

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER

600158429

Building Address 7305 Mink Hollow Road
Highland, MD 20777
 Suite/Apt. #: N/A SDP/WP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot _____
 Tax Map _____ Parcel 142 Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name David F. Baker
 Address 7305 Mink Hollow Rd
 City Highland State MD Zip Code 20777
 Home Phone 301 854 0369 Work Phone 703 724 2285
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use Roadside
 Proposed Use Roadside
 Estimated Construction Cost \$ 3000
 Description of Work Screen Porch and
Deck Addition

Contractor Company N/A
 Contact Person _____
 Address Same
 City Same State Same Zip Code Same
 License No. _____ Phone _____ Fax _____

Occupant or Tenant Occupant
 Contact Name David Baker
 Address 7305 Mink Hollow Rd
 City Highland State MD Zip Code 20777
 Phone 301 854 0369 Fax _____

Engineer or Architect Company N/A
 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: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <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 _____ 1st floor: <u>20'</u> 2nd floor: <u>30'</u> 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 _____ Height: <u>8'</u> Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	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 checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Heating System: _____ Electric <input type="checkbox"/> Oil <input checked="" 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.

David F. Baker
 Applicant's Signature

David F. Baker
 Print Name

 Title/Company

2/22/06
 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>3-7-06</u>	<u>[Signature]</u>
Fire Protection		

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

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

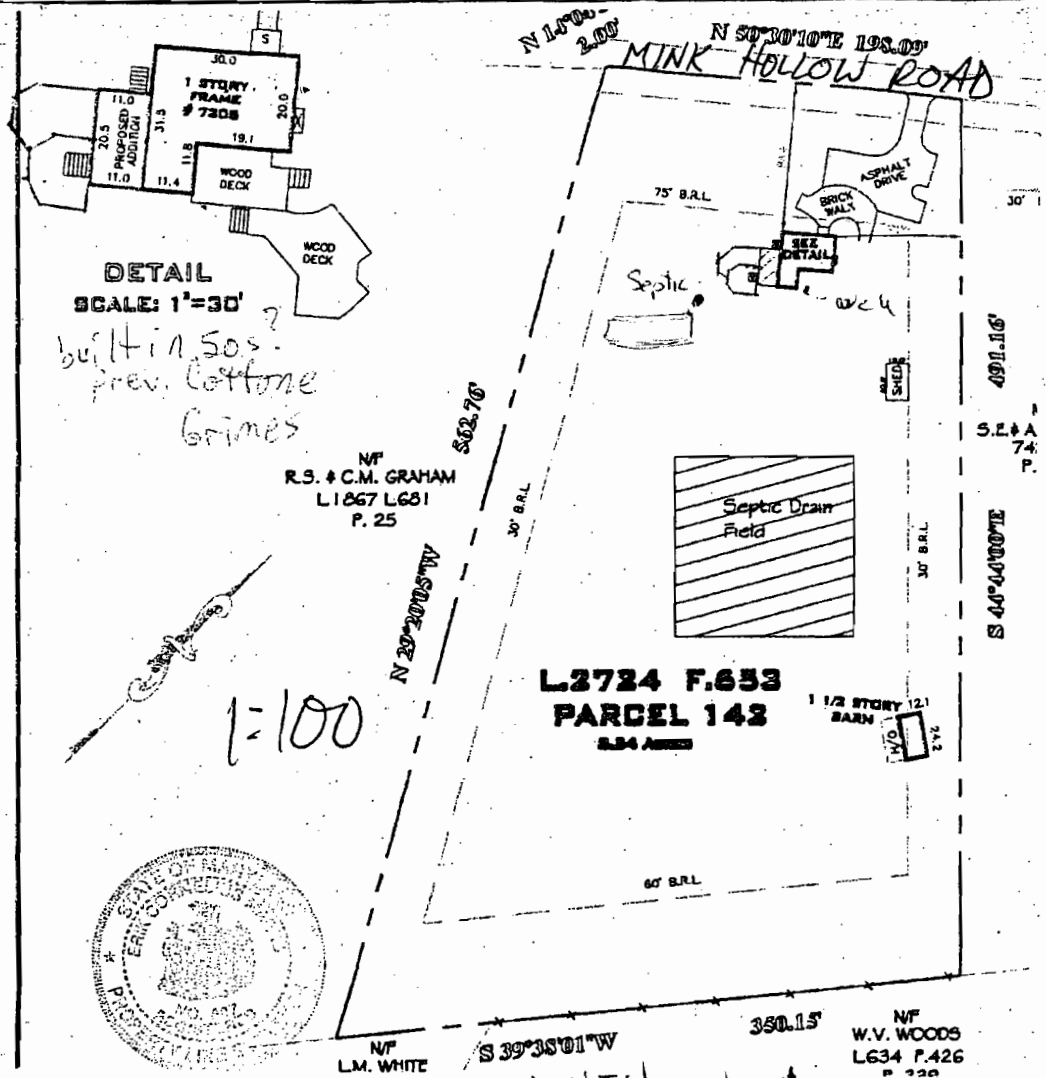
Distribution of Copies: White: Building Official Green: LDD, DPZ

Yellow: DEC, DPZ Pink: Health Gold: SHA

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1 BR
ADD'N OK
FOR
ADD'N TO
EX. 1 BR
HOUSE
MR 4/2/04

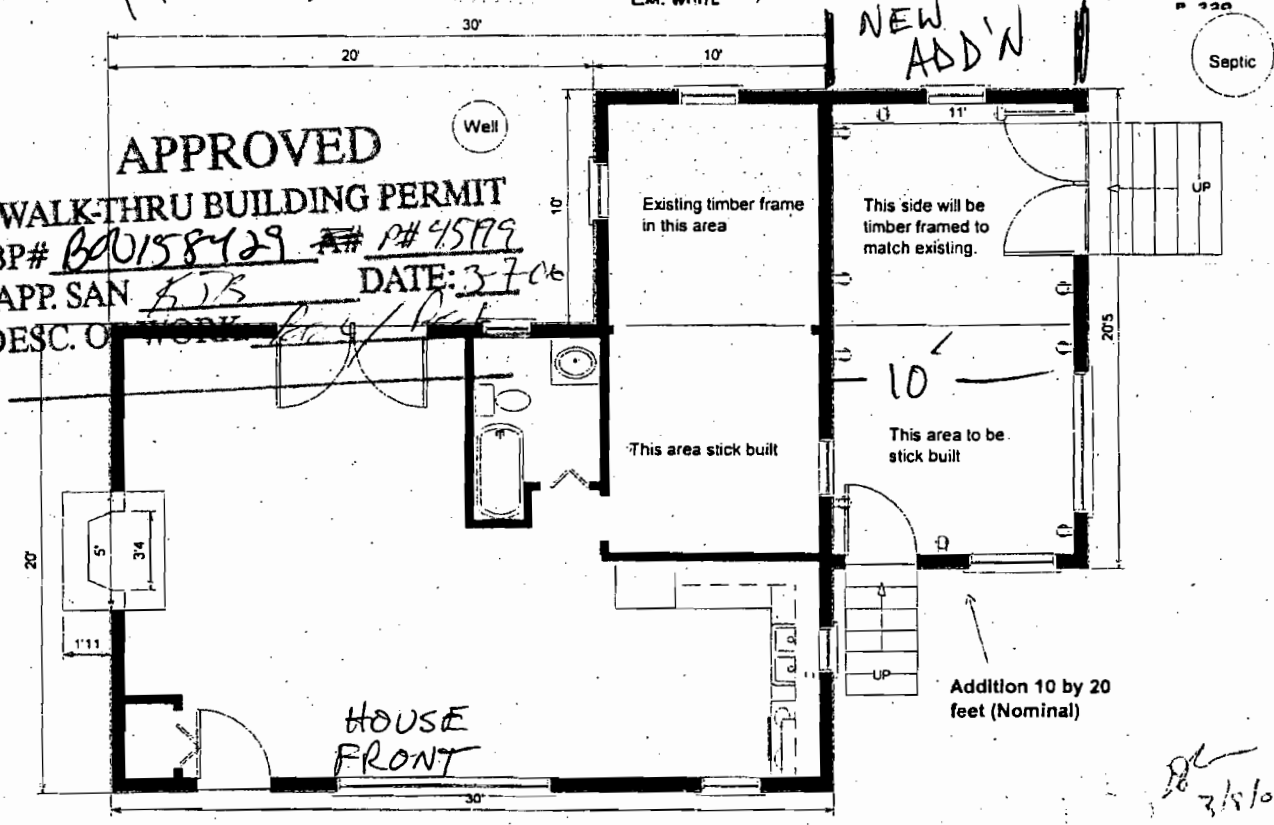
Septic tank
20' x 10' pit



DETAIL
SCALE: 1"=30'
built in 50s.
prev. Cottone
Grimes

1:100

APPROVED
WALK-THRU BUILDING PERMIT
BP# B00158429 # P#45799
APP. SAN BJB DATE: 3-7-06
DESC. OF WORK front porch



3/8/04