

# HOWARD COUNTY PERMIT APPLICATION

**PERMIT NUMBER**  
**B07002105**

Building Address <u>1669 HEWYTON RD</u> <u>MARPOLEVILLE MD 21104</u>	Property Owner's Name <u>WILLIAM CURTIS</u>
Suite/Apt. #: _____ SDP/WP/Petition #: _____	Address <u>1669 HEWYTON RD</u>
Census Tract _____ Subdivision <u>MARPOLEVILLE</u>	City <u>MARPOLEVILLE</u> State <u>MD</u> Zip Code <u>21104</u>
Section _____ Area _____ Lot _____	Home Phone <u>410-442-7623</u> Work Phone _____
Tax Map _____ Parcel _____ Grid _____	Applicant's Name & Mailing Address, (if other than stated hereon): <u>JOHN W. PFATH</u> <u>15119 OAK ORCHARD RD</u> <u>ARUN WINDSOR MD 21776</u>
Zoning <u>E</u> Map Coordinates _____ Lot size _____	Phone <u>410-875-6640</u> Fax <u>875-6564</u>

Existing Use <u>RESIDENTIAL SINGLE FAMILY</u>	Contractor Company <u>PFATH CONTRACTORS INC</u>
Proposed Use <u>RESIDENTIAL DETACHED GARAGE</u>	Contact Person <u>JOHN W. PFATH / TIM</u>
Estimated Construction Cost \$ <u>50,000</u>	Address <u>15119 OAK ORCHARD RD</u>
Description of Work <u>CONSTRUCT 24X30 DETACHED GARAGE - 2 STORY</u>	City <u>ARUN WINDSOR</u> State <u>MD</u> Zip Code <u>21776</u>
	License No. _____
	Phone <u>410-875-6640</u> Fax <u>875-6564</u>

Occupant or Tenant <u>DOUGLAS OURSIEE</u>	Engineer or Architect Company _____
Contact Name <u>DOUGLAS OURSIEE</u>	Contact Person _____
Address <u>1669 HEWYTON RD</u>	Address _____
City <u>MARPOLEVILLE</u> State <u>MD</u> Zip Code <u>21104</u>	City _____ State _____ Zip Code _____
Phone <u>410-442-7623</u> Fax _____	Phone _____ Fax _____

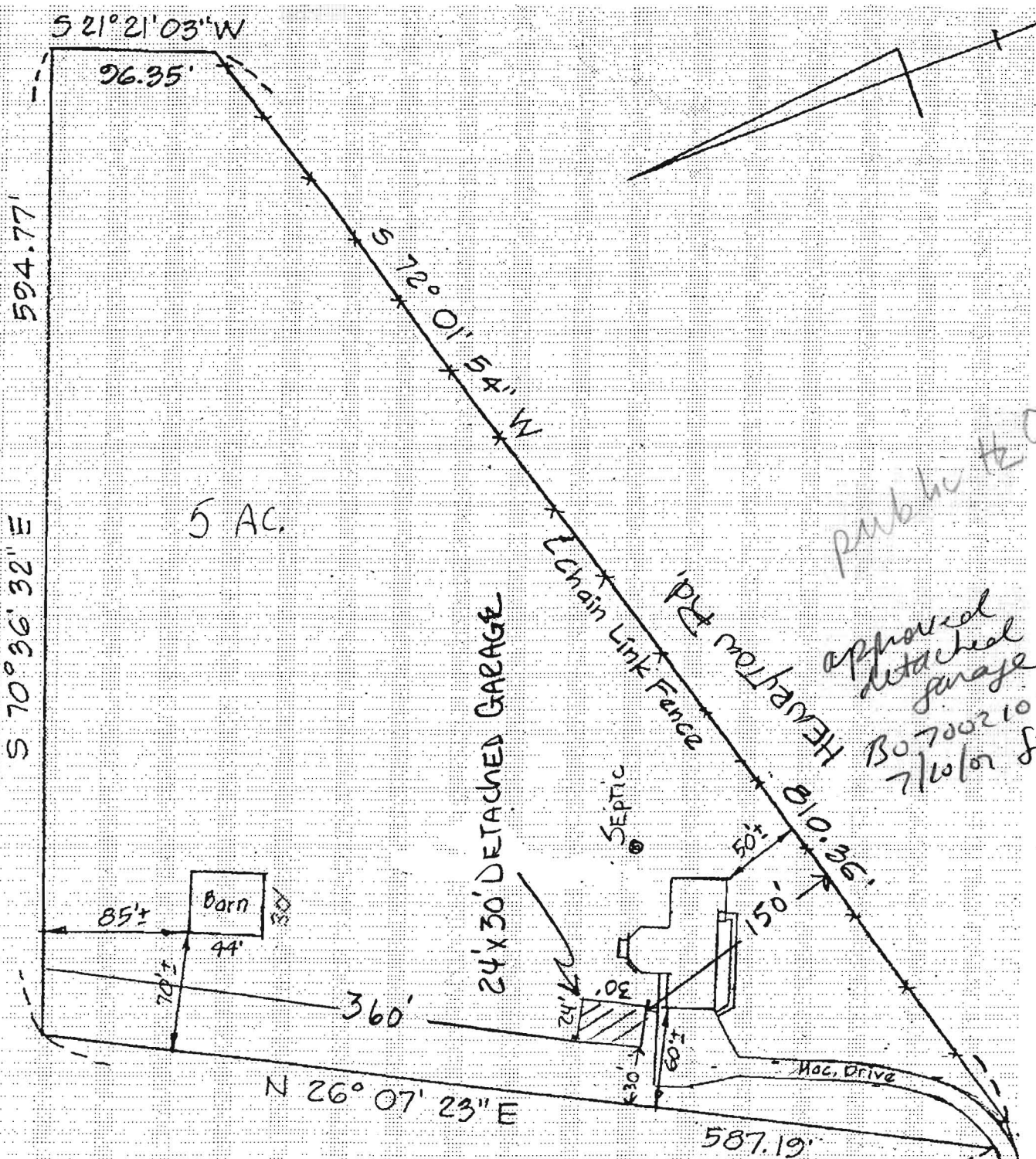
BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
<b>Building Characteristics</b>	<b>Utilities</b>	<b>Building Characteristics</b>	<b>Utilities</b>
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private	1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" 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"/>	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input checked="" type="checkbox"/> No. of Bedrooms _____	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"/>	Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	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: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____	Other Structure <u>DETACHED GARAGE</u> Dimensions: <u>24 X 30</u> Footings: <u>CONCRETE</u> Roof: <u>ASPH/FLT</u>	Sprinkler system: N/A <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 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.

<u>John W. Pfath</u> Applicant's Signature	<u>John W. Pfath</u> Print Name
<u>PFATH CONTRACTORS INC.</u> Title/Company	<u>5/29/07</u> 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#:
<input checked="" type="checkbox"/> Land Development, DPZ			Front: _____	Filing fee \$ _____
<input type="checkbox"/> State Highways			Rear: _____	Permit fee \$ _____
<input checked="" type="checkbox"/> Building Official			Side: _____	Excise tax \$ _____
<input checked="" type="checkbox"/> Dev. Engineering, DPZ			Side St: _____	Add'l per. fee \$ _____
<input checked="" type="checkbox"/> Health	<u>7/10/07</u>	<u>[Signature]</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
<input type="checkbox"/> Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New Town Zone _____	Check # <u>2018</u>
ONE STOP SHOP: <input type="checkbox"/>				Validation # _____



# 1669 HEWRYTON Rd  
 DEED REFERENCE 767/566  
 HOWARD COUNTY, MARYLAND  
 DOUGLAS CURSLEE - OWNER