

<small>DEPARTMENT OF BUREAU OF PERMITS AND INSPECTION HOWARD COUNTY DEPARTMENT OF BUREAU OF PERMITS AND INSPECTION 14001 W. 11th Street, Room 1111 Annapolis, MD 21401</small>		HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B07003102
Building Address <u>16840 HAROY Rd</u> <u>MT AIRY MD</u>		Property Owner's Name <u>HELEN BRANSON</u> Address <u>16840 HAROY Rd</u>	
Suite/Apt. #: _____ SDPWP/Petition #: _____ Census Tract _____ Subdivision <u>BRIDLE WOOD</u> Section <u>1</u> Area _____ Lot <u>6</u> Tax Map _____ Parcel _____ Grid _____ Zoning _____ Map Coordinates _____ Lot size <u>1.020 AC</u>		City <u>MT AIRY</u> State <u>MD</u> Zip Code <u>21771</u> Home Phone <u>410-489-5803</u> Work Phone _____ Applicant's Name & Mailing Address (if other than stated hereon): <u>DANIEL SHAEFFER</u> Phone <u>301-662-8403</u> Fax <u>301-473-5110</u>	
Existing Use <u>SUN DECK</u> Proposed Use <u>PORCH</u> Estimated Construction Cost \$ <u>25,000.00</u> Description of Work <u>BUILD ROOF OVER EXISTING DECK 12x35 Trapezoid shape</u>		Contractor Company <u>D.R. SHAEFFER CONSTRUCTION</u> Contact Person <u>DAN SHAEFFER</u> Address <u>7839 RIDGE Rd</u> City <u>FREDERICK</u> State <u>MD</u> Zip Code <u>21702</u> License No. <u>4663</u> Phone <u>301-662-8403</u> Fax <u>301-473-5110</u>	
Occupant or Tenant _____ Contact Name <u>DANIEL SHAEFFER</u> Address <u>7839 RIDGE Rd</u> City <u>FREDERICK</u> State <u>MD</u> Zip Code <u>21702</u> Phone <u>301-662-8403</u> Fax <u>301-473-5110</u>		Engineer or Architect Company _____	
BUILDING DESCRIPTION - COMMERCIAL			
Building Characteristics 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		Utilities 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: <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: <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 _____	
Poolings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home		<input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____	

Unable to approve
 in ACCELA
 Because
 application not
 accepted yet.
 Permit
 faxed from
 DILP **GAC**

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.

Applicant's Signature: Daniel R. Shaffer Print Name: DANIEL R SHAEFFER
 Title/Company: _____ Date: 7/26/07

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, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ	<u>7/26/07</u>	<u>J. Smith</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 \$ <u>510</u>
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 New/Town Zone _____	
T:Name/PERMIT.FRM			SDP/Red-line approval date _____	Accepted by: <u>[Signature]</u>
			Yellow: DED, DPZ	Phic: Health
				Gold: SHA

APPROVED
WALKTHRU BUILDING PERMIT

50563-F
DATE: 7/26/07

WALKTHRU 3102

PR# 20003102

APPLICANT: JAC

DESC. OF WORK: 2x Deck

PARCEL A

AGRICULTURAL PRESERVATION

AGRICULTURAL FENCE ON

WOODEN 5" W

N 46° 51' 45" W

237.68

10' BRL

60' F

51' BRL

#16840

27' F

45' F

S 32° 14' 15" E

EXISTING DECK

LOT 6
4436 SQ FT
4420 AC
1.020

279.54'

30' BRL

10' BRL

150' E

274.77'

180.93'

N 51° 50' 14" W

LOT 5

Private
see Gene
No. 1222

16840 HARDY RD
MT ALBY MD
21771

21771