

Demol B153763

69455

DEPARTMENT OF INSPECTIONS, LICENCES AND PERMITS
3110 COURT HOUSE DRIVE
BETHESDA CITY, MD 20814
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1210
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
B00156553

MD 9/17/05

Building Address 6380 GUILFORD RD.
CLARKSVILLE, MD 21029
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 605102 Subdivision SPRING VALLEY FA
Section _____ Area _____ Lot 13
Tax Map 34 Parcel 329 Grid 24
Zoning RR-DEC Map Coordinates _____ Lot size 5.24 ACRES

Property Owner's Name DUNLAVEY John.
Address 6380 GUILFORD RD.
City Clarksville State MD Zip Code 21029
Home Phone 410 446 2553 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
Phone _____ Fax _____

Existing Use SFD
Proposed Use SFD
Estimated Construction Cost \$ 350,000.00
Description of Work Building NEW SFD.
10 BEDROOMS - 3 BATHS
ATTACHED 2 CAR GARAGE finished BRICK
KITCHEN - Screen porch deck

Contractor Company NINKOFF Co Inc
Contact Person FAKRI HAMID
Address 5223 RIVER AD.
City BETHESDA State MD Zip Code 20816
License No. 3203-4785 0818
Phone 301 6928711 Fax 301 656 0338

Occupant or Tenant DUNLAVEY John.
Contact Name FAKRI HAMID
Address 5223 RIVER AD 11716 BALTIM
City Bethesda State MD Zip Code 20816
Bethesda 20705
Phone 301 6928711 Fax 301 656 0338

Engineer or Architect Company HOWARD ROSENBERG
Contact Person HOWARD ROSENBERG
Address _____
City _____ State _____ Zip Code _____
Phone 301 641 4647 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics
Height: _____
No. of stories: _____
Gross area, sq. ft. per 1 _____
Use group: _____
Construction type:
____ Reinforced Concrete
____ Structural Steel
____ Masonry
____ Wood Frame
____ State Certified Modular
Utilities
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
____ Full
____ Partial
____ Other Suppression
____ # of Heads

Building Characteristics
SF Dwelling SF Townhouse
Depth _____ Width _____
1st floor: _____
2nd floor: _____
Basement: _____
Finished Basement Unfinished Basement
Crawl space Slab on Grade
No. of Bedrooms 4
Height: _____
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 Height: _____
____ State Certified Modular
____ Manufactured Home
Utilities
Water Supply: _____
Public
Private
Sewage Disposal: _____
Public
Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
____ NFPA #13D
____ NFPA #13R
____ Other:

*need
sprinkler for
before permit is
issued*

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 [Signature]
Title/Company AGENT NINKOFF Co Inc.

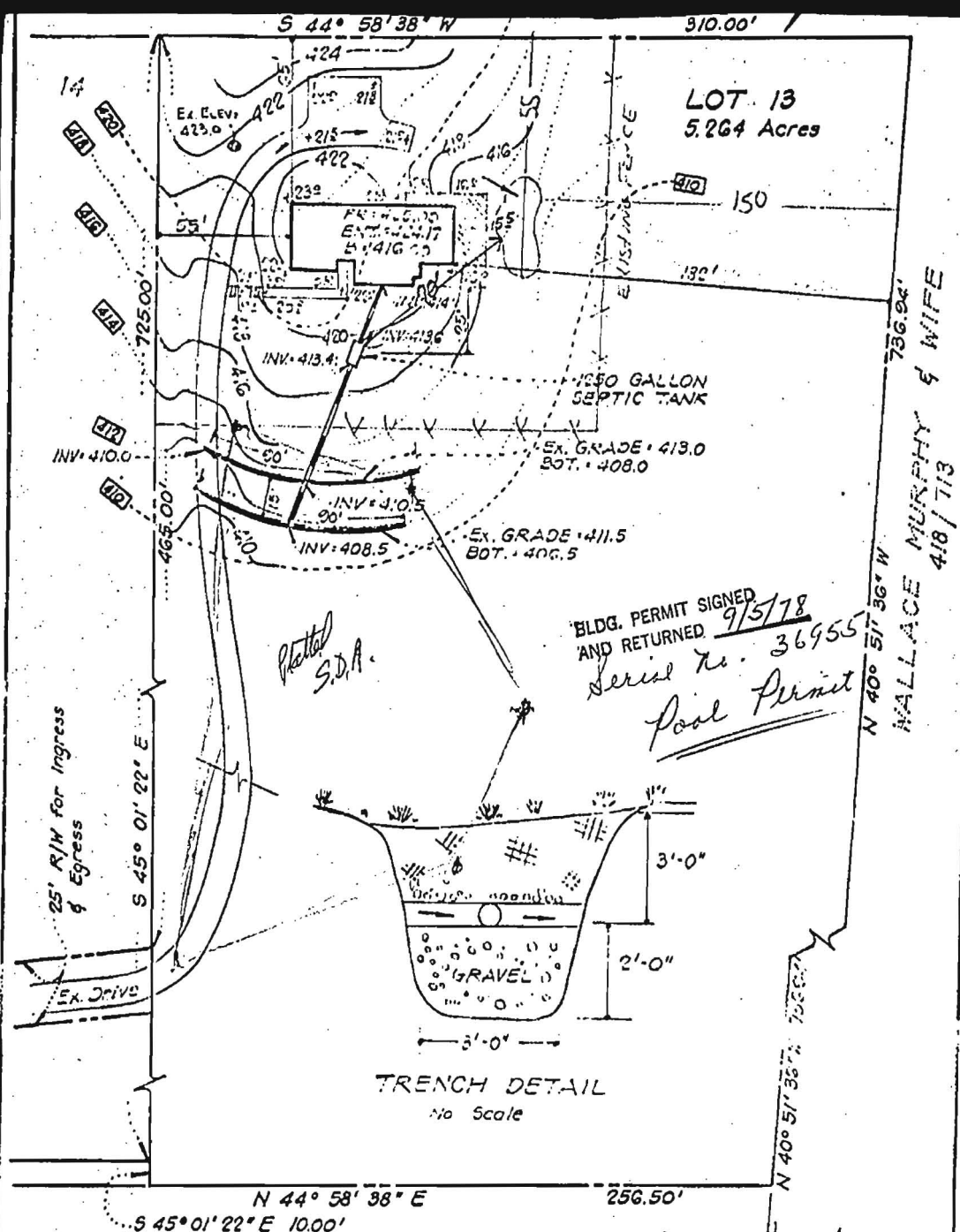
Print Name FAKRI HAMID
Date 10/17/05

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 10/19/05 [Signature]
Fire Protection _____
Is Sediment Control approval required prior to issuance?
YES NO
CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:

DPZ SETBACK INFORMATION
Front: _____ Filing fee \$ 100
Rear: _____ Permit fee \$ _____
Side: _____ Excise tax \$ _____
Side St.: _____ Add'l per. fee \$ _____
All minimum setbacks met? YES NO TOTAL FEES \$ _____
Is Entrance Permit required? YES NO Sub-total paid \$ _____
Balance due \$ _____
Check # 116755
Validation # 79673
Historic District? YES NO
Lot Coverage for NewTown Zone _____
SDP/Red-line approval date _____ Accepted by [Signature]

Distribution of Copies - White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA
T:\norma\PERMIT.FRM Rev. 11/4/04



LOT 13
5.264 Acres

WALLACE MURPHY & WIFE
418 / 713

BLDG. PERMIT SIGNED
AND RETURNED 9/5/78
Serial No. 36955
Pool Permit

*Plotted
S.D.A.*

TRENCH DETAIL
No Scale

CLARK, FINE...
ENGINEER...
1115 E...
Other... 552 5400

12 Martin K. Hayden
Ing. Pool
Serial # 36954

452-L

10/25/05

Kevin,

Can you do the Septic
specs?

Thanks
Jef

They are
using the existing
system &
no new specs
10/25/05