGHLAND State MD Zip Code 20777
Phone 443 812 4522 Fax _____

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

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: <u>15'</u>	Water Supply: _____ Public _____ Private <u>W/A</u>
No. of stories: <u>1</u>	Sewage Disposal: _____ Public _____ Private <u>W/A</u>
Gross area, sq. ft. per floor: <u>1100</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ <input checked="" type="checkbox"/> Wood Frame _____ State Certified Modular _____	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth Width 1st floor: <u>24</u> <u>42</u> 2nd floor: <u>X</u> <u>X</u> Basement: <u>24</u> <u>42</u>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>3</u> Height: <u>15'</u> Multi-family dwellings: _____ No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ State Certified Modular _____ Manufactured Home _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: _____ Electric <input checked="" 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"/> 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.

William C. Gearhart
Applicant's Signature

WILLIAM C. GEARHART
Print Name

Title/Company

11-15-06
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>11/13/06</u>	<u>[Signature]</u>	Side St.: _____	Add'l per. fee \$ _____
Health			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
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 New Town Zone: _____	Check: # _____
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 _____			

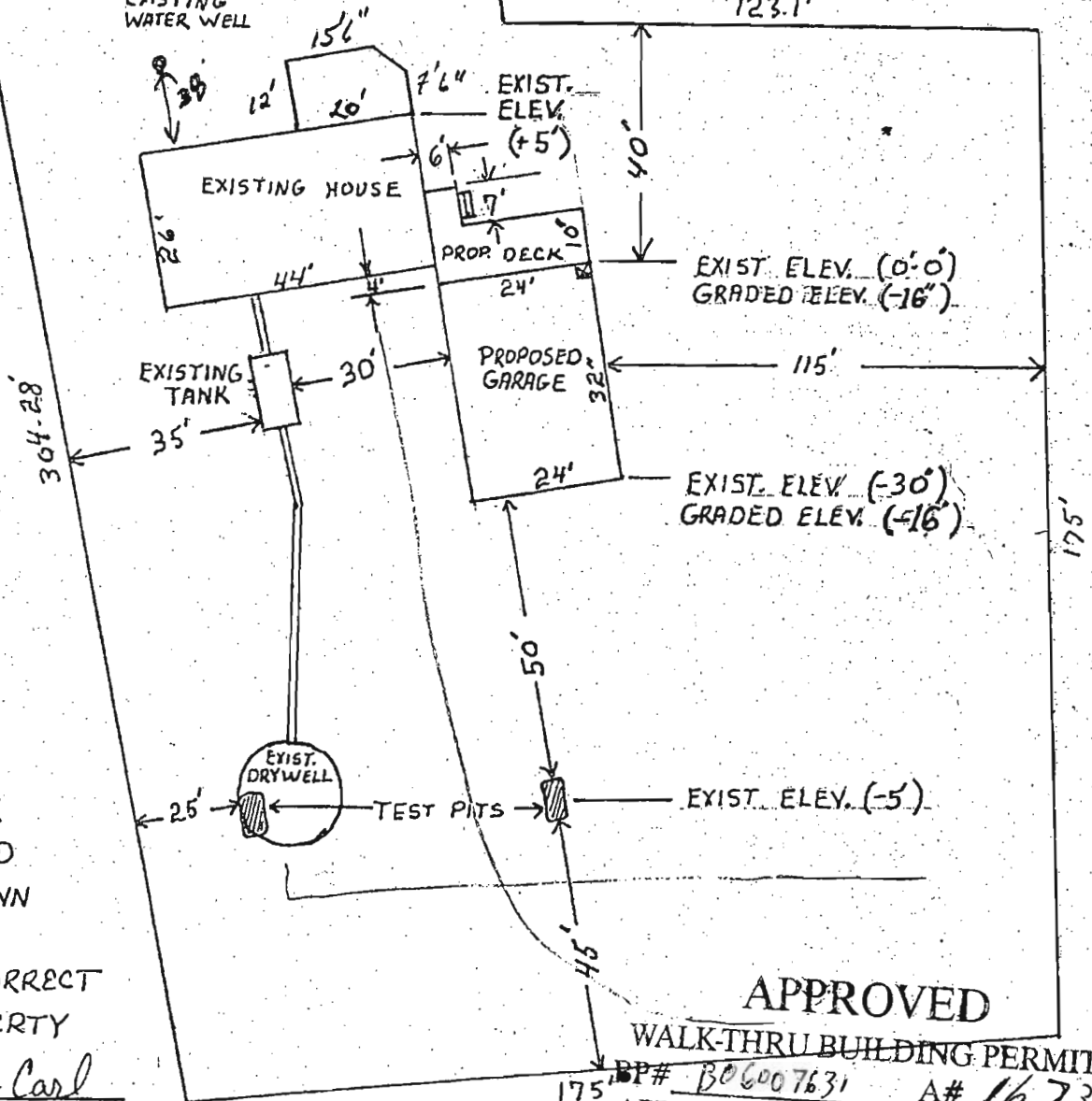
D. CARL PROPERTY
12819 HALL SHOP RD
1.016 ACRES

A16734
B.P. 45849

3/12/81
sketch O.K. J.S.

All Elevations Based On Marked
Corner Of Proposed Garage At
Zero Elevation
123.1'

EXISTING
WATER WELL



I CERTIFY THE
ELEVATIONS AND
DISTANCES SHOWN
HERE-ON TO BE
ACTUAL AND CORRECT
FOR THIS PROPERTY

signed David H Carl

APPROVED

WALK-THRU BUILDING PERMIT

BP# B06007631 A# 16734
APP. SAN SFD DATE: 11/15/06
DESC. OF WORK: 12' x 20'
Deck