

**HOWARD COUNTY  
 PERMIT APPLICATION**

**PERMIT NUMBER**  
 000150815 KJB

Building Address 13534 ORION DR.  
DAYTON, MD 21236  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract 05-435897 Subdivision WINTER ESTATES  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot 2  
 Tax Map 28 Parcel 292 Grid 14  
 Zoning RA20 Map Coordinates 13H3 Lot size 3.7965 AC

Property Owner's Name VELULEKU  
 Address 14064 BIG BRANCH DR.  
 City DAYTON State MD Zip Code 21236  
 Home Phone 443 435 0780 Work Phone 410 901 9015  
 Applicant's Name & Mailing Address, (if other than stated hereon):  
STEVENS BUILDERS INC.  
3905 NATIONAL DR. S-100  
BURTONSVILLE MD 20806  
 Phone 301 421 1700 Fax 301 421 9051

Existing Use VACANT LOT  
 Proposed Use NEW RESIDENCE  
 Estimated Construction Cost \$ 440,000  
 Description of Work NEW SINGLE FAMILY, 2 STORY  
3 CAR GARAGE, UNFINISHED KITCHEN, 2 1/2 BATH  
2 LOFTS, PORCH, 3 BEDROOM

Contractor Company STEVENS BUILDERS  
 Contact Person MARK STEVENS  
 Address 3905 NATIONAL DR S-100  
 City BURTONSVILLE State MD Zip Code 20806  
 License No. 1E 86  
 Phone 301 421 1700 Fax 301 421 9051

Occupant or Tenant N/A  
 Contact Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company LEHMAN ASSOCIATES  
 Contact Person JOHN LEHMAN  
 Address 6888 MINK HOLLOW RD  
 City HIGHLAND State MD Zip Code 20777  
 Phone 301 854 1109 Fax 301 854 1072

**BUILDING DESCRIPTION - COMMERCIAL**

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 _____ State Certified Modular _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: <u>N/A</u> <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private _____
1st floor: <u>55'</u>	Sewage Disposal: _____ Public _____ Private _____
2nd floor: <u>55'</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: <u>55'</u>	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
No. of Bedrooms <u>3</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 _____	

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 [Signature]  
V.P. STEVENS BUILDERS  
 Title/Company

Print Name MARK STEVENS  
 Date 10/18/04

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		
Fire Protection		
Is Sediment Control approval required prior to issuance?		
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>		
ONE STOP SHOP <input type="checkbox"/>		

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	<u>63731</u>
Rear: _____	Filing fee \$ <u>100</u>
Side: _____	Permit fee \$ _____
Side St: _____	Excise tax \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per fee \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Lot Coverage for New Town Zone _____	Balance due \$ _____
SDP/Red-line approval date _____	Check <u>7514</u>
	Validation <u>7912</u>
	Accepted by _____