

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

808001498

Building Address 6709 MONTELL DRIVE
HIGHLAND, MD 20777

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

Census Tract _____ Subdivision 8E

Section A Area _____ Lot 8

Tax Map 34 Parcel 243 Grid _____

Zoning RR Map Coordinates _____ Lot size 1.25 ACRES

Property Owner's Name NICHOLAS J. & CAROL L. PREVAS

Address 6709 MONTELL DRIVE

City HIGHLAND State MD Zip Code 20777

Phone 410-531-3745 Phone NA

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

Phone _____ Fax _____

Existing Use RESIDENTIAL

Proposed Use RESIDENTIAL

Estimated Construction Cost \$ 13,000

Description of Work CARPONET 11'X22'
ON ASPHALT POST + PIER - OPEN
ROOF: PLYWOOD/ASPHALT SHINGLE
GABLE ROOF

Contractor Company NA

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. _____

Phone _____ Fax _____

Occupant or Tenant NICHOLAS PREVAS JR

Contact Name NICHOLAS PREVAS

Address 6709 MONTELL DRIVE

City HIGHLAND State MD Zip Code 20777

Phone 410-531-3745 Fax _____

Engineer or Architect Company NA

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 _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/>
_____ State Certified Modular	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 _____ Private <input checked="" type="checkbox"/>
Depth _____ Width _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: <u>27'</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2nd floor: <u>27'</u>	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Basement: <u>27'</u>	Heating System: _____ Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Natural Gas <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Propane Gas <input type="checkbox"/>
No. of Bedrooms <u>4</u>	Sprinkler system: N/A <input checked="" type="checkbox"/>
Height: <u>2 STORY</u>	_____ NFPA #13D
Multi-family dwellings: _____	_____ NFPA #13R
No. of efficiency units: _____	Other: _____
No. of 1 BR units: _____	
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure: <u>BECK GARAGE</u>	
Dimensions: <u>35X15 22X22</u>	
Footings: <u>CONCRETE</u>	
Roof Height: <u>15'00"</u>	
_____ State Certified Modular	
_____ 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 HIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Nicholas J. Prevas Jr.
Applicant's Signature

NICHOLAS J. PREVAS, JR.
Print Name

05/20/08
Date

Title/Company

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>5/20/08</u>	<u>R. Buehler</u>
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <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 New Town Zone _____	
SDP/Red-line approval date _____	Accepted by _____

CONTINGENCY CONSTRUCTION START:

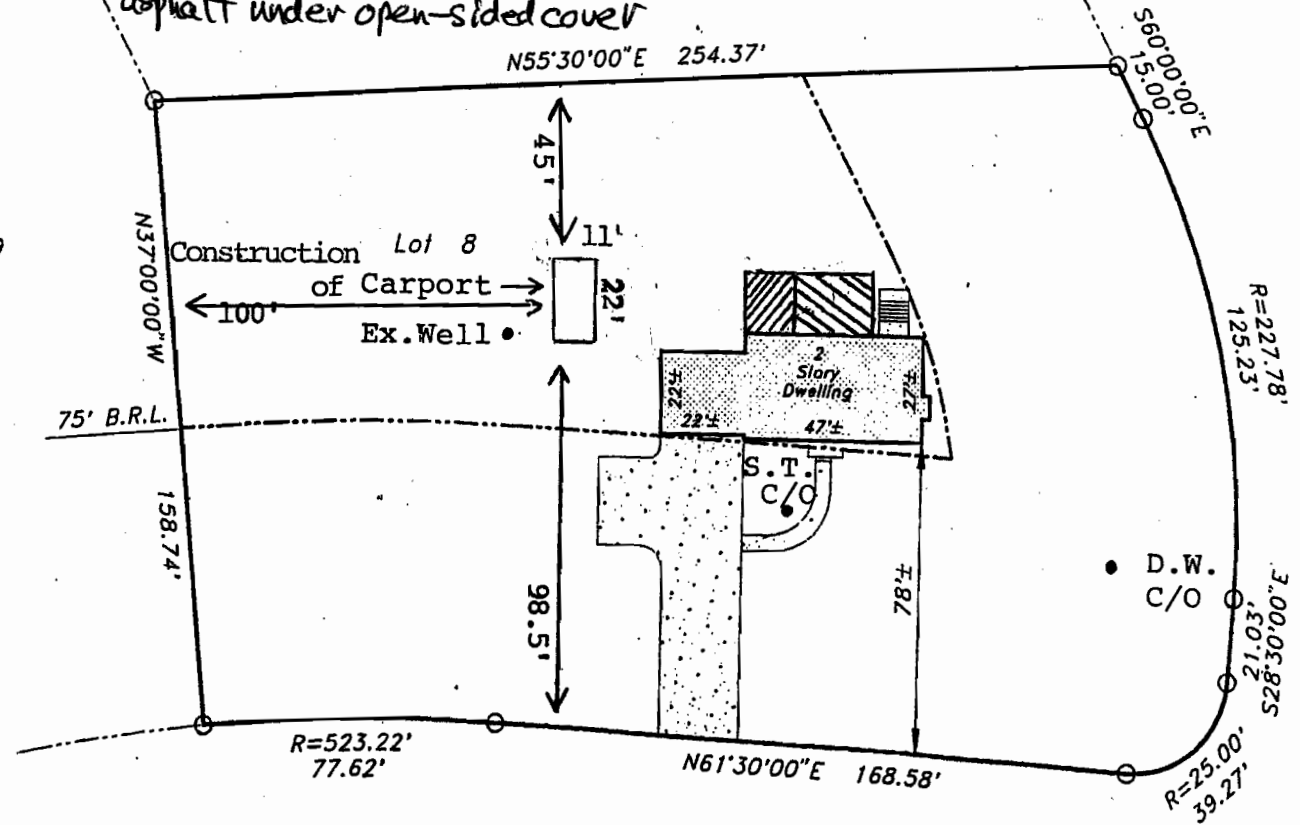
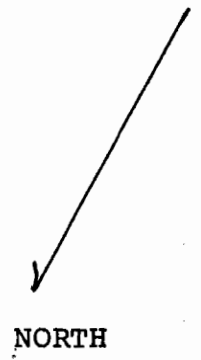
ONE STOP SHOP:

Lot Number : 8
 Block/Section : A
 Plat Reference : Book : 10 Page : 74
 Title of Plat : Plat of Block A, and
 Part of Block C, Green
 Hill Manor

Lot Dimension: 1.25 acres
 Square Footage: 54,450
 Setback (RR Accessory Structure)
 Street Front: 75'
 Other Side: 10'
 Other Rear: 10'

APPROVED

WALK-THRU BUILDING PERMIT
 BP# 808001498 A#
 APP. SAN *Rhodes* DATE: *5/20/08* Lot 7
 DESC. OF WORK: *construct 11' x 22'*
carport as shown
asphalt under open-sided cover



MONTELL COURT

6709
 MONTELL DRIVE
 Highland, MD 20777

SCALE 1" = 50'

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B07002000

Building Address 6709 Montell Drive
Highland, MD 20777

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

Census Tract _____ Subdivision 8 E

Section A Area _____ Lot 8

Tax Map 34 Parcel 243 Grid _____

Zoning RR Map Coordinates _____ Lot size 1.25 acres

Property Owner's Name Nicholas J. & Carol L. Prevas
 Address 6709 Montell Drive

City Highland State MD Zip Code 20777

Home Phone 410-531-3745 Work Phone NA

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

Existing Use Residential
 Proposed Use Residential
 Estimated Construction Cost \$ 13,000

Description of Work 10 X 22' enlargement of
 existing garage

Contractor Company NA
 Contact Person _____

Address _____
 City _____ State _____ Zip Code _____
 License No. _____
 Phone _____ Fax _____

Occupant or Tenant Nicholas Prevas
 Contact Name Nicholas Prevas
 Address 6709 Montell Drive
 City Highland State MD Zip Code 20777
 Phone 410-531-3745 Fax _____

Engineer or Architect Company NA
 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	Sprinkler system: <u>N/A</u> <input type="checkbox"/> _____ Full _____ Partial _____ Other Suppression _____ # of Heads
_____ State Certified Modular	

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: <u>27'</u> <u>47'</u> 2nd floor: <u>27'</u> <u>38'</u> Basement: <u>27'</u> <u>47'</u>	Water Supply: _____ _____ Public <input checked="" type="checkbox"/> Private Sewage Disposal: _____ _____ 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: <u>2 story</u> 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: <u>deck garage</u> Dimensions: <u>35X15'</u> <u>22X22'</u> Footings: <u>concrete</u> Roof Height: <u>1 story</u>	Heating System: _____ Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
_____ State Certified Modular _____ Manufactured Home	Sprinkler system: <u>N/A</u> <input checked="" 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 ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Nicholas J. Prevas
 Applicant's Signature

NICHOLAS J. PREVAS, JR.
 Print Name

Title/Company _____

Date 5/21/07

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **

FOR OFFICE USE ONLY

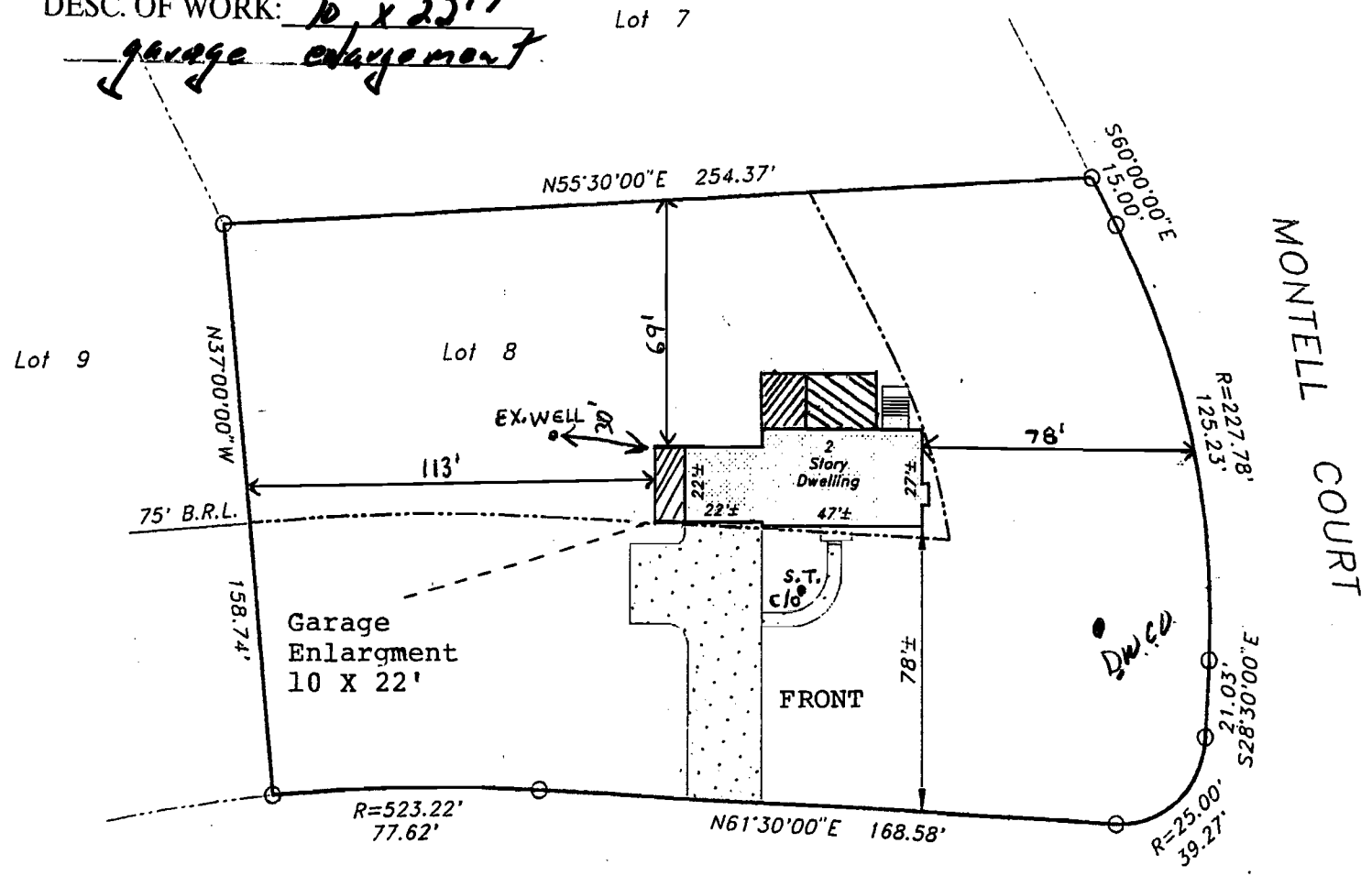
AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: _____	Filing fee \$ _____
State Highway			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering DPZ	<u>5/21/07</u>	<u>[Signature]</u>	Side St: _____	Add'l per. fee \$ _____
Health			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	Check # _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # _____
Distribution of Copies: _____	White: Building Official	Green: LDD, DPZ	Accepted by _____	
T:\Name\PERMIT.FRM			Yellow: DED, DPZ	
			Pink: Health	
			Gold: SHA	

Lot Number : 8
 Block/Section : A
 Plat Reference : Book : 10 Page : 74
 Title of Plat : Plat of Block A, and
 Part of Block C, Green
 Hill Manor .

Lot Dimension: 1.25 acres
 Square Footage: 54,450
 Setback (RR rear): 30' (prin
 struct)

APPROVED

WALK-THRU BUILDING PERMIT
 BP# BO7002000 ~~#~~ P49609
 APP. SAN SFO DATE: 5/21/07
 DESC. OF WORK: 10' x 22'
garage enlargement



6709 MONTELL DRIVE
 HIGHLAND, MD 20777

SCALE 1" = 50'

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

300160172

Building Address 6709 Montell Drive
Highland, MD 20777

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

Census Tract _____ Subdivision 8E

Section A Area _____ Lot 8

Tax Map 34 Parcel 243 Grid _____

Zoning RR Map Coordinates _____ Lot size 1.25 acres

Property Owner's Name Nicholas J., Jr. & Carol L. Prevas
Address 6709 Montell Drive

City Highland State MD Zip Code 20777

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

Phone _____ Fax _____

Existing Use Residence
Proposed Use Residence
Estimated Construction Cost \$ 20,000.00

Description of Work Deck with partial enclosure
attached to rear of house. Deck overall 35X15'
includes enclosed portion 21X15'.

Contractor Company NA

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. _____
Phone _____ Fax _____

Occupant or Tenant Nicholas & Carol Prevas

Engineer or Architect Company NA

Contact Name Nicholas Prevas

Contact Person _____

Address 6709 Montell Drive

Address _____

City Highland State MD Zip Code 20777

City _____ State _____ Zip Code _____

Phone 410-531-3745 Fax _____

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

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: Depth <u>27'</u> Width <u>47'</u>	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: <u>27'</u> <u>38'</u>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Basement: <u>27'</u> <u>47'</u>	Heating System: Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	
No. of Bedrooms <u>4</u>	
Height: <u>2 story</u>	
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>attached garage</u>	
Dimensions: <u>22x22'</u>	
Footings: <u>concrete</u>	
Roof Height: <u>1 story</u>	
<input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	

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Nicholas J. Prevas, Jr.
Applicant's Signature

Nicholas J. Prevas, Jr.
Print Name

June 12, 2006
Date

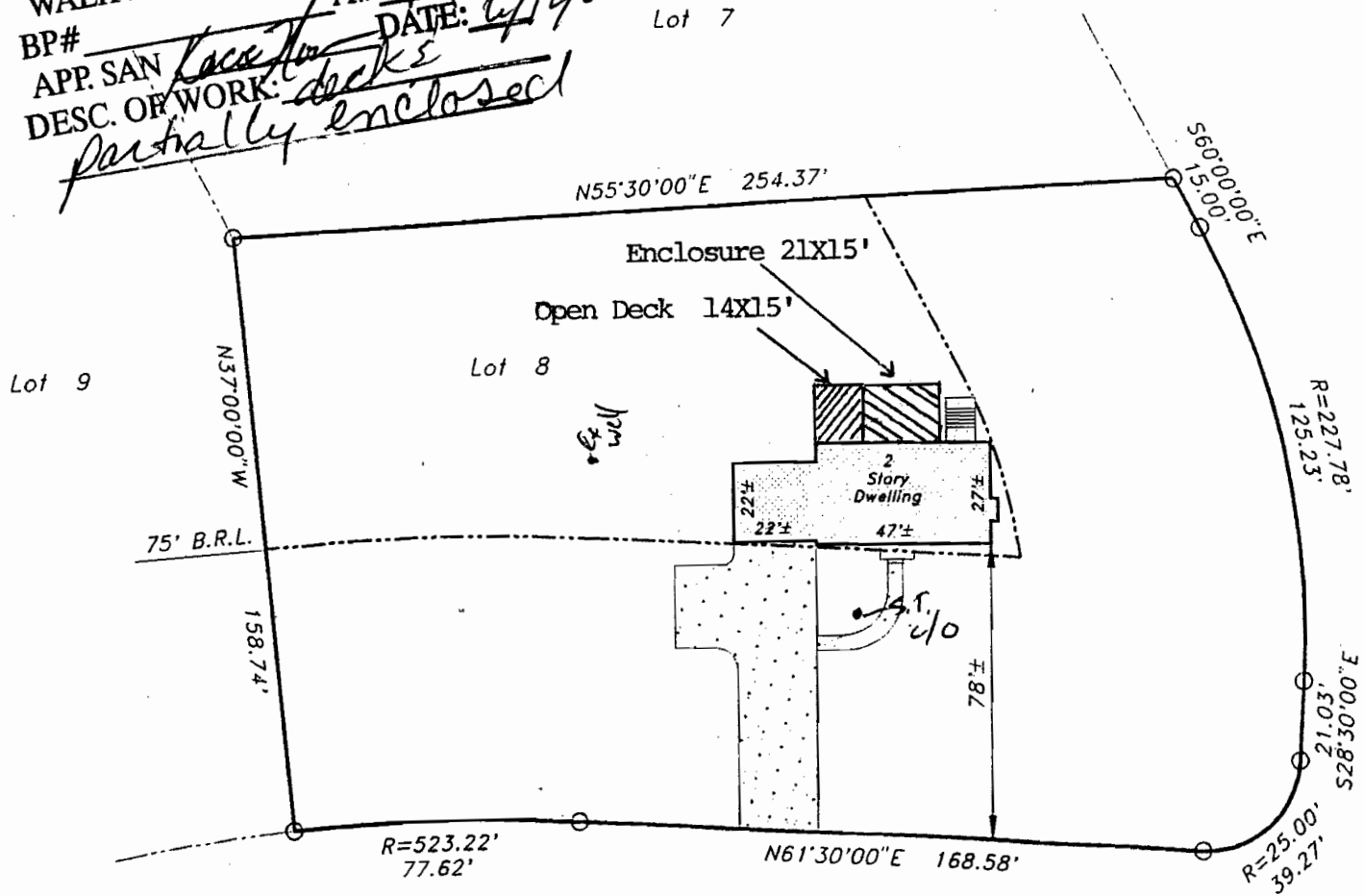
Title/Company _____
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

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			Side St.: _____	Add'l per. fee \$ _____
Health	<u>6/12/06</u>	<i>Kousser</i>	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"/>	
Distribution of Copies -	White: Building Official	Green: LDD, DPZ	Lot Coverage for NewTown Zone _____	Accepted by _____
T:\forms\PERMIT.FRM			SDP/Red-line approval date _____	
			Yellow: DED, DPZ	Pink: Health
				Gold: SHA

Lot Number : 8
Block/Section : A
Plat Reference : Book : 10 Page : 74
Title of Plat : Plat of Block A, and
Part of Block C, Green
Hill Manor

APPROVED
WALK-THRU BUILDING PERMIT
BP# _____ A# P491609
APP. SAN Location DATE: 6/12/06
DESC. OF WORK: decks
partially enclosed

1.50
Scale



6709 MONTELL DRIVE