

| | | | |
|---|--|--|-----------------------------------|
| DEPT. OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800 | | HOWARD COUNTY PERMIT APPLICATION | B09001003 PERMIT NUMBER |
| Building Address <u>7085 Mink Hollow Rd</u> <u>Highland, Md 20777</u> | | Property Owner's Name <u>Thomas Goff</u> Address <u>7085 Mink Hollow Rd</u> City <u>Highland</u> State <u>Md</u> Zip Code <u>20777</u> Home Phone <u>301-854-3420</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated herein): <u>Wheaton Door & Window Co</u> <u>Sharon DiCostanzo</u> <u>9240-D Sunnyside Ave</u> <u>Beltsville, Md 20705</u> Phone _____ Fax _____ <u>301-949-8951</u> | |
| Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision _____ Section _____ Area _____ Lot _____ Tax Map <u>40</u> Parcel <u>359</u> Grid _____ Zoning _____ Map Coordinates _____ Lot Size _____ | | Contractor Company <u>Wheaton Door & Window Co</u> Contact Person <u>George Lewis</u> Address <u>51410-D Sunnyside Ave</u> City <u>Beltsville</u> State <u>Md</u> Zip Code <u>20705</u> License No. <u>15310280</u> Phone _____ Fax _____ <u>301-949-8951</u> | |
| Existing Use _____ Proposed Use _____ Estimated Construction Cost \$ <u>116,000</u> Description of Work <u>build 44x16 Pt deck</u> <u>no stairs</u> | | Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____ | |
| 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 | Building Characteristics | Utilities |
| Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ 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 | Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> 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"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads | SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 st floor: _____ 2 nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: <u>deck</u> Dimensions: <u>44x16</u> Footings: _____ Roof: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home | Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> 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"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: |

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: Sharon DiCostanzo
 Title/Company: CC Manager / Wheaton Door & Window Co
 Print Name: Sharon DiCostanzo
 Date: 5/16/09


Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

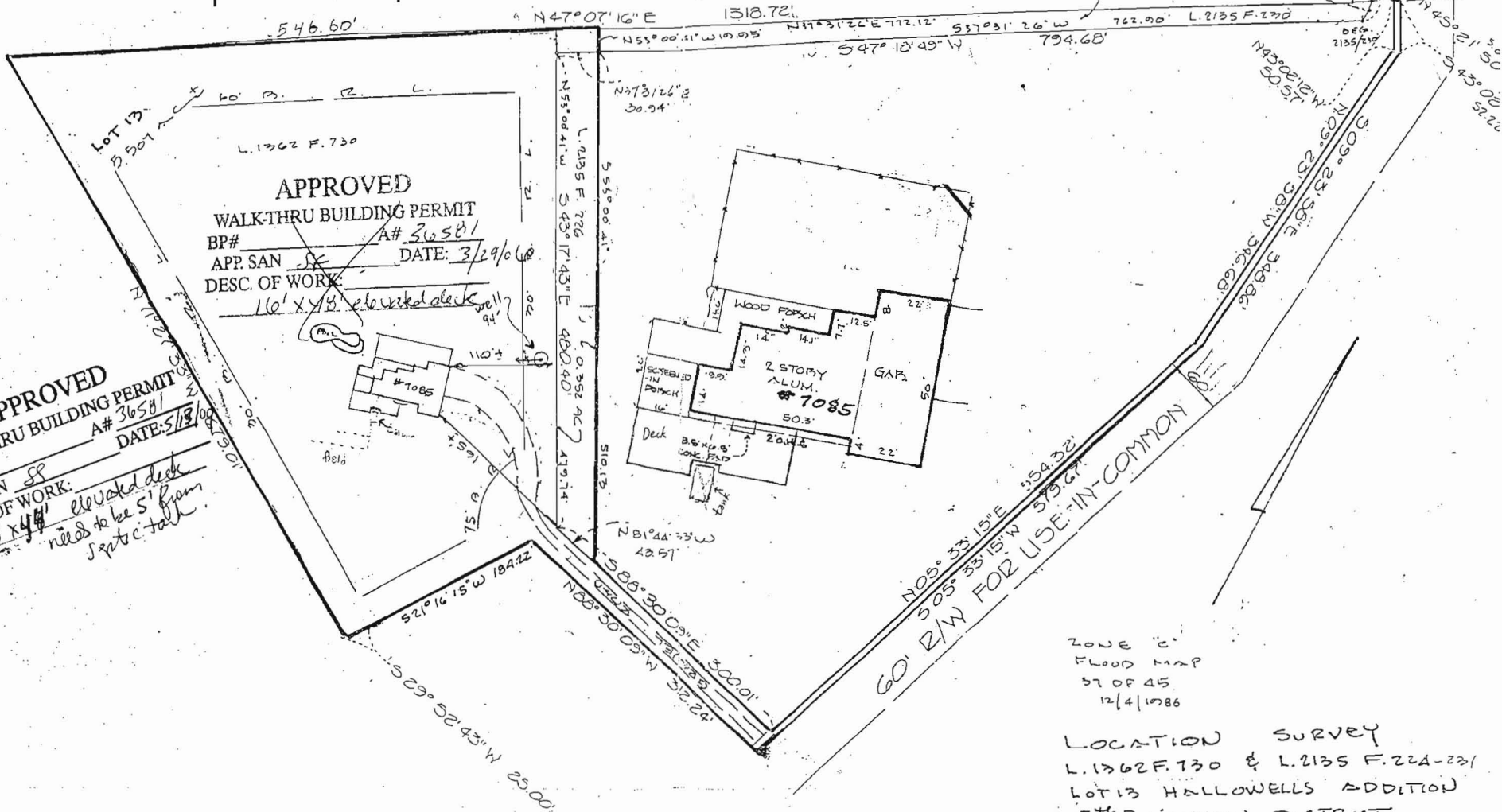
PLEASE WRITE NEATLY AND LEGIBLY

- FOR OFFICE USE ONLY -

| AGENCY | DATE | SIGNATURE | APPROVAL | DPZ SETBACK INFORMATION | Filing fee | PROPERTY ID # |
|--|----------------|--------------------|----------|--|-------------------------|---------------|
| Land Development, DPZ | | | | Front: _____ | \$ _____ | |
| State Highways | | | | Rear: _____ | \$ _____ | |
| Building Officials | | | | Side: _____ | \$ _____ | |
| Dev. Engineering, DPZ | | | | Side St: _____ | \$ _____ | |
| Health | <u>5/13/09</u> | <u>[Signature]</u> | | 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"/> | Accepted by _____ | |
| | | | | Lot Coverage for New Town Zone _____ | | |
| | | | | SDP/Red-line approval date _____ | | |

Distribution of Copies: White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA
 T: Operations \ Updated forms

| | | |
|--|--|--|
| CERTIFICATION | SEAL | SCALE 1"=100' DATE 8.19.1992 |
| This is to certify that I have surveyed the property known as: <u>1085 Mink Hollow Road</u> |  Walter Park | 9-5-1992 |
| for the purpose of locating the improvements thereon, and the improvements are located as shown. | | LAND DESIGN ENGINEERING, INC. SUITE 210 10620 GUILFORD ROAD JESSUP, MARYLAND 20794 |



ZONE 'C'
FLOOD MAP
57 OF 45
12/4/1986

LOCATION SURVEY
L.1362 F.730 & L.2135 F.22A-23A
LOT 13 HOLLOWELLS ADDITION
5th ELECTION DISTRICT
HARRIS COUNTY, MD

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER
B00158827

Building Address 7085 Mink Hollow Rd
Highland MD 20777
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract 605101 Subdivision _____
 Section _____ Area _____ Lot _____
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Thomas Goff
 Address 7085 Mink Hollow Rd
 City Highland State MD Zip Code 20777
 Home Phone 301 854 3420 Work Phone 301 286 1024
 Applicant's Name & Mailing Address, (if other than stated hereon):

 Phone _____ Fax _____

Existing Use _____
 Proposed Use Deck
 Estimated Construction Cost \$ _____
 Description of Work 16x48' - elevated deck

Contractor Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 License No. _____
 Phone _____ Fax _____

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: _____ _____ Public _____ Private |
| No. of stories: _____ | Sewage Disposal: _____ _____ Public _____ 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: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> |
| Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular | Sprinkler system: <u>N/A</u> <input type="checkbox"/> _____ Full _____ Partial _____ Other Suppression _____ # of Heads |

| Building Characteristics | Utilities |
|--|--|
| SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: <u>28</u> 2nd floor: <u>32</u> Basement: <u>28</u> | Water Supply: _____ _____ Public <input checked="" type="checkbox"/> Private |
| Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u> Height: _____ | Sewage Disposal: _____ _____ Public <input checked="" type="checkbox"/> Private |
| Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ | Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ | Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> |
| _____ State Certified Modular _____ Manufactured Home | Sprinkler system: <u>N/A</u> <input type="checkbox"/> _____ NFPA #13D _____ NFPA #13R _____ Other: |

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 ON TO THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

[Signature]
 Applicant's Signature

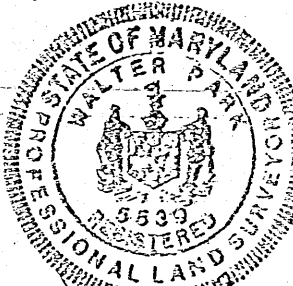
 Title/Company

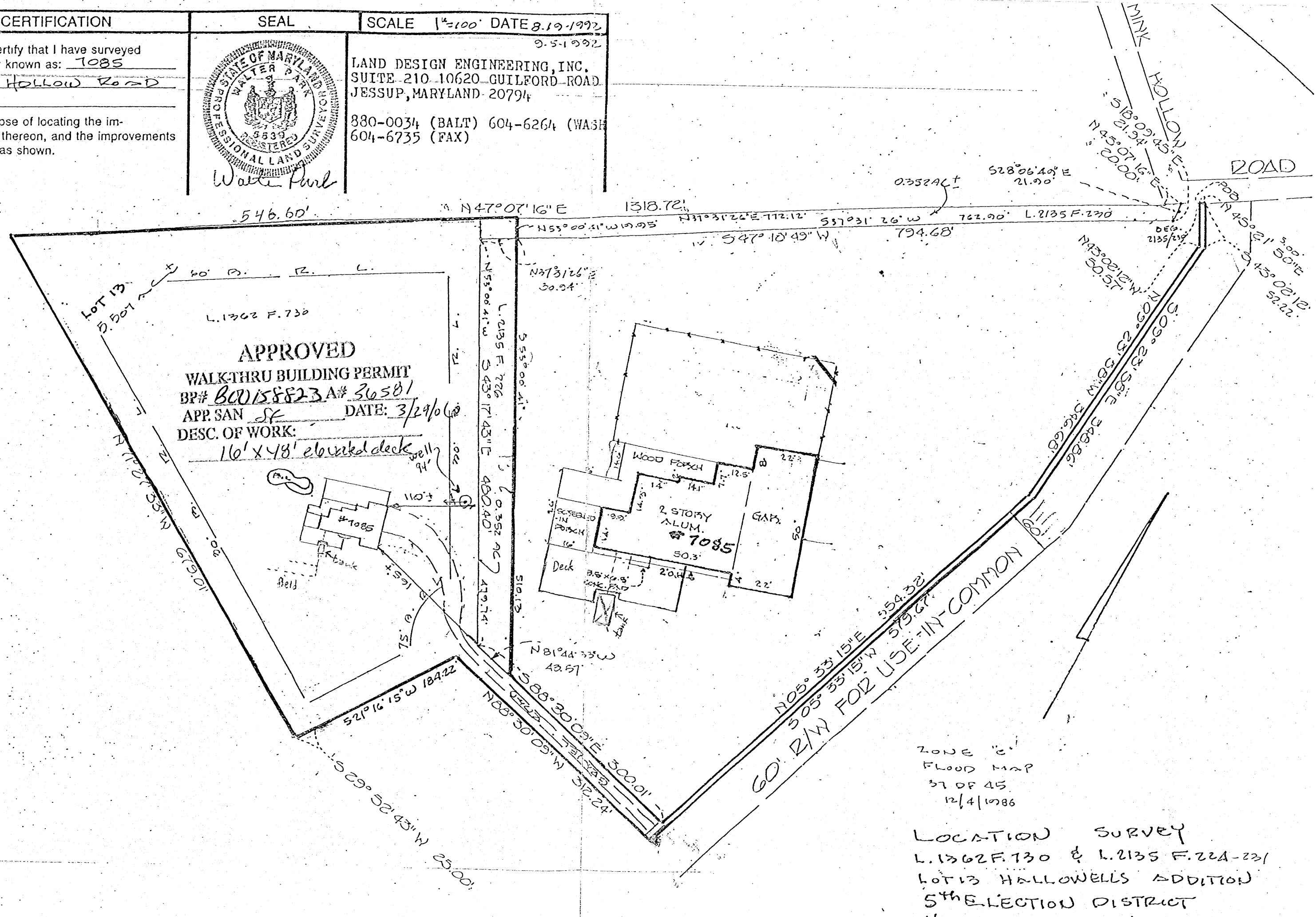
Thomas Goff
 Print Name
29 March 2006
 Date

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>3/29/06</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"/> | | |

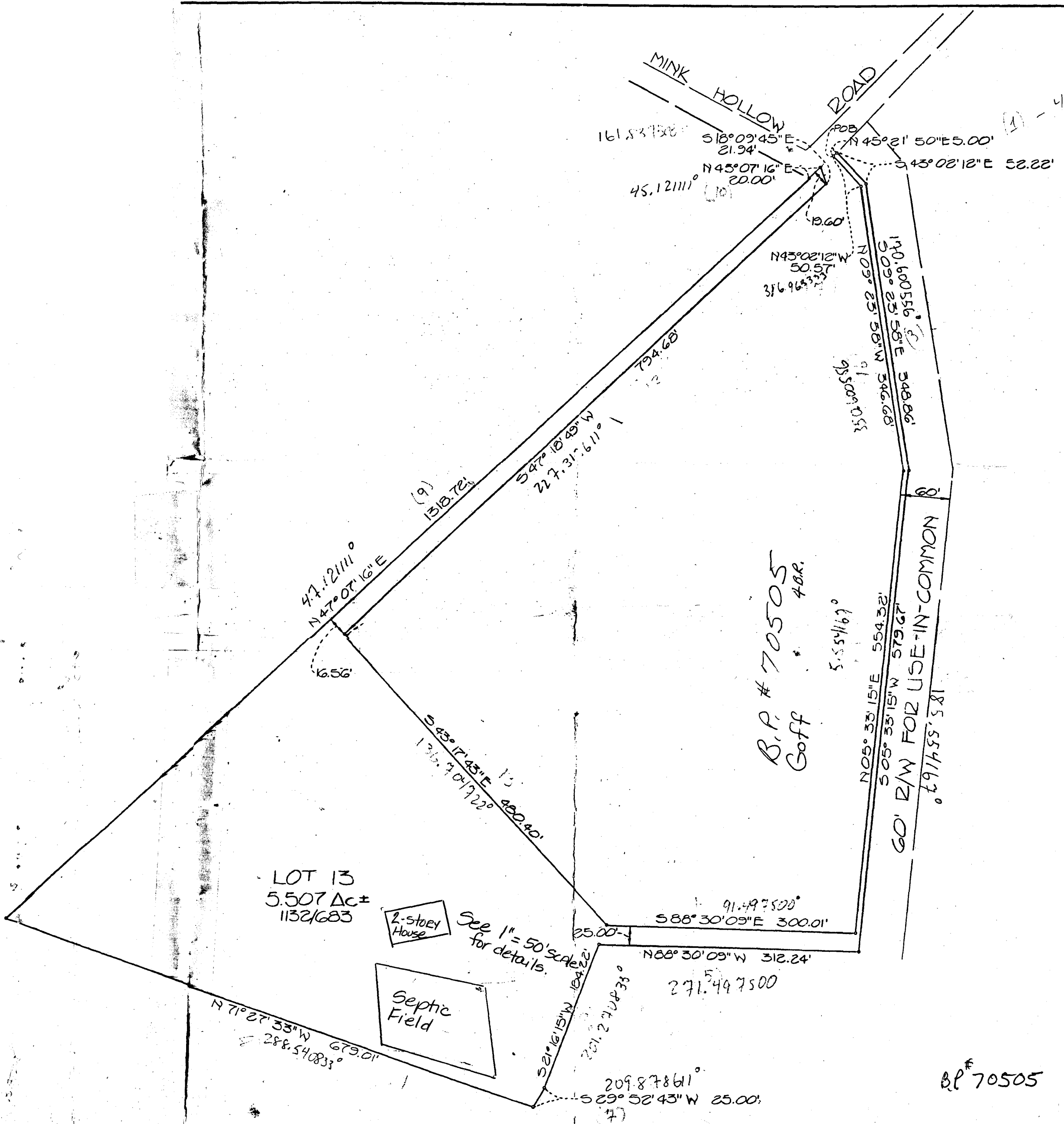
| DPZ SETBACK INFORMATION | PROPERTY ID#: |
|--|-------------------------|
| Front: _____ | Filing fee \$ _____ |
| Rear: _____ | Permit fee \$ _____ |
| Side: _____ | Excise tax \$ _____ |
| Side St.: _____ | Add'l per. fee \$ _____ |
| All minimum setbacks met? YES <input type="checkbox"/> NO <input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

| | | |
|--|--|--|
| CERTIFICATION | SEAL | SCALE 1"=100' DATE 8.19.1992 9.5.1992 |
| This is to certify that I have surveyed the property known as: <u>1085 MINK HOLLOW ROAD</u> |  Walter Park | LAND DESIGN ENGINEERING, INC. SUITE 210 10620 GUILFORD ROAD JESSUP, MARYLAND 20794 880-0034 (BALT) 604-6264 (WASH) 604-6735 (FAX) |
| for the purpose of locating the improvements thereon, and the improvements are located as shown. | | |



ZONE 'c'
 FLOOD MAP
 37 OF 45
 12/4/1986

LOCATION SURVEY
 L. 1362 F. 730 & L. 2135 F. 22A-231
 LOT 13 HOLLOWELLS ADDITION
 5th ELECTION DISTRICT
 HOWARD COUNTY, MD



LOT 13
5.507 Ac±
1132/683

2-story
House

Septic
Field

See 1" = 50' scale
for details.

B.P. # 70505
Goff

B.P. # 70505

MINK HOLLOW ROAD
161.53750' 518°09'45"E 21.94'
45.12111' N45°07'16"E 20.00'
19.60'
N45°02'12"E 50.57'
316.96533'
N45°21'50"E 5.00'
N43°02'12"E 52.22'

190.600556'
N09°23'58"W 346.68'
350.009053'
548.86'
548.86'

47.12111' N47°07'16"E
6.56'

(9)
1318.72'

547°18'49"W 227.317611'
794.68'

543°17'43"E 480.40'
1315.70/722'

60' R/W FOR USE-IN-COMMON
N05°33'15"E 554.32'
505°33'15"W 579.67'
185.554169'
5.554169°

91.497500'
588°30'09"E 300.01'
25.00'
N88°30'09"W 312.24'

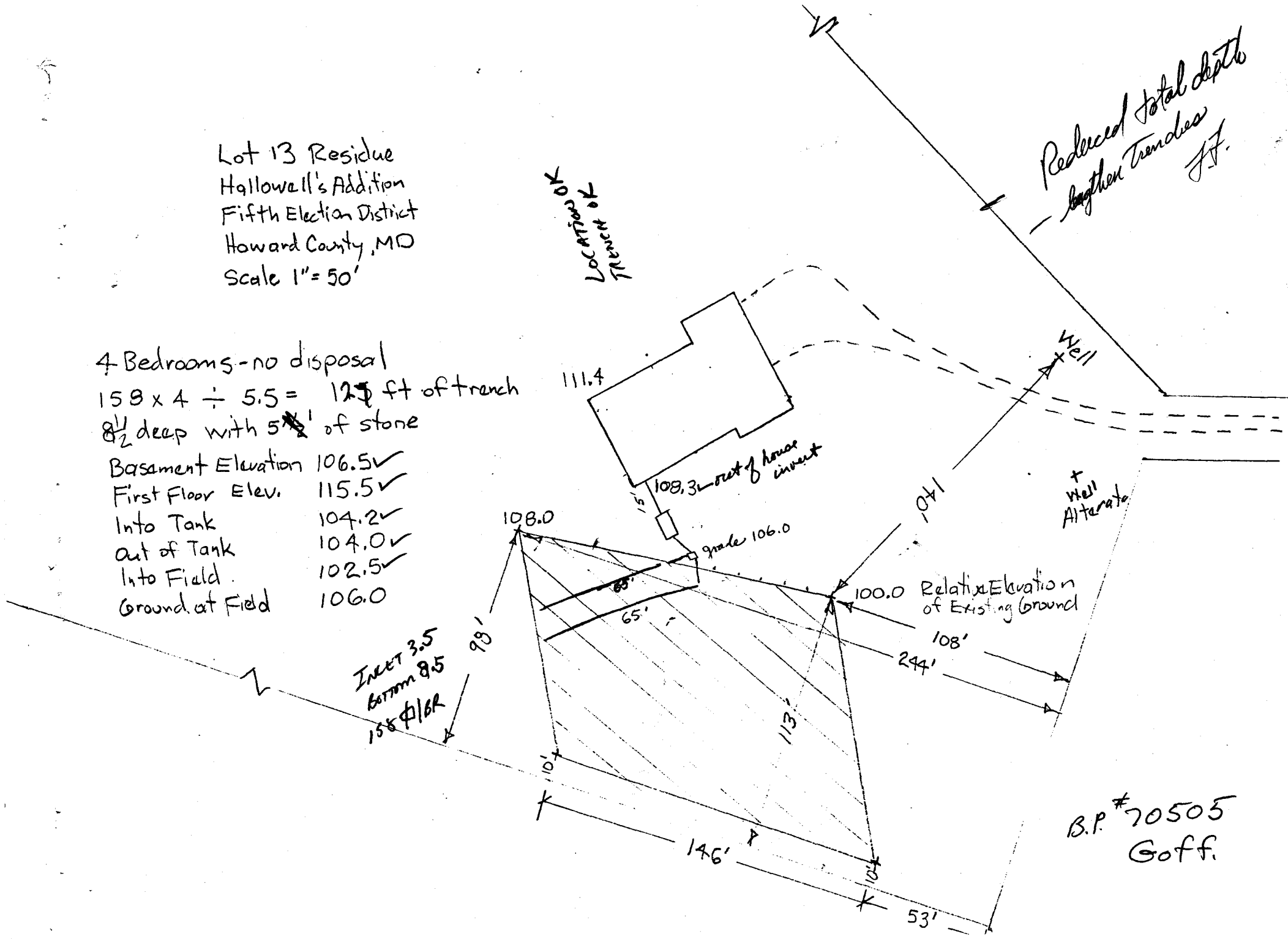
271.497500'

209.87861'
N29°52'43"W 25.00'
(7)

N71°27'33"W 679.01'
288.540833°

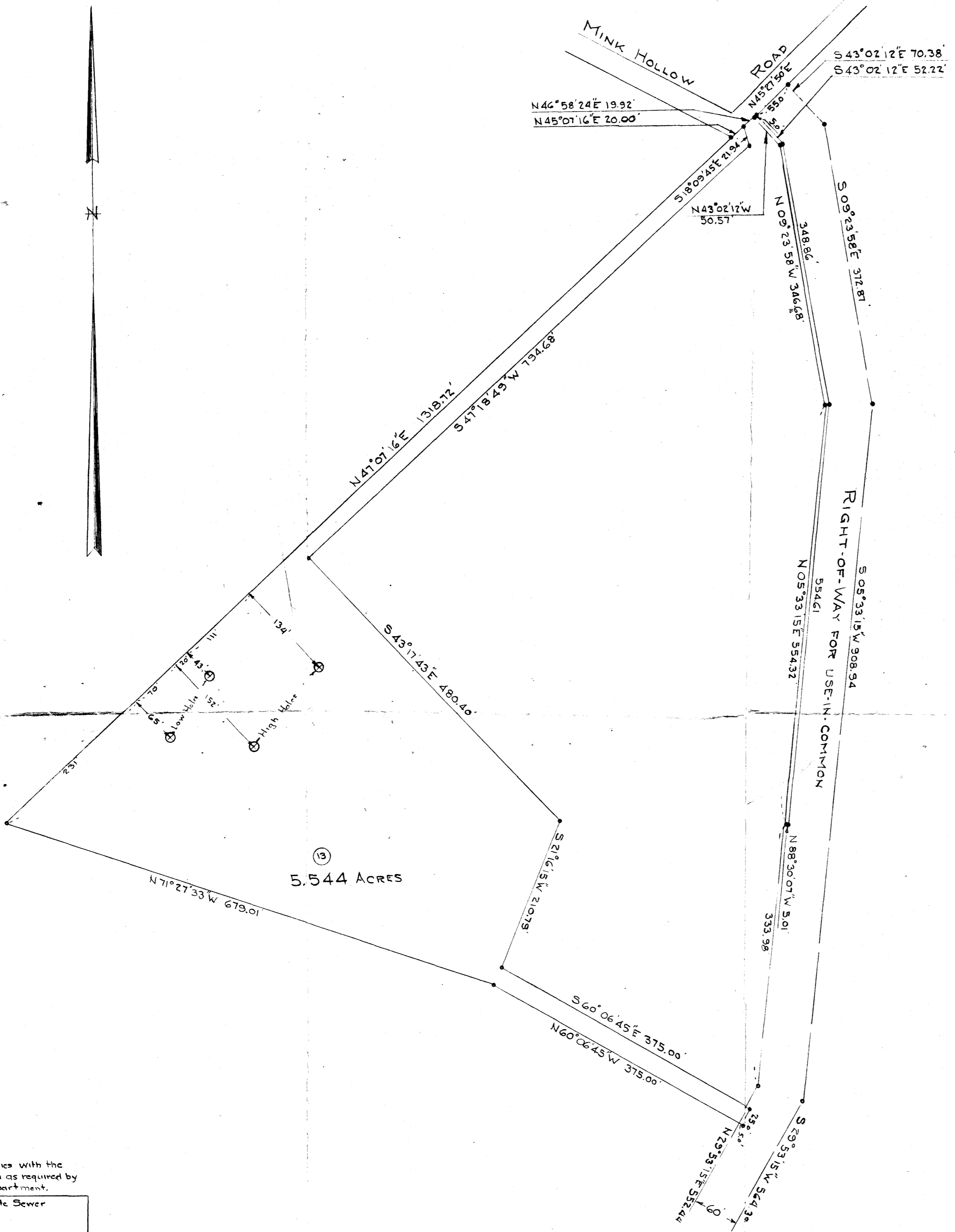
Lot 13 Residue
 Hallowell's Addition
 Fifth Election District
 Howard County, MD
 Scale 1" = 50'

4 Bedrooms - no disposal
 $158 \times 4 \div 5.5 = 125$ ft of trench
 $8\frac{1}{2}$ deep with 5' of stone
 Basement Elevation 106.5 ✓
 First Floor Elev. 115.5 ✓
 Into Tank 104.2 ✓
 Out of Tank 104.0 ✓
 Into Field 102.5 ✓
 Ground at Field 106.0



TRENCH 3.5
 BOTTOM 8.5
 15" Ø / BR

B.P. #70505
 Goff.



LOCATION SURVEY
 FOR
 HALLOWELL'S ADDITION
 FIFTH ELECTION DISTRICT OF HOWARD COUNTY
 HIGHLAND, MARYLAND.
 SCALE: 1 IN = 100 FT. NOVEMBER 6, 1973

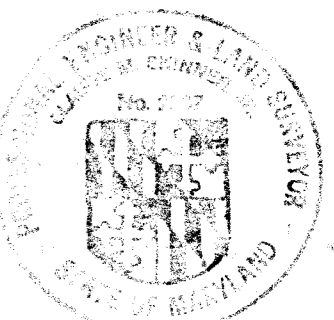
Note: The lot shown hereon complies with the minimum ownership and lot area as required by the Maryland State Health Department.

Approved: Private Water and Private Sewer

[Signature]
 Howard County Health Officer

1/16/74
 Date

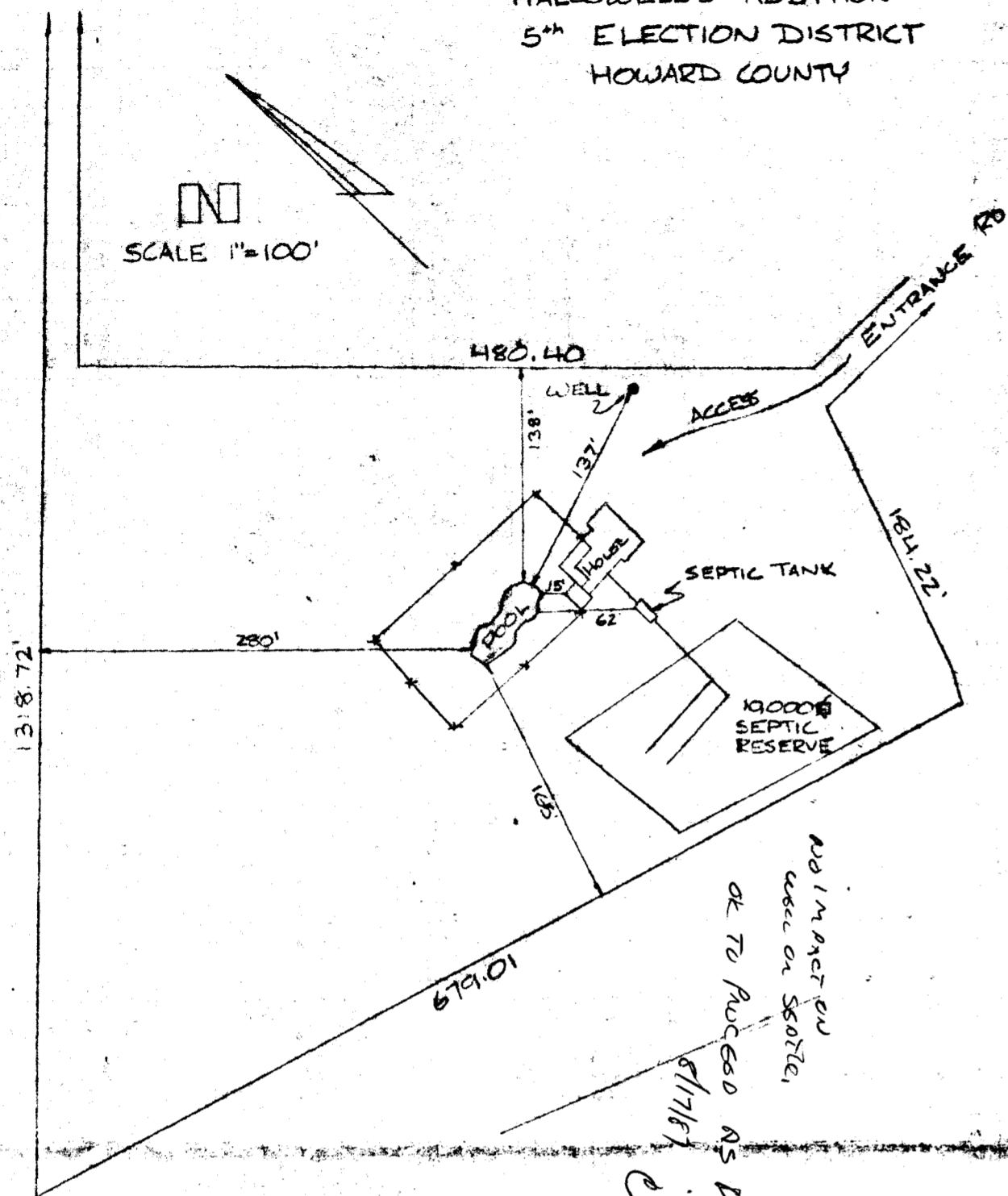
⊗ Denotes percolation test hole (actual field location)



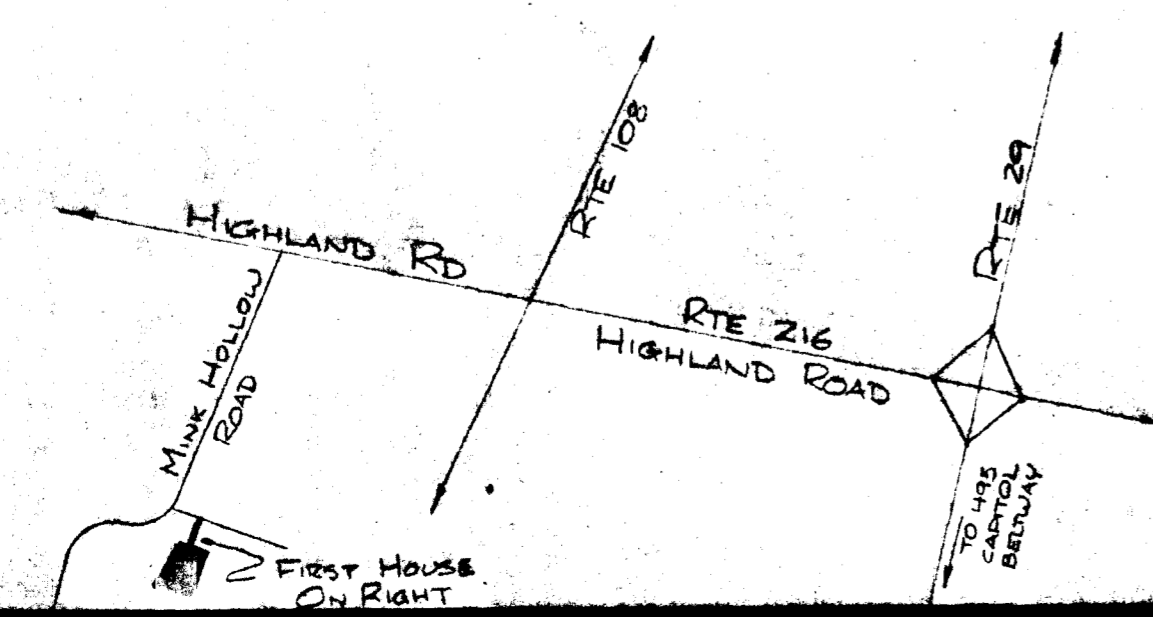
[Signature]

LOT 13 RESIDUE
HALLOWELL'S ADDITION
5th ELECTION DISTRICT
HOWARD COUNTY

SCALE 1"=100'



MAIN FACTORY
OR TO ACCESS AS DRAWN
OK TO ACCESS AS DRAWN
OK TO ACCESS AS DRAWN
OK TO ACCESS AS DRAWN



| FLOOR SYSTEM | FLUORINE | SET BACKS |
|--|-----------|-----------------------|
| FLOOR HEADS# | SKIMMER | 0 FT. HOUSE 10 FT. |
| STEP HEADS# | RETURNS | 30 FT. SIDE 30 FT. |
| BENCH HEADS# | RETURNS | 10 FT. REAR 10 FT. |
| LOVE SEAT# | AUTO CLR | 2 FT. STREET 0 FT. |
| SPA HEADS# | SPA SUCT. | 20 FT. SEPTIC 20 FT. |
| Heads may vary due to shape, size and depth. | SPA RET. | 10 FT. WELL 10 FT. |
| | AIR LINE | 48" FT. FENCE 48" FT. |
| | | FT. PUB. WATER NO |
| | | FT. PUB. SEWER NO |

| GENERAL SPECIFICATIONS * | |
|--------------------------|---|
| SIZE | 24' X 60' DEPTH 3'6" TO 9' PERIM. 132 FT. |
| SHAPE | CUSTOM MT. LAKE AREA 940 SQ. FT. |
| COPING TYPE | SEE NOTE # 1 TILE TERRA BLUE |
| MOTOR H.P. | 2 GPM FILTER 52 SQ. FT. |
| SKIMMER # | (3) THREE BACKWASH TO AREA |
| POOL EQUIPMENT * | |
| HEATER MODEL | φ SIZE φ BTU |
| TIME CLOCK TYPE | STANDARD (2) TWO DELAY φ |
| POOL CLEANING SYSTEM | SUPER-VAC |
| SPA φ SQ. FT. | AIR INJECTORS # φ BLOWER φ |
| SPA LIGHT # | φ VOLT φ WATT |
| POOL LIGHT # | (2) TWO 110 VOLT 300 WATT |
| BOARD MODEL | φ SIZE φ FT. TILE φ |
| LADDER MODEL | φ TILE φ LOVESEAT (2) 6' FT. |
| CLEANING TOOLS | YES VACUUM WITH 50 FT. HOSE |
| POOL BENCH | 5 FT. ROPE RINGS & FLOATS YES |
| SITE CONDITIONS * | |
| PRE SITE GRADING | (1) ONE HR. DIRT WALK φ FT. |
| DIRT HAUL | φ DIRT STAY YES |
| CONCRETE REMOVAL | φ SQ. FT. φ |
| STUMPS # | φ PUSH OVER ONLY φ HAUL φ |
| TREES TO BE CUT BY: | OWNER |

- SPECIAL NOTES *
- 1) FLAGSTONE COPING - BUYER TO PROVIDE STONE
 - 2) ANTHO-FLOW
 - 3) STUB-OUT FOR WATERFALL (OWNER TO DO WATERFALL)
 - 4) BLACK PLASTER

PERMIT OFFICE HOWARD COUNTY
LOT 13 BLOCK SUB. DIV.
SALESMAN ROBERT PET MANAGER JOE KAGEN
SALES OFFICE BALTIMORE PH. # 922-8300
CONSTRUCTION OFFICE PH. # 703-451-9454
JOB # 760 CONTRACT DATE AUGUST 2, 1987
CASH YES LOAN φ

DATE DWN 8/3/87
DWN BY M
CKD BY
MAD 13
H-13

SWIMMING POOL
NAME THOMAS GOFF & VIRGINIA KALB
ADDRESS 7085 MINK HOLLOW ROAD
HIGHLAND, MARYLAND 20711
CROSS STREETS
RES. PHONE 854-3420 BUS. PHONE 286-2605
ANTHONY POOLS
A Division of Anthony Industries, Inc.

BUYER:
TO DETERMINE APPROXIMATE ELEVATION OF POOL ON DAY OF EXCAVATION.

BUYER:
POOL AREA TO BE FENCED, PER COUNTY OR CITY ORDINANCE. GATES TO BE SELF CLOSING AND SELF LATCHING.
BY BUYER

BUYER:
WET DOWN CONCRETE SHELL AT LEAST TWICE DAILY FOR 7 DAYS. DO NOT TURN ON POOL LIGHT WHEN POOL IS EMPTY.

NOTE SCALE 1/8" = 1'0"

TAKE 29(N) TO 216(W)
TO 108, GO STRAIGHT
TO HIGHLAND RD TO
(L) ON MINK HOLLOW RD
TO (L) ON ACCESS RD
TO SITE ON (R)