



3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Permit No.: _____

Walk Thru

Building Address: 17271 HARZDY RD
 City: MT AIRY State: MD Zip Code: 21771
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: SPRING HOLLOW
 Section: _____ Area: _____ Lot: 30
 Tax Map: 0007 Parcel: 0528 Grid: 0008
 Zoning: _____ Map Coordinates: _____ Lot Size: 4000sqft

Existing Use: NA
 Proposed Use: DECK
 Estimated Construction Cost: \$ 10,000
 Description of Work: CONSTRUCT OPEN WOOD DECK, 24X12 (288sqft), W/STAIRS ON REAR OF SFD
 Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: ANDY MERZ
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics
Height: <u>5'</u>	<input type="checkbox"/> SF Dwelling, <input type="checkbox"/> SF Townhouse
No. of stories: <u>1</u>	Depth _____ Width _____
Gross area, sq. ft./floor: <u>288</u>	1 st floor: _____
Area of construction (sq. ft.): <u>288</u>	2 nd floor: _____
Use group: _____	Basement: _____
<u>Construction type:</u>	<input type="checkbox"/> Finished Basement
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Unfinished Basement
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Crawl Space
<input type="checkbox"/> Masonry	<input type="checkbox"/> Slab on Grade
<input checked="" type="checkbox"/> Wood Frame	No. of Bedrooms: _____
<input type="checkbox"/> State Certified Modular	<u>Multi-family Dwelling</u>
	No. of efficiency units: _____
	No. of 1 BR units: _____
	No. of 2 BR units: _____
	No. of 3 BR units: _____
	Other Structure: _____
	Dimensions: _____
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings: _____
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof: _____
Roadside Tree Project Permit # _____	<input type="checkbox"/> State Certified Modular
	<input type="checkbox"/> Manufactured Home

Property Owner's Name: TED & JENNIFER EYLER
 Address: 17271 HARZDY RD
 City: MT AIRY State: MD Zip Code: 21771
 Phone: 410 241 2983 Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: ANDREW MERZ
 Address: 4571 SUN BEARY DR
 City: FINKSBURG State: MD Zip Code: 21048
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: FRONTIER DECK BLDGS
 Contact Person: ANDREW MERZ
 Address: 4571 SUN BEARY DR
 City: FINKSBURG State: MD Zip Code: 21048
 License No.: 51321
 Phone: 410 781 7500 Fax: _____
 Email: AJMERZ@COMCAST.NET

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Utilities
<u>Water Supply</u>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
<u>Sewage Disposal</u>
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Heating System</u>
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other: _____
<u>Sprinkler System:</u>
<input type="checkbox"/> Yes <input type="checkbox"/> No
Grading Permit Number: _____
Building Shell Permit Number: _____

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: ANDREW MERZ Print Name: ANDREW MERZ
 Email Address: AJMERZ@COMCAST.NET Date: 4/22/15
 Title/Company: LADONER, FDB

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>4/22/15</u>	<u>Bernard</u>

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

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

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$
Check	#

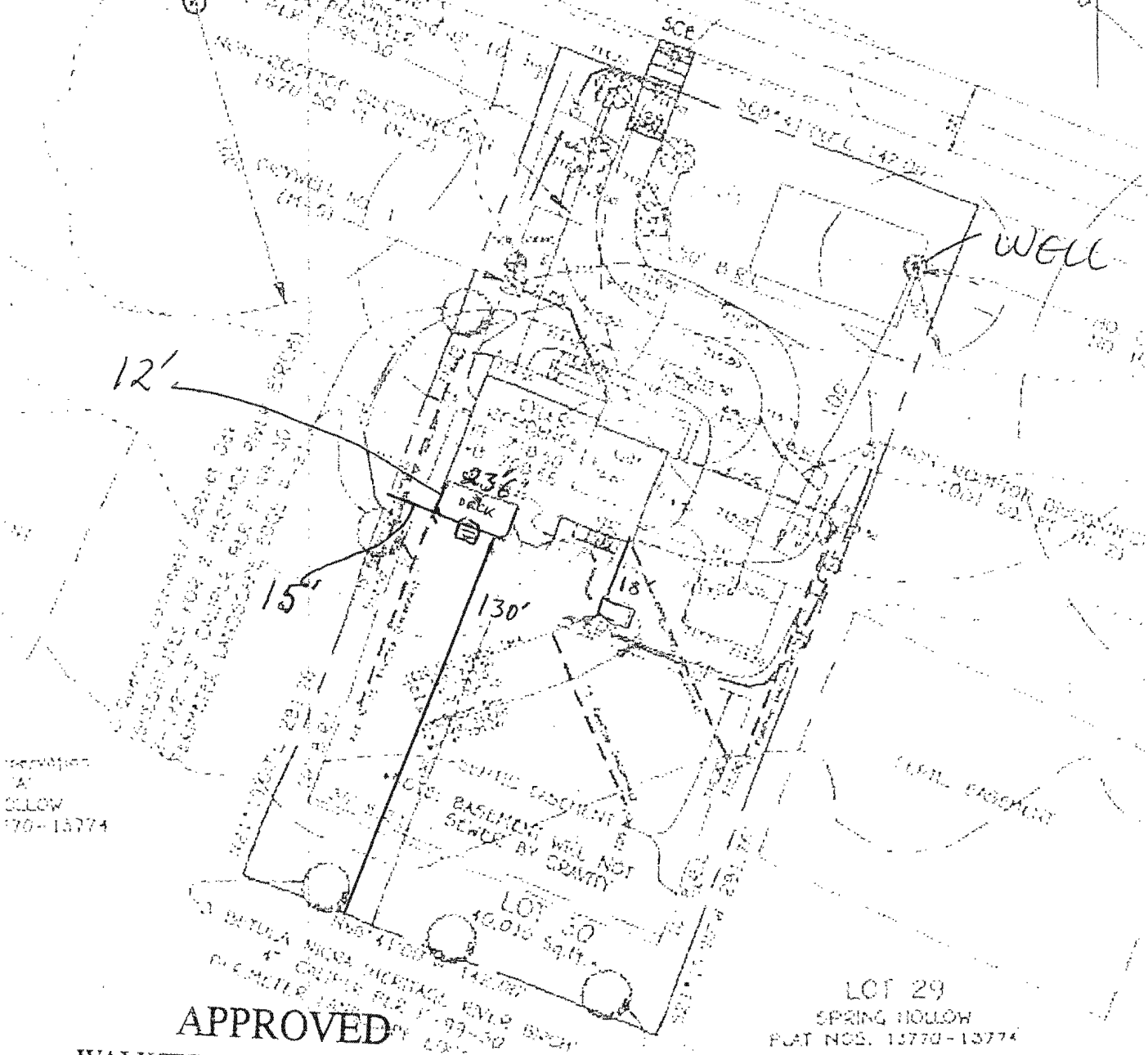
50 SCALE

HARDY

(LOCAL/PUBLIC ROAD) ROAD

N 678.900
188.178 9746
(M-1500)

18 1274.492
E 382.284 7803
5041200



170-15774

APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____
APP. SAN Beward DATE: 4-22-15

DESC. OF WORK: 24x12 Deck

Approved (as shown)

LOT 29
SPRING HOLLOW
PLAT NOS. 13770-13774

