

# HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER  
**300156619**

Building Address 13155 Brighton Dawn Rd  
Clarksville, MD 21029

Suite/Apt. #: \_\_\_\_\_ SDP/W/P/Petition #: \_\_\_\_\_

Census Tract \_\_\_\_\_ Subdivision Waterford

Section 2 Area \_\_\_\_\_ Lot 8

Tax Map 34 Parcel 26 Grid \_\_\_\_\_

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name Rick & Joy Wagner

Address 13155 Brighton Dawn Rd

City Clarksville State MD Zip Code 21029

Home Phone 410-205-2870 Work Phone 410-214-5109

Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use Swimming Pool

Proposed Use Swimming Pool

Estimated Construction Cost \$ 50,000

Description of Work Renovate existing vinyl liner pool into a granite pool and extend length by five feet. Existing

Contractor Company Atlantic Pools, Inc

Contact Person David Edwards

Address P.O. Box 148

City MD State MD Zip Code 21771

License No. 120130

Phone 301-829-4004 Fax 301-829-4170

Occupant or Tenant \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Engineer or Architect Company \_\_\_\_\_

Contact Person \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input 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"/>
Use group: _____	Heating System: _____ <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <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 # of Heads _____

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

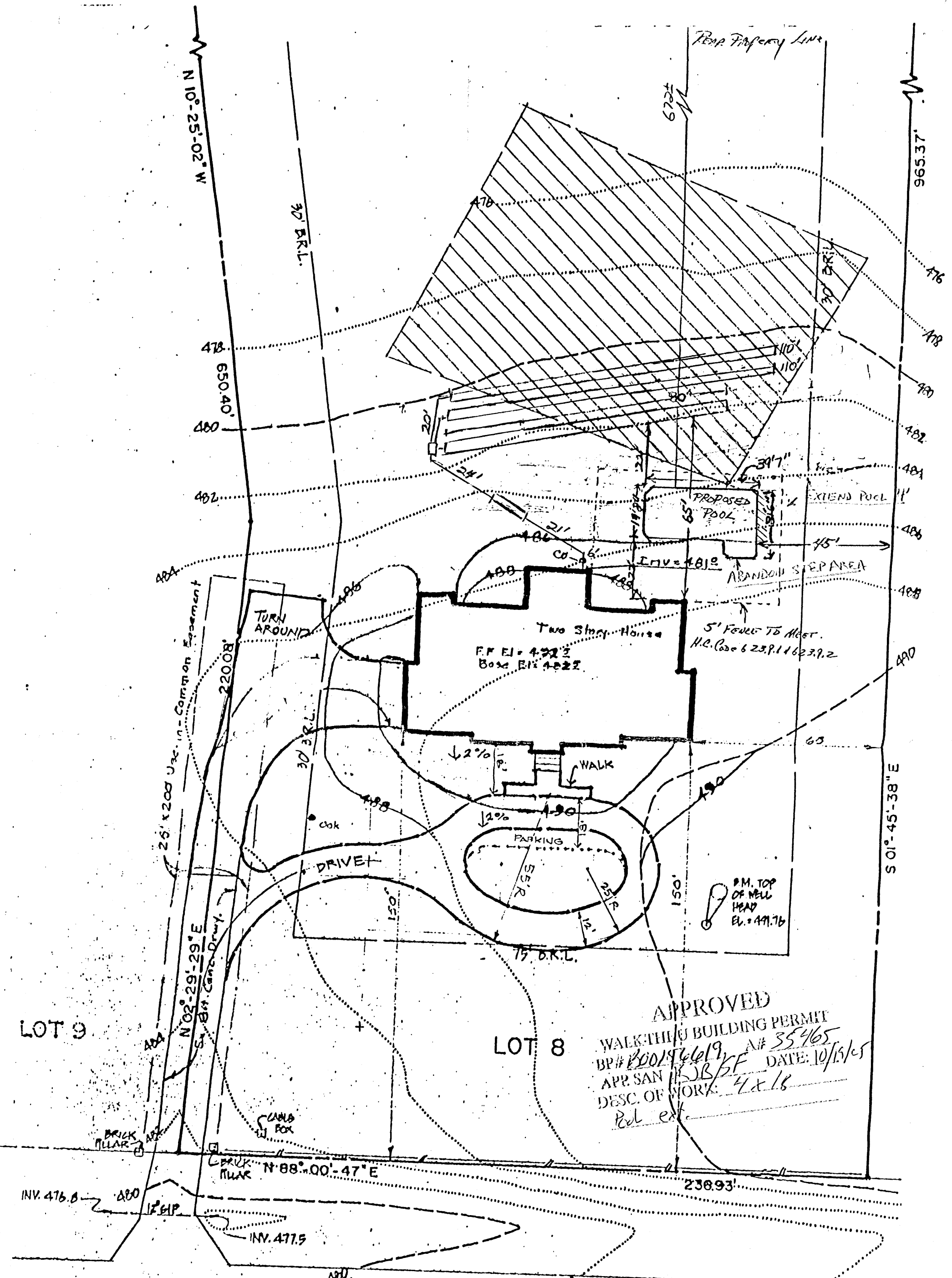
Print Name David Edwards

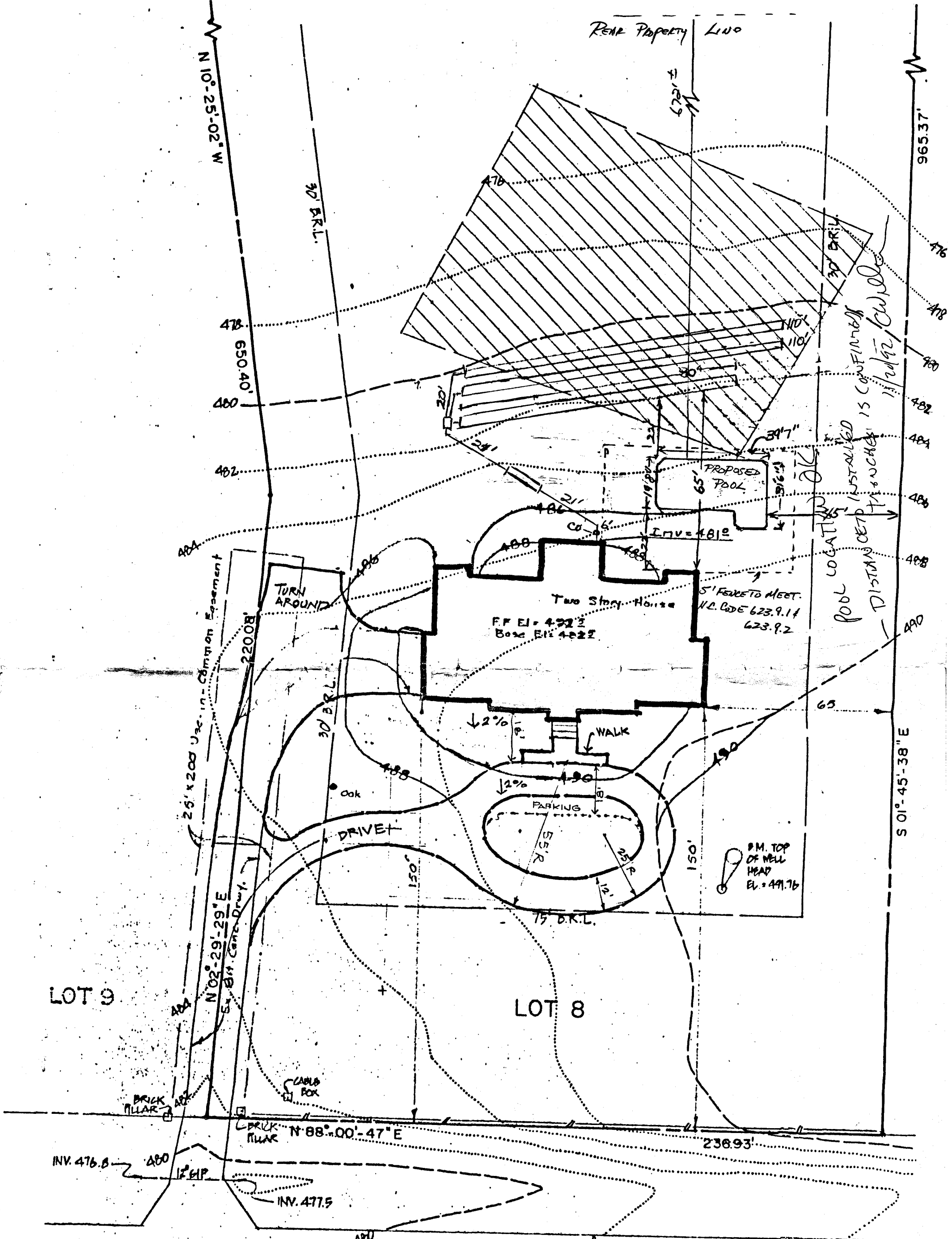
Date 10/19/05

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	<u>10/19/05</u>	<u>[Signature]</u>
Fire Protection		
Is Sediment Control approval required prior to issuance?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
CONTINGENCY CONSTRUCTION START:	<input type="checkbox"/>	
ONE STOP SHOP:	<input type="checkbox"/>	

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





LOT 9

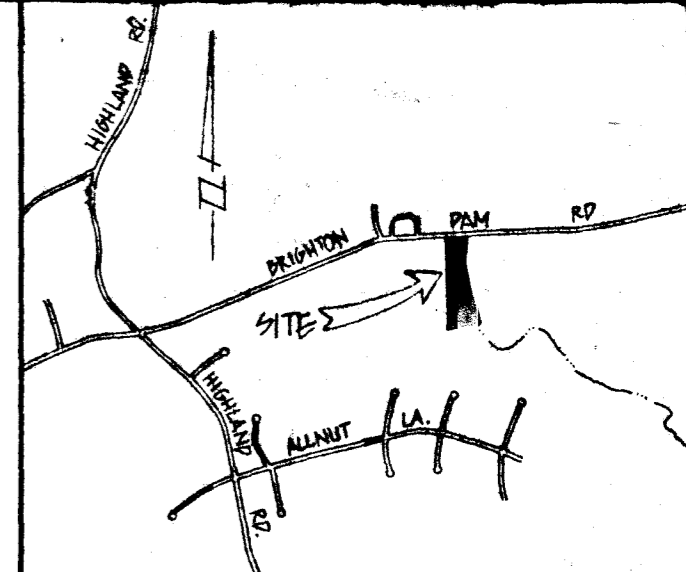
LOT 8

# BRIGHTON DAM ROAD

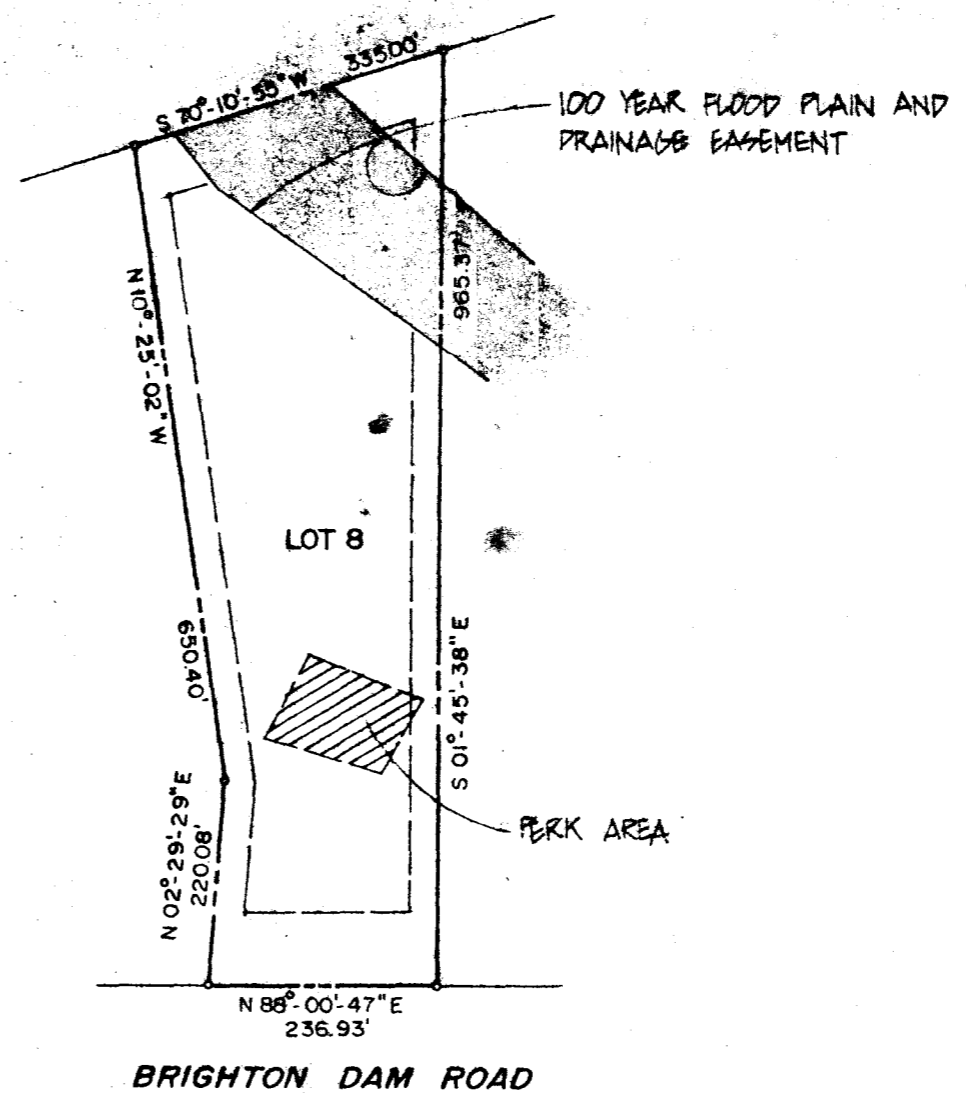
I HEREBY CERTIFY THE ABOVE MEASUREMENTS  
 ARE CORRECT FOR THE PROPERTY AND PROPOSED  
 POOL IMPROVEMENT -

*R. Wagener* 11-11-92  
 RICHARD H. WAGENER  
 OWNER

WAGENER RESIDENCE  
 SCALE: 1" = 30'



VICINITY MAP  
SCALE: 1" = 2000'



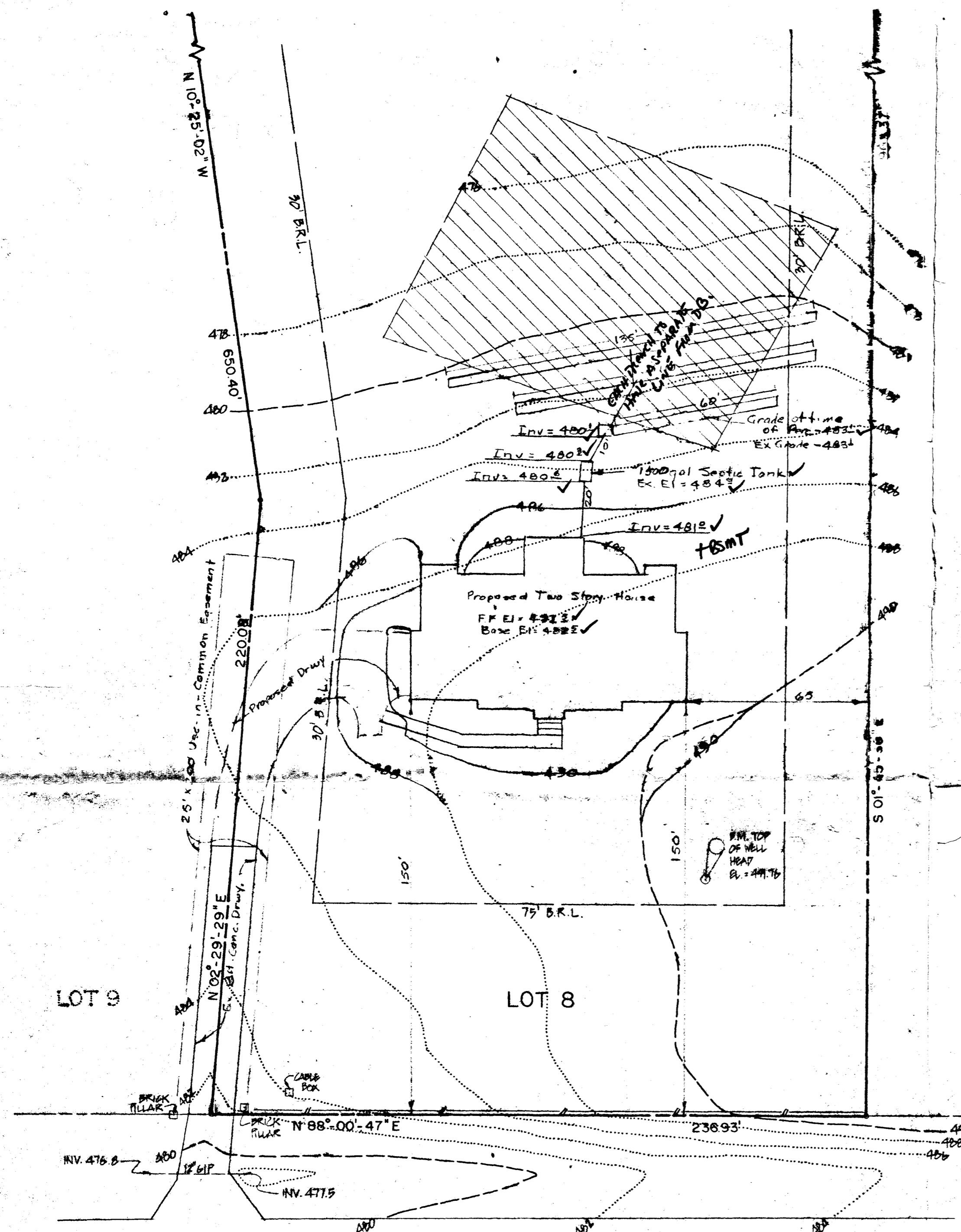
BRIGHTON DAM ROAD

SEPTIC SYSTEM DESIGN

5 Bedrooms x 180 sq ft/Bedroom = 900 sq ft Req'd.  
 3' Trench Width x 305' Trench Length = 915 sq ft Provided.  
 Trenches are to be 10' apart, 4.5' deep and to the length shown with the bottom 1.5' filled with #2 stone or washed gravel.

Note: Elevations and grades shown are referred to the Howard County datum.

Existing grades are shown thus: --- 490  
 Proposed grades are shown thus: - - - 490



LOT 9

LOT 8

LOT 7

BRIGHTON DAM ROAD

LOT 8  
WATERFORD

SECTION 2  
 FIFTH ELECTION DIST. HO. COUNTY, MD.  
 TAX MAP 34 PARCEL 26  
 SCALE: 1" = 30' OCT. 1988

BLDG. PERMIT SIGNED  
 AND RETURNED 10/31/88  
 BP 22205  
 JEC

SURVEYORS CERTIFICATE  
 I hereby certify that the above measurements and elevations are correct for the

JACK E. CLARK  
 Registered Land Surveyor  
 STATE OF MARYLAND  
 PROFESSIONAL LAND SURVEYOR  
 NO. 4379  
 RES. 15/6/89

PREPARED BY:  
 THE J.E. CLARK COMPANY  
 LAND SURVEYING ENGINEERING  
 P.O. BOX 147 LAUREL, MARYLAND 20707