

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

300159579

Building Address 14596 Montaceta Dr
Woodbine MD 21797

Property Owner's Name Tom Brown

Address 14600 Montaceta Dr.

Suite/Apt. #: _____ SDPWP/Petition #: _____

Census Tract 1004002 Subdivision N/A

City Woodbine State MD Zip Code 21797

Section N/A Area N/A Lot 910

Home Phone 410489 4971 Work Phone _____

Tax Map 9 Parcel 336 Grid 10

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

Zoning RR Map Coordinates 4D11 Lot size 1,4764

Phone _____ Fax _____

Existing Use Vacant Lot

Contractor Company Comberland Deep Corp

Proposed Use New home

Contact Person Curtis Cumberland

Estimated Construction Cost \$ 300 R

Address 16391 AIE, Mellix, RJ

Description of Work Single family home

City Woodbine State MD Zip Code 21757

3 bedroom, 2 story 3.5 bath

License No. _____

Unfinished basement - Bath rough-in

Phone 301 854-6838 Fax 301 854-6325

Attached 2 car garage

Engineer or Architect Company Ren Johnson Archt.

Occupant or Tenant Tom Brown

Contact Person Ren Johnson

Contact Name Curtis Cumberland

Address _____

Address _____

City Newville State MD Zip Code _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics		Utilities		Building Characteristics		Utilities	
Height: <u>29</u>		Water Supply:		SF Dwelling <input checked="" type="checkbox"/>	SF Townhouse <input type="checkbox"/>	Water Supply:	
No. of stories: <u>2</u>		Public <input type="checkbox"/>	Private <input type="checkbox"/>	Depth	Width	Public <input type="checkbox"/>	Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: <u>1st</u>		Sewage Disposal:		1st floor: <u>49'</u>	<u>42'</u>	Sewage Disposal:	
Use group: <u>212 922</u>		Public <input type="checkbox"/>	Private <input type="checkbox"/>	2nd floor: <u>40'</u>	<u>27'</u>	Public <input type="checkbox"/>	Private <input checked="" type="checkbox"/>
Construction type:		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Basement: <u>49</u>	<u>42'</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<input type="checkbox"/> Reinforced Concrete		Heating System:		Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>		Heating System:	
<input type="checkbox"/> Structural Steel		Electric <input type="checkbox"/> Oil <input type="checkbox"/>	Natural Gas <input type="checkbox"/>	Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>		Electric <input type="checkbox"/> Oil <input type="checkbox"/>	Natural Gas <input type="checkbox"/>
<input type="checkbox"/> Masonry		Propane Gas <input type="checkbox"/>		No. of Bedrooms <u>3</u>		Propane Gas <input checked="" type="checkbox"/>	
<input type="checkbox"/> Wood Frame		Sprinkler system: <u>N/A</u> <input type="checkbox"/>		Height: <u>29'</u>		Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/>	
<input type="checkbox"/> State Certified Modular		Full <input type="checkbox"/>	Partial <input type="checkbox"/>	Multi-family dwellings:		NFPA #13D <input type="checkbox"/>	NFPA #13R <input type="checkbox"/>
		Other Suppression <input type="checkbox"/>	# of Heads _____	No. of efficiency units: _____		Other: _____	
				No. of 1 BR units: _____			
				No. of 2 BR units: _____			
				No. of 3 BR units: _____			
				Other Structure: _____			
				Dimensions: _____			
				Footings: _____			
				Roof Height: _____			
				<input type="checkbox"/> State Certified Modular			
				<input type="checkbox"/> Manufactured Home			

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.

Curtis Cumberland

Curtis Cumberland

Applicant's Signature

Print Name

Pres.

5-15-06

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
Land Development DPZ			
State Highways			
Building Official			
Dev. Engineering DPZ			
Health	<u>5/15/06</u>	<u>[Signature]</u>	
Fire Protection			

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	Filing fee \$ <u>100</u>
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met?	TOTAL FEES \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>4083</u>
Historic District?	Validation # <u>115376</u>
YES <input type="checkbox"/> NO <input type="checkbox"/>	
Lot Coverage for New/Town Zone _____	
SDP/Red-line approval date _____	

69559

CONTINGENCY CONSTRUCTION START:

ONE STOP SHOP:

Distribution of Copies -
T:\forms\PERMIT.FRM

White: Building Official

Green: LDD, DPZ

Yellow: DED, DPZ

Pink: Health

Gold: SHA

Accepted by [Signature]