

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER
 B08003073

Building Address 12148 Mount Albert Rd Property Owner's Name Ken + Anne Ryals
 Suite/Apt. #: _____ SDP/WP/Petition #: _____ Address 12148 Mount Albert Rd
 Census Tract _____ Subdivision _____ City Elicott City State md Zip Code 21042
 Section _____ Area _____ Lot 44 Phone 443-535-8878 Phone _____
 Tax Map 22 Parcel 168 Grid 12 Applicant's Name & Mailing Address, (if other than stated hereon):
Jeremy Clary 7051 Macbeths Way
 Zoning _____ Map Coordinates _____ Lot size 2.30 A Eldersburg md 21754
 Phone 443-340-1279 Fax _____

Existing Use SED Contractor Company CUSTOM WORKS INC.
 Proposed Use SED w/ Deck Contact Person Colin Wilson
 Estimated Construction Cost \$ 9200 Address PO BOX 175
 Description of Work CONST 8x36 open Deck and 8x14 City Rwa State md Zip Code 21140
open Deck. Remove + Replace Deck Boards + Rails on 8x License No. 91395
14x14 open Deck. Phone 410-665-1119 Fax _____

Occupant or Tenant Ken + Anne Ryals Engineer or Architect Company _____
 Contact Name Same Contact Person _____
 Address 12148 Mount Albert Rd Address _____
 City Elicott City State md Zip Code 21042 City _____ State _____ Zip Code _____
 Phone _____ Fax _____ Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics		Utilities	
Height:		Water Supply:	
No. of stories:		Public <input type="checkbox"/>	Private <input type="checkbox"/>
Gross area, sq. ft. per floor:		Sewage Disposal:	
Use group:		Public <input type="checkbox"/>	Private <input type="checkbox"/>
Construction type		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Reinforced Concrete		Heating System:	
<input type="checkbox"/> Structural Steel		Electric <input type="checkbox"/> Oil <input type="checkbox"/>	Natural Gas <input type="checkbox"/>
<input type="checkbox"/> Masonry		Natural Gas <input type="checkbox"/>	Propane Gas <input type="checkbox"/>
<input type="checkbox"/> Wood Frame		Sprinkler system: N/A <input type="checkbox"/>	
<input type="checkbox"/> State Certified Modular		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:	
Depth _____ Width _____		Public <input type="checkbox"/>	Private <input type="checkbox"/>
1st floor:		Sewage Disposal:	
2nd floor:		Public <input type="checkbox"/>	Private <input type="checkbox"/>
Basement:		Electric Yes <input type="checkbox"/> No <input type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>		Heating System:	
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>		Electric <input type="checkbox"/> Oil <input type="checkbox"/>	Natural Gas <input type="checkbox"/>
No. of Bedrooms _____		Natural Gas <input type="checkbox"/>	Propane Gas <input type="checkbox"/>
Height: _____		Sprinkler system: N/A <input type="checkbox"/>	
Multi-family dwellings:		N/A #13D <input type="checkbox"/>	N/A #13R <input type="checkbox"/>
No. of efficiency units: _____		Other: _____	
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 Jeremy Clary Print Name Jeremy Clary
 Title/Company _____ Date 10/15/08

Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

** PLEASE WRITE NEATLY AND LEGIBLY **

- FOR OFFICE USE ONLY -

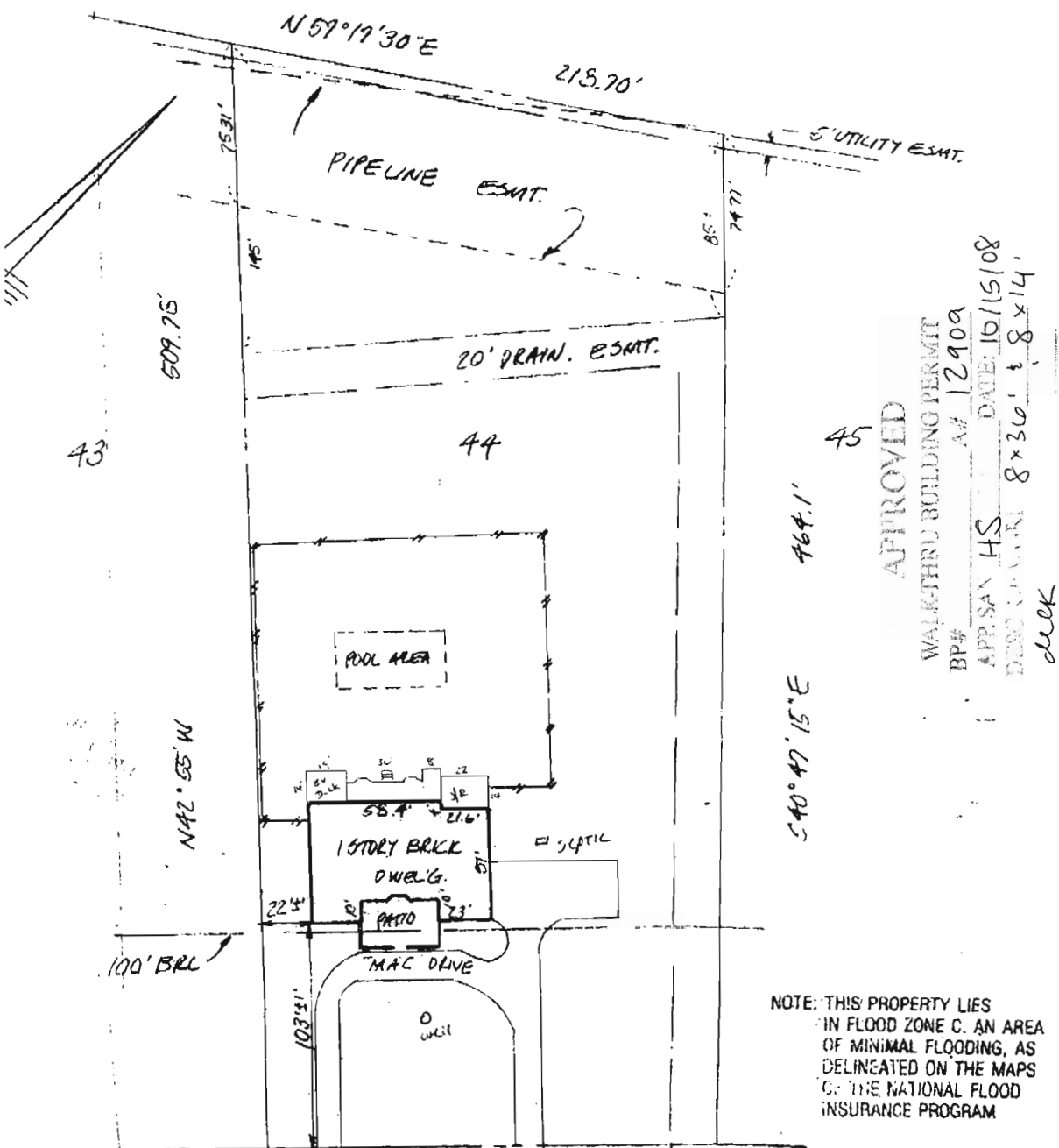
AGENCY	DATE	SIGNATURE/ APPROVAL	DPZ SET BACK INFORMATION	PROPERTY ID#:
Land Development DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St: _____	Add'l per. fee \$ _____
Health	<u>10/15/08</u>	<u>Jeremy Clary</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 # _____
			Historic District?	Validation # _____
			YES <input type="checkbox"/> NO <input type="checkbox"/>	
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for Newtown Zone _____	
ONE STOP SHOP: <input type="checkbox"/>			SDP Red-line approval date _____	Accepted by _____
Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA				

(13750)
A 12969
P. 37321

LANDTECH ASSOCIATES, INC.

1410 CRAIN HIGHWAY, N.W. SUITE 701 GLEN BURNE, MD 21061
410 768-2121 FAX 410 553-9081

NOTE: NOT TO BE USED FOR THE ISSUANCE OF PERMITS.



APPROVED
WALK-THRU BUILDING PERMIT
BP# A# 12909
APP. SAN HS DATE: 10/15/08
DESC. OF WORK 8x30' x 8x14'
deck

NOTE: THIS PROPERTY LIES IN FLOOD ZONE C, AN AREA OF MINIMAL FLOODING, AS DELINEATED ON THE MAPS OF THE NATIONAL FLOOD INSURANCE PROGRAM

- Notes:
- 1) This plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or re-financing.
 - 2) This plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.
 - 3) This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing.
 - 4) No title report furnished.



547° 05' W 176.21' R=545.87' L=70.29'
MOUNT ALBERT ROAD

Certification: This is to certify that the improvements indicated hereon are located as shown.

Graden A. Rogers
GRADEN A. ROGERS - Prof. L.S. MD, Lic. No. 119

LIBER	FOLO		
LOT 44	BLOCK C	SECT. 1	PLAT
PLAT ENTITLED WOODMARK			
RECORDED IN HOWARD CO. MD.			
PLAT BOOK 13	FOLO 62	SCALE 1" = 60'	CASE NO. MC-5010
		DATE 1-2-2004	JOB NO. MC100105

12150 MOUNT ALBERT ROAD