

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

807004460

Building Address 16832 Hardy Rd
MT AIRY
 Suites/Apt. #: _____ SDP/NWP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot _____
 Tax Map _____ Parcel B Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name John Gordy
 Address 16832 Hardy Rd
 City MT Airy State MD Zip Code 21771
 Home Phone 410-489-9376 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ 4,000
 Description of Work ADD AT 1'X4' BUMP OUT
ON THE RIGHT SIDE FOR A GAS
FIREPLACE

Contractor Company DEITZBAUGH CONSTRUCTION
 Contact Person FRANK DEITZBAUGH
 Address 2904 BACK ACRE CIR #105
 City MT Airy State MD Zip Code 21771
 License No. 3801
 Phone 301-703-4000 Fax 301-703-4050

Occupant or Tenant OWNER
 Contact Name SAME AS ABOVE
 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: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
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	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: <u>28</u> <u>49</u> 2nd floor: <u>28</u> <u>49</u> Basement: <u>28</u> <u>49</u>	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Finished Basement <input type="checkbox"/> Unfinished Basements <input checked="" type="checkbox"/> Crawli space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: <u>3</u> Height: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input 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 THERE TO; (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.

[Signature]
 Applicant's Signature
PRESIDENT
 Title/Company

FRANK DEITZBAUGH
 Print Name
10/31/07
 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 USE
Land Development DPZ			Front _____	Filing fee \$ _____
State Highway			Rear _____	Permit fee \$ _____
Building Official			Side _____	Enroll fee \$ _____
Dev. Enforcement DPZ			Side St _____	Adm. pers. fee \$ _____
Health	<u>10/31/07</u>	<u>[Signature]</u>	All maximum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Secondary 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 \$ _____
			Historic District?	Validation \$ _____
			YES <input type="checkbox"/> NO <input type="checkbox"/>	
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>			Lot Coverage for New Town Zone _____	
ONE STOP SHOP <input type="checkbox"/>			SDP Red-line approval date _____	Accepted by _____
Distribution of Copies: _____	White: Building Official	Green: LDD, DPZ	Yellow: DED, DPZ	Pink: Health
				Gold: SPA



PRIVATE 30 WIG. DRIVEWAY
ACCESS EASEMENT FOR LOTS
1 THRU 5 PRESERVATION PRCL "B"

APPROVED

WALKTHRU BUILDING PERMIT

BP# 007004460

A# 50563-E

APP. SAN SF

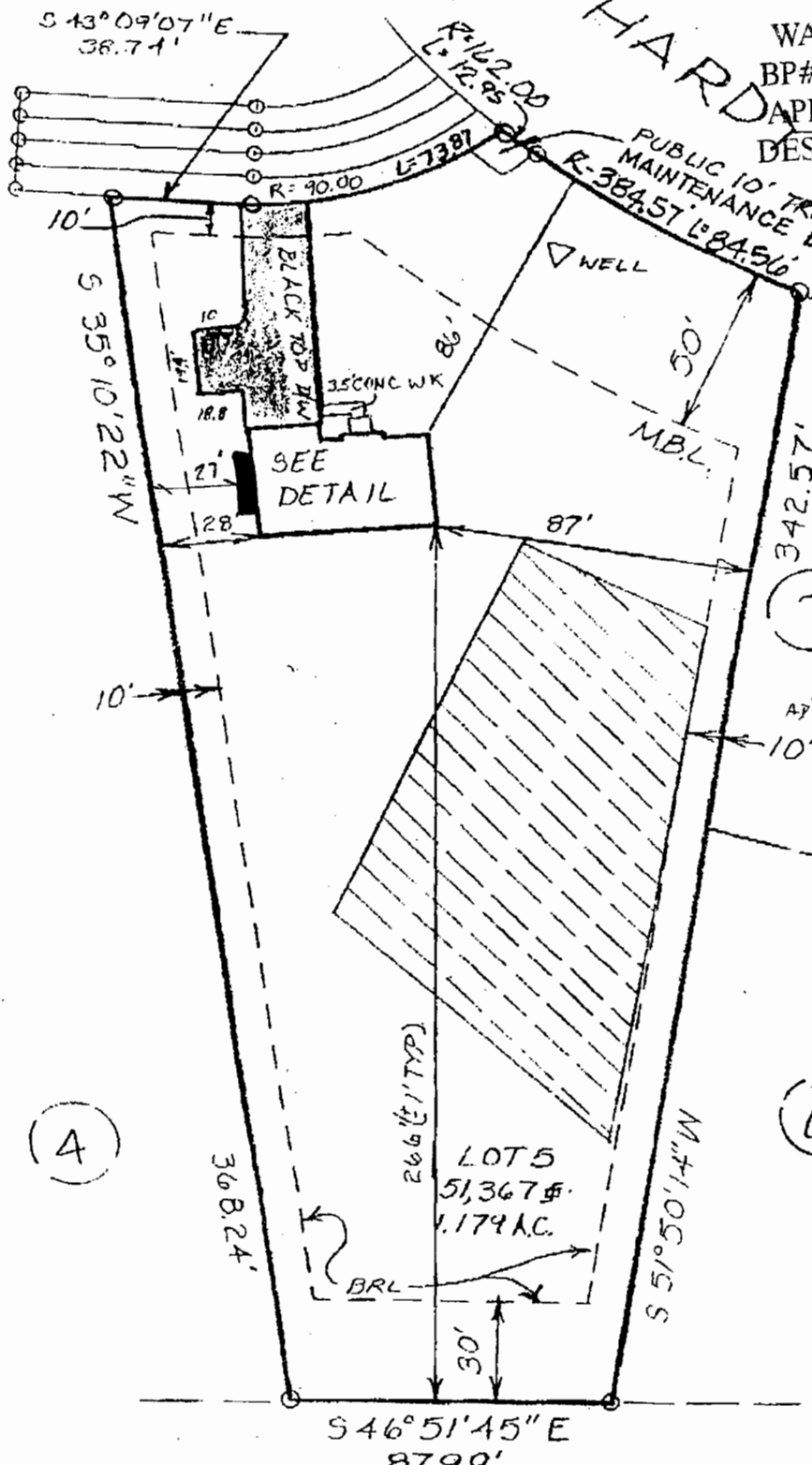
DATE: 10/31/07

DESC. OF WORK:

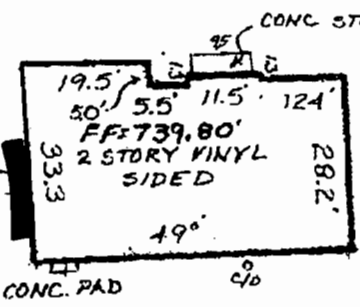
1 x 41
fire place addition

HARDY ROAD

PUBLIC 10' TREE
MAINTENANCE EASEMENT



DETAIL SCALE
1" = 30'



PROPOSED PLOT PLAN
 JOHN GOODY
 16832 HARDY RD
 100 ACY #1277
 410-439-9376



2904 Back Arce Cir, Ste 105 (301) 703-4000
 Mc Airy, MD 21771 www.dertzbaugh.com