

Building Address: 3712 Applesy Ct
Glenwood MD 21738

Unit/Apt. # _____ SDP/WP/BA #: _____

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: _____

Tax Map: _____ Parcel: _____ Grid: _____

Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: SFD

Proposed Use: STONE PATIO

Estimated Construction Cost: \$ 40,000

Description of Work: 39' x 40' 30" ELEVATED
STONE PATIO - 48" H walls

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Property Owner's Name: ANTHONY & GINA ROSSO

Address: 3712 Applesy Ct

City: GLENWOOD State: MD Zip Code: 21738

Home Phone: _____ Work Phone: _____

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

Phone: _____ Fax: _____

Email: _____

Contractor Company: CLASSIC DESIGN GROUP INC.

Contact Person: LUIS BALDERRAMA

Address: 5433 WOODBINE RD

City: WOODBINE State: MD Zip Code: 21797

License No.: 83116

Phone: (410) 549 5850 Fax: (410) 549 5449

Email: _____

Engineer/Architect Company: _____

Responsible Design Prof.: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
Area of construction (sq. ft.):	<u>Sewage Disposal</u>
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> Roadside Tree Project Permit	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
Roadside Tree Project Permit #	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
Depth Width	<input type="checkbox"/> Public
1 st floor:	<input checked="" type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> Roadside Tree Project Permit
Roof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	Roadside Tree Project Permit #
<input type="checkbox"/> Manufactured Home	

I, 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: _____

Print Name: _____

Date: 9/28/11

Address: _____

Company: _____

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>9-28-11</u>	<u>[Signature]</u>
Health Protection		
Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No		
CONTINGENCY CONSTRUCTION START		
ONE STOP SHOP		

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	\$

3420

Approved For Private Water and Private Sewage Systems

Revised Per Certification Plan

Wife for Peter Beilman 9/8/2011

Health Officer, Howard County Health Dept.

DATE 11/03/03

81° 54' 24" W

11 = 40'

APPROVED

WALKTHRU BUILDING PERMIT

BP# A# N/A

APP. SAN 18 DATE: 9-28-11

DESC. OF WORK: stone patio as shown

* THE LOT SHOWN HEREON complies with the minimum ownership width and lot area as required by Maryland Department of Environment

* THIS area designates a private sewage disposal area of at least 10,000 sq ft as required by the Maryland Department of Environment for individual sewage disposal. Improvements of any nature in this area are restricted. THIS SEWAGE DISPOSAL AREA SHALL REMAIN null and void upon connection to a public sewage system.

THE COUNTY HEALTH OFFICER SHALL HAVE AUTHORITY TO Grant or withhold the private sewage easement recording of a residential sewage easement SHALL NOT BE NECESSARY

* ANY CHANGES TO a Sewage Easement SHALL require a revised Recordation Certification

of distance

W = 100.00'

10.00'

EX. EDGE PAVING

EX STONE GABION

EX. INLET

EX. WELL

2nd well

3rd well

EX. WELLS

EX. WELLS

EX. WELLS

EX. WELLS

APPLEBY

ELLEV - 97' (50' WIDE)

87'

91'

90'

90'

89'

COURT

95' DSMT SEWER SERVICE

60' B.P.L.

23

24

AREA GAINED

AREA LOST

septic tank

Proposed Patio

500' 36" 10' E

110.02'

DRAINAGE EASEMENT

UTILITY

75' B.P.L.

30' B.P.L.

* THE purpose of this change is to install patio in current septic reserve area

61.07'

523' 43' 59" W

11 = 40'

N 54° 00' 00" E 22.41' 00"

3712 Applyby Ct.

Greenwood, Md. 21738

Shirley Farms Development

Topography of this plat is taken from original plat plan dated 1997 and is specific to accurately represent the relative changes on the subject property.

OWNER: Anthony + Gina Rosso (410) 489-2462

Plan Drawn: Peter Sarge Classic Design Group 410-549-505

"I certify that the information shown here on is based on field work performed by me, and is correct, to the best of my knowledge and belief."

X [Signature]

X 8/15/11



