

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

Building Address 1950 MIT VIEW RD
MARLBOROUGHVILLE MD 21104

Suite/Apt. #: _____ SDP/WPI/Petition #: _____

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot 2

Tax Map 9 Parcel 332 Grid 24

Zoning _____ Map Coordinates _____ Lot size 1.00 AC.

Property Owner's Name DAY, CALVEN & ELLEN

Address _____

City _____ State _____ Zip Code _____

Home Phone 410 442 1214 Work Phone _____

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

Phone _____ Fax _____

Existing Use SFD & SCREEN PORCH

Proposed Use SFD & UN-HEATED ENCLOSED PORCH.

Estimated Construction Cost \$ 3,900

Description of Work ENCLOSE EX. PORCH W/GLASS
FOR A 30' x 16' UN-HEATED
ENCLOSED PORCH.

Contractor Company **PATIO ENCLOSURES, INC.**
224 8th AVENUE, N.W.
Contact Person **GLEN BURNIE, MD 21061**
443-797-0351
Address **MHI # 12744**

City _____ State _____ Zip Code _____

License No. _____

Phone _____ Fax _____

Occupant or Tenant OWNER

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: _____ 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: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>
1st floor: _____ 2nd floor: <u>16'</u> <u>30'</u>	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
No. of Bedrooms _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/>
Height: _____	Natural Gas <input type="checkbox"/>
Multi-family dwellings: _____	Propane Gas <input type="checkbox"/>
No. of efficiency units: _____	Sprinkler system: N/A <input type="checkbox"/>
No. of 1 BR units: _____	NFPA #13D _____
No. of 2 BR units: _____	NFPA #13R _____
No. of 3 BR units: _____	Other: _____
Other Structure: _____	
Dimensions: _____	
Foatings: _____	
Roof Height: <u>EX-SHEED</u>	
State Certified Modular <u>480 #</u>	
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 HERETO; (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.

Gregory A. FALTER (Agent)
Applicant's Signature

GREGORY A. FALTER
Print Name

Title/Company

Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

** PLEASE WRITE NEATLY AND LEGIBLY. **

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ	<u>6/7/06</u>	<u>[Signature]</u>	Side St.: _____	Add'l per. fee \$ _____
Health			All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
			Lot Coverage for NewTown Zone _____	
			SDP/Red-line approval date _____	Accepted by _____

Distribution of Copies: _____
T:\forms\PERMIT.FRM

White: Building Official

Green: LDD, DPZ

Yellow: DED, DPZ

Pink: Health

Gold: SHA

MOUNT VIEW ROAD

VICINITY MAP
SCALE: 1"=2000'

APPROVED

WALK-THRU BUILDING PERMIT

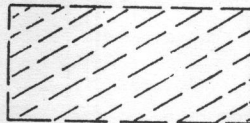
BP# WALK-Thru A# 45411

APP. SAN GAC DATE: 6/7/06

DESC. OF WORK: 16 X 30

enclosed sun porch unheated.

GENERAL NOTES

1. THE LOT SHOWN HEREON COMPLIES WITH THE MINIMUM OWNERSHIP WIDTH AND LOT AREAS AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT.
2.  THIS AREA DESIGNATES A PRIVATE SEWERAGE EASEMENT OF APPROXIMATELY 10,000 SQUARE FEET AS REQUIRED BY THE MARYLAND STATE DEPARTMENT OF THE ENVIRONMENT, FOR INDIVIDUAL SEWERAGE DISPOSAL. IMPROVEMENTS OF ANY NATURE IN THIS AREA ARE RESTRICTED UNTIL PUBLIC SEWERAGE IS AVAILABLE AND SERVICING ANY RESIDENTIAL STRUCTURES CONSTRUCTED ON THESE BUILDING SITES. THESE EASEMENTS SHALL BECOME NULL AND VOID UPON CONNECTION TO A PUBLIC SEWERAGE SYSTEM.
3. ALL PERCOLATION TEST HOLES SHOWN HEREON HAVE BEEN FIELD LOCATED, SHOWN THUS (●).
4. DEED REFERENCE: Liber: 1246 Folio: 620
5. THE LOT IS TO BE SUBDIVIDED FOR THE PURPOSE OF THE CONSTRUCTION OF ONE DWELLING FOR THE PROPERTY OWNER WHO ORIGINALLY ESTABLISHED THE AGRICULTURAL PRESERVATION DISTRICT OR FOR ONE OF HIS/HER CHILDREN, IN ACCORDANCE WITH SECTION 104.D.3 OF THE HOWARD COUNTY ZONING REGULATIONS.
6. ANY FUTURE PLANS OR BUILDING PERMITS SUBMITTED CONCERNING THE PROPERTY SHOWN HEREON SHALL CONTAIN THE FOLLOWING REFERENCE NUMBER "WP 90-124".
7. RESIDUE PARCEL 47 SHALL BE WAIVED AND CREATE A 1.0000 acres LOT AS DESCRIBED IN GENERAL NOTE No. 5 ABOVE.

DAY # 36695
6-2-2006
1"=40'

