

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER
B00158684

Building Address 17590 HARDY RD
MOUNT AIRY, MD 21771

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision LAURAND

Section _____ Area _____ Lot 7

Tax Map 7 Parcel 509 Grid 1

Zoning _____ Map Coordinates _____ Lot size 5.26 AC

Property Owner's Name ETTLIN, DENNIS & PATRICIA

Address _____

City _____ State _____ Zip Code _____

Home Phone 301 829-8859 Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone _____ Fax _____

Existing Use SFD

Proposed Use SFD & UNHEATED ENCLOSED PORCH

Estimated Construction Cost \$ 45,036.

Description of Work RENOVATE EX. PORCH & ENCLOSE IT WITH GLASS FOR A 15'x22' UN-HEATED ENCLOSED PORCH

Contractor Company **PATIO ENCLOSURES, INC.**

Contact Person **224 8th AVENUE, N.W. GLEN BURNIE, MD 21061**

Address **443-797-0351 MHI # 12744**

City _____ State _____ Zip Code _____

License No. _____ Phone _____ Fax _____

Occupant or Tenant OWNER

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

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public <input checked="" type="checkbox"/> Private _____
1st floor: <u>22'</u> Depth <u>15'</u> Width	Sewage Disposal: _____ Public <input checked="" type="checkbox"/> Private _____
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: <u>N/A</u>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Electric <input type="checkbox"/> Oil <input type="checkbox"/>
No. of Bedrooms _____	Natural Gas <input type="checkbox"/>
Height: _____	Propane Gas <input type="checkbox"/>
Multi-family dwellings: _____	Sprinkler system: N/A <input type="checkbox"/>
No. of efficiency units: _____	NFPA #13D _____
No. of 1 BR units: _____	NFPA #13R _____
No. of 2 BR units: _____	Other: _____
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: <u>CONCRETE</u>	
Roof Height: _____	
State Certified Modular _____	
Manufactured Home <u>3304</u>	

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.

Gregory A. Falter (Agent)
Applicant's Signature

GREGORY A. FALTER
Print Name

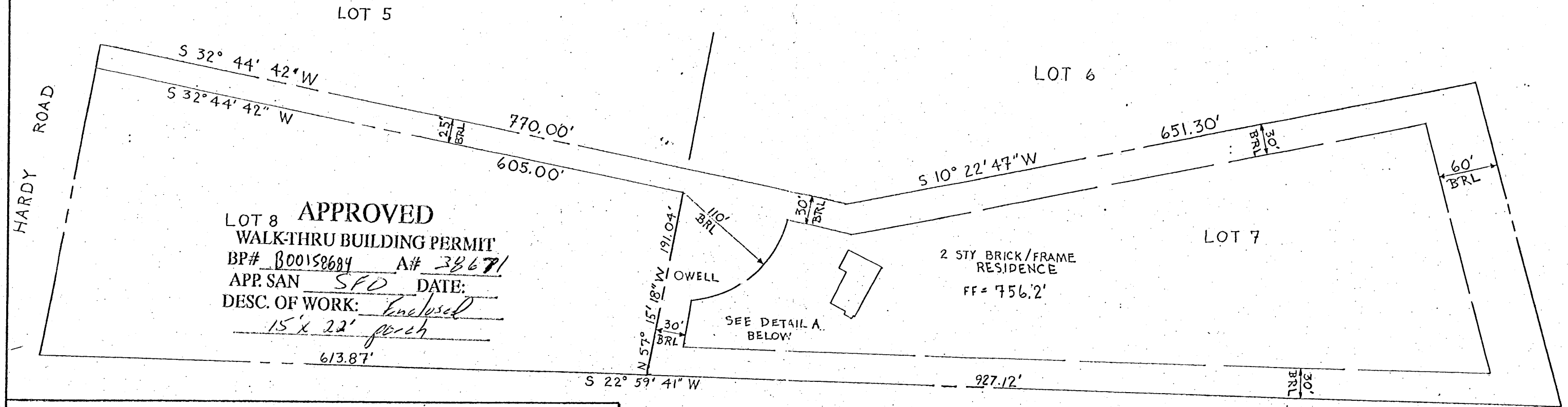
Title/Company _____

Date _____

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

FOR OFFICE USE ONLY

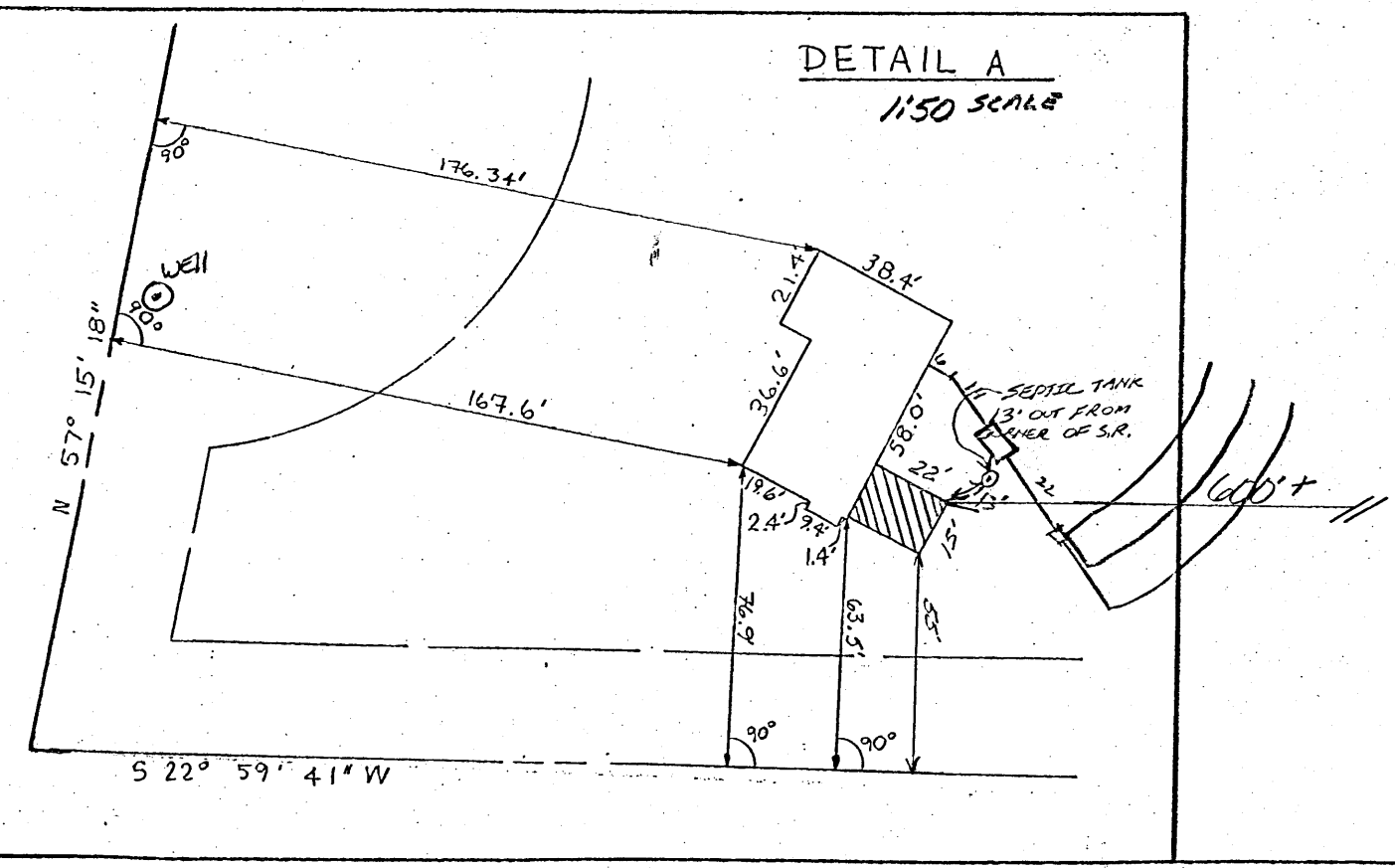
AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dry Engineering DPZ	<u>3/22/06</u>	<u>[Signature]</u>	Side St: _____	Add'l per. 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 _____	
Yellow: DED, DPZ	Pink: Health	Gold: SHA	SDP/Red-line approval date _____	Accepted by _____
Normal PERMIT.FRM				



LOT 8 APPROVED
WALK-THRU BUILDING PERMIT
 BP# 000158684 A# 38671
 APP. SAN SFD DATE: _____
 DESC. OF WORK: Enclosed
15' x 22' porch
 613.87'

2 STY BRICK/FRAME
 RESIDENCE
 FF = 756.2'

DETAIL A
 1/50 SCALE



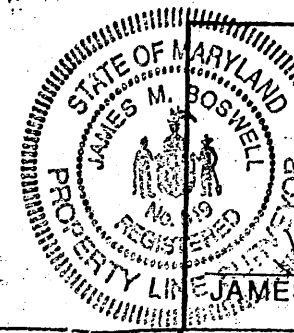
WM. DALE HOUGH
 1260 / 353

CONSTRUCTION WALL CHECK By others

- NOTE:
1. Subject to easements and right-of-ways of record.
 2. This is a location survey only and does not constitute a boundary survey.
 3. Not to be used for construction of fences.

ETTLIN
 # 36574

EBA ENGINEERING, INC.
 Consulting Engineers
 8800 METRO DRIVE
 BALTIMORE MARYLAND 21215
 (301) 358-7171



SURVEYOR'S CERTIFICATE
 I hereby certify, to the best of my knowledge and belief, that the position of all existing improvements on the above described property have been carefully established by a field survey and that unless otherwise shown, there are no visible encroachments across lines as established by deeds and plats of record.
 James M. Boswell 12/08/89
JAMES M. BOSWELL MD. PROP. LINE SURVEYOR #519

HOUSE LOCATION OF LOT 7 LAURAND SUBDIV. HOWARD COUNTY, MD.		
REFERENCE	Drawn by RS	Checked by JMB
PLAT BOOK	Date 12-8-89	Record No.
PLAT NO. 7601	Scale 1"=100'	