

**HOWARD COUNTY
PERMIT APPLICATION**

PERMIT NUMBER
B00147579 *KJB*

6527

Building Address 13488 Allentown Lane
Highland, MD 20777
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 605101 Subdivision ALLMUTI FARMS
Section TV Area 1.84 AC Lot 47
Tax Map 34 Parcel 375 Grid 16
Zoning RR-OEO Map Coordinates 14B9 Lot size 80238 SPT

Property Owner's Name KULDEEP SINGH
Address 5905 TRUMPET SOUND CT
City CLARKSVILLE State MD Zip Code 21029
Home Phone 410-531-9124 Work Phone 410-368-8725
Applicant's Name & Mailing Address, (if other than stated hereon):
HARI R. SINGH
Phone 443-829-1830 Fax 410-665-6921

Existing Use VACANT LAND
Proposed Use SINGLE FAMILY DWELLING
Estimated Construction Cost \$ 600,000.00
Description of Work CONSTRUCT SFD 2
STORY WITH FINISHED BASEMENT

Contractor Company COMPETENT BUILDERS
Contact Person HARI SINGH
Address 15 ROGER VALLEY CT
City BALTIMORE State MD Zip Code 21234
License No. 2941
Phone 443-829-1830 Fax 410-665-6921

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

Engineer or Architect Company STAN RYDER, JR & ASS
Contact Person STAN RYDER
Address 3000 GAMBER ROAD, #600
City FINKSBURG State MD Zip Code 21048
Phone 410-517-1478 Fax 410-517-1532

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: _____	Electric Yes <input checked="" 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: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Sprinkler system: <u>N/A</u> <input 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>62-0</u> <u>64-8</u> 2nd floor: <u>62-0</u> <u>65-4</u> Basement: <u>38-4</u> <u>62-6</u> Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u> Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ State Certified Modular _____ Manufactured Home _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/> Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/> Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: _____ Electric <input 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.

Applicant's Signature *HARI R. SINGH*
Title/Company PRES. COMPETENT BUILDERS

Print Name HARI R. SINGH
Date 4-22-04

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

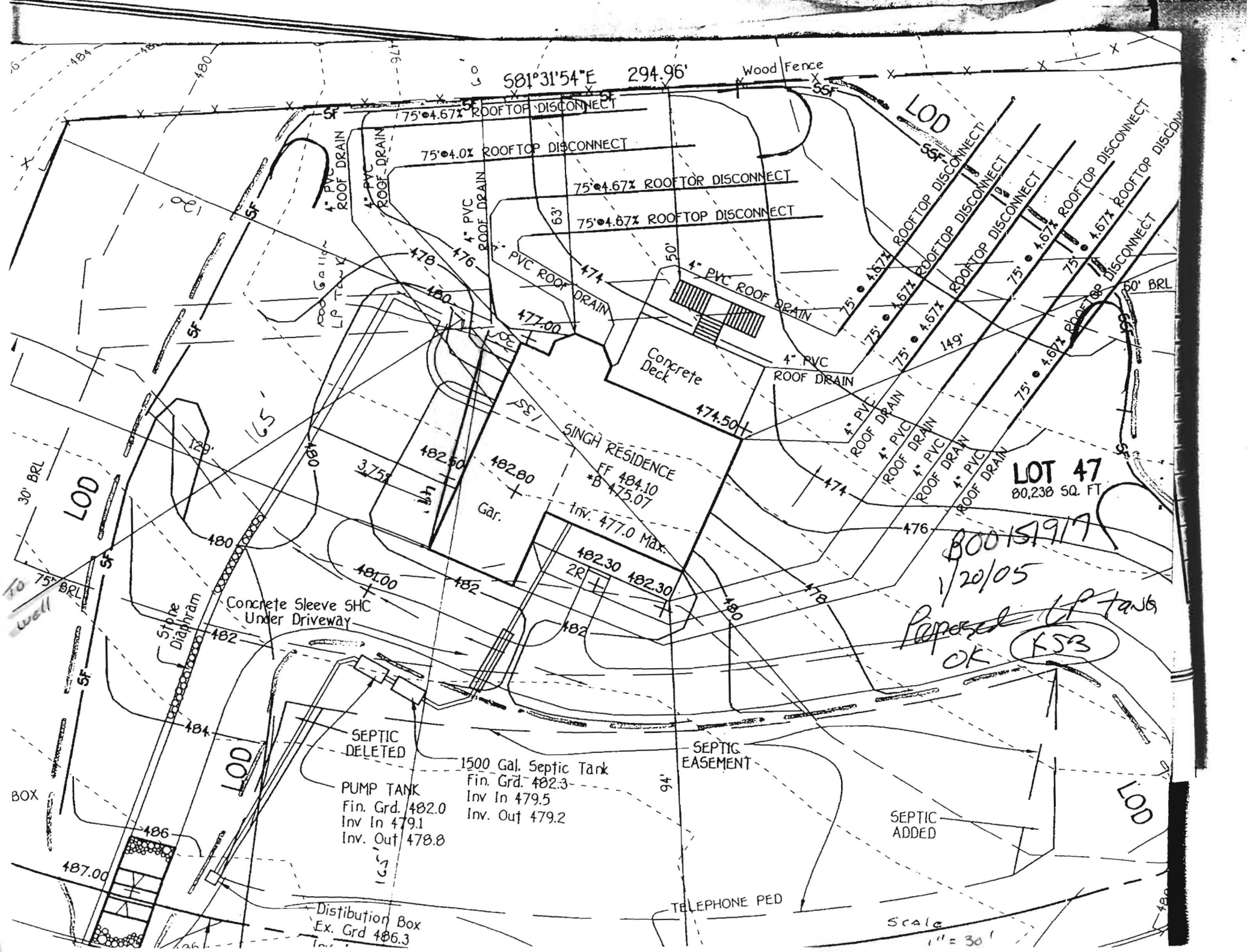
AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>4/22/04</u>	<u><i>H. J. B...</i></u>
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION
Front: _____
Rear: _____
Side: _____
Side St.: _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>
Lot Coverage for NewTown Zone: _____
SDP/Red-line approval date: _____

PROPERTY ID#	61734
Filing fee \$	<u>100</u>
Permit fee	\$ _____
Excise tax	\$ _____
Add'l per. fee	\$ _____
TOTAL FEES	\$ _____
Sub-total paid	\$ _____
Balance due	\$ _____
Check	# <u>258</u>
Validation	# <u>21123</u>

Accepted by *[Signature]*

Distribution of Copies - White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA



581°31'54"E 294.96'

LOD

LOT 47
80,238 SQ. FT.

SINGH RESIDENCE
FF 484.10
*B 475.07
Inv. 477.0 Max.

800151917
1/20/05
Revised LP tanks
OK (K53)

SEPTIC DELETED

1500 Gal. Septic Tank
Fin. Grd. 482.3
Inv. In 479.5
Inv. Out 479.2

PUMP TANK
Fin. Grd. 482.0
Inv. In 479.1
Inv. Out 478.8

SEPTIC EASEMENT

SEPTIC ADDED

Distribution Box
Ex. Grd 486.3

TELEPHONE PED

Scale
1" = 30'

LOD

LOD

LOD

BOX

To Well

Wood Fence

Concrete Sleeve SHC Under Driveway

Concrete Deck

Gar.

Stipe Diaphragm

Roof Gallon LP Tank

4" PVC ROOF DRAIN

4" PVC ROOF DRAIN

4" PVC ROOF DRAIN

75° 4.67% ROOFTOP DISCONNECT

75° 4.0% ROOFTOP DISCONNECT

75° 4.67% ROOFTOP DISCONNECT

75° 4.67% ROOFTOP DISCONNECT

PVC ROOF DRAIN

4" PVC ROOF DRAIN

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