

MAIL TO COUNTY JABS

Building Address <u>2915 NEW RIVER RD</u> <u>WEST FRIENDSHIP, MD. 21114</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>6030</u> Subdivision <u>FRIENDSHIP LAKES</u> Section <u>1</u> Area <u>1</u> Lot <u>8</u> Tax Map <u>15</u> Parcel <u>175</u> Grid <u>1A</u> Zoning <u>RR</u> Map Coordinates <u>965</u> Lot size _____	Property Owner's Name <u>WILLIAMS GROUP</u> Address <u>5495 PARKERS FARM RD</u> City <u>WILMINGTON</u> State <u>MD</u> Zip Code <u>21044</u> Home Phone <u>410-197-8800</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____
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Existing Use <u>SINGLE FAMILY DWELLING</u> Proposed Use <u>SINGLE FAMILY DWELLING</u> Estimated Construction Cost \$ <u>3500</u> Description of Work <u>REPAIR WITH ROOFING</u> <u>PROPOSE TRUCK ALSO GET LINE,</u> <u>1000 gal tank</u>	Contractor Company <u>WILLIAMS GROUP</u> Contact Person <u>TONY COCHRAN</u> Address <u>114 W. BALBOA BLVD</u> City <u>MT. AIRY</u> State <u>MD</u> Zip Code <u>21171</u> License No. <u>47-954-01475</u> Phone <u>410-907-2928</u> Fax <u>410-295-594</u>
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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 _____
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BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
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 _____ 1st floor: _____ 2nd floor: _____ Basement: _____ <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade 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: _____ Dimensions: _____ 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 checked="" type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input checked="" type="checkbox"/> Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:

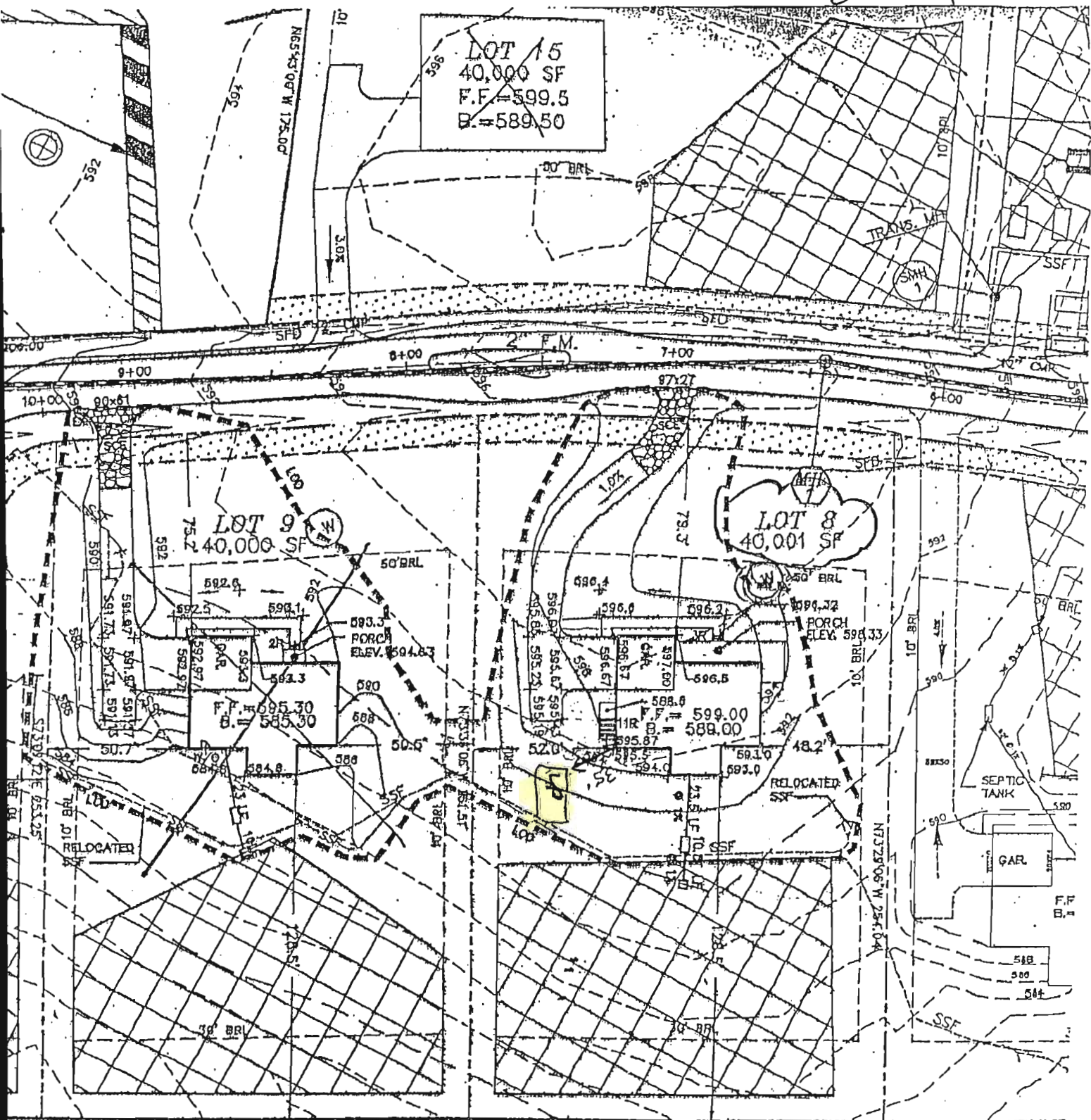
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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 <u>UNITED PROPANE</u> <u>MOSTEFE COCHRAN</u> Title/Company _____	Print Name <u>MURAL CARPETT</u> <u>8-30-02 9-6-02</u> Date _____
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Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
**** PLEASE WRITE NEATLY AND LEGIBLY. ****

AGENCY	DATE	SIGNATURE	APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ				Front: _____	5415
State Highway				Rear: _____	Filing fee \$ <u>100</u>
Building Official				Side: _____	Permit fee \$ _____
Dev Engineering DPZ				Side St: _____	Excise tax \$ _____
Health		<u>Moeste</u>	<u>Cochran</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per. fee \$ _____
Fire Protection				Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>100</u>
Stormwater control approval required prior to issuance?				Is this a flag? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
NON-IMPACTING CONSTRUCTION PERMIT <input type="checkbox"/>				Local Coverage for NewTown Zone _____	Balance due \$ _____
ONE STOP SHOP <input type="checkbox"/>				SDP/Red-line approval date _____	Check # <u>51002</u>
DPZ Authority DPZ					Valuation \$ <u>10,000</u>
White Building Official					Accepted by <u>[Signature]</u>
Green EDD DPZ					
Yellow DED DPZ					
Pink Health					
Gold SHA					

9/18/02 JB
O.K. for L.P. tank



LOT 15
40,000 SF
F.F. = 599.5
R = 589.50

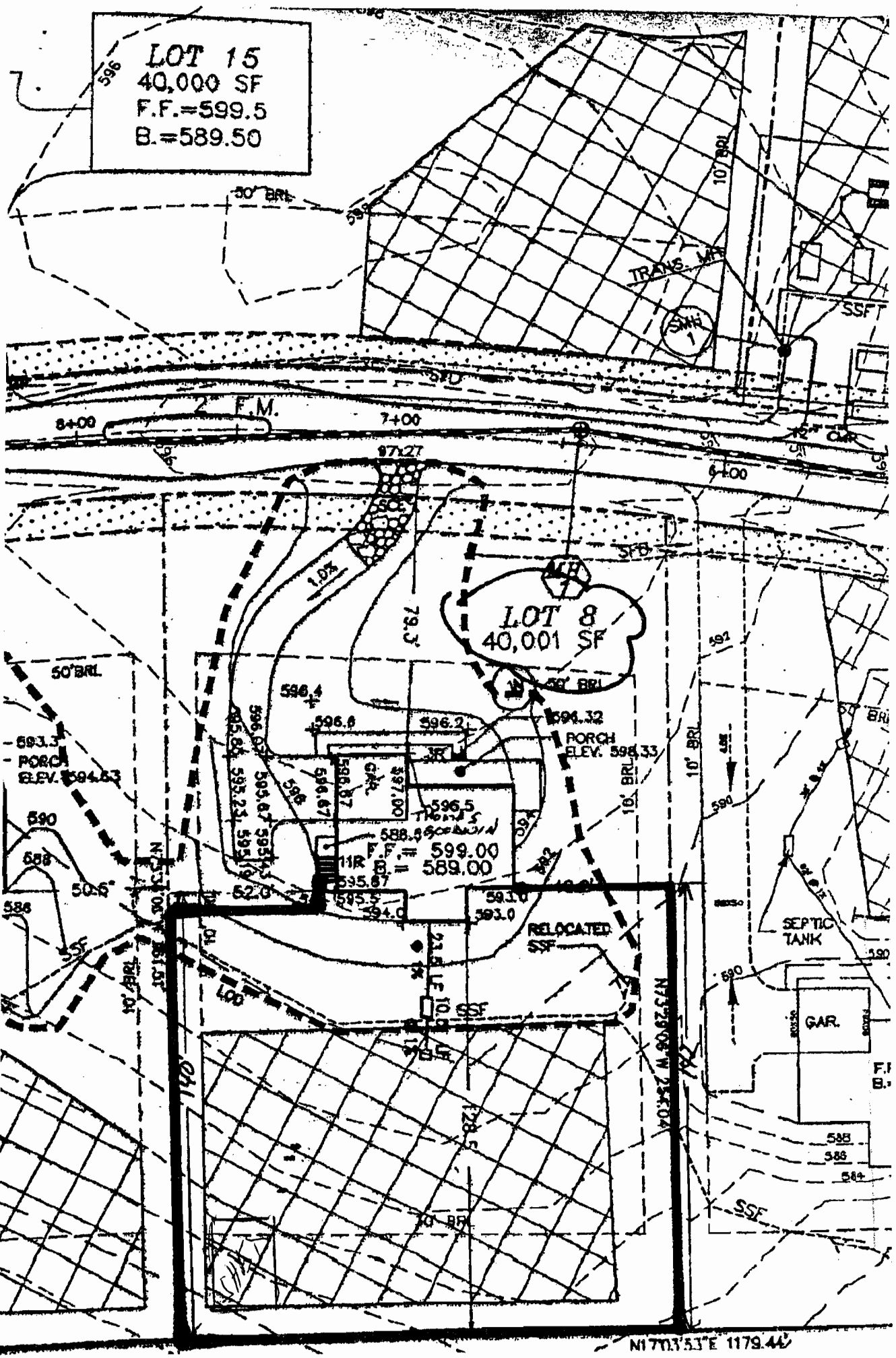
LOT 9
40,000 SF

LOT 8
40,001 SF

Lot 8

LOT 15
 40,000 SF
 F.F.=599.5
 B.=589.50

LOT 8
 40,001 SF



APPROVED

WALKTHRU BUILDING PERMIT

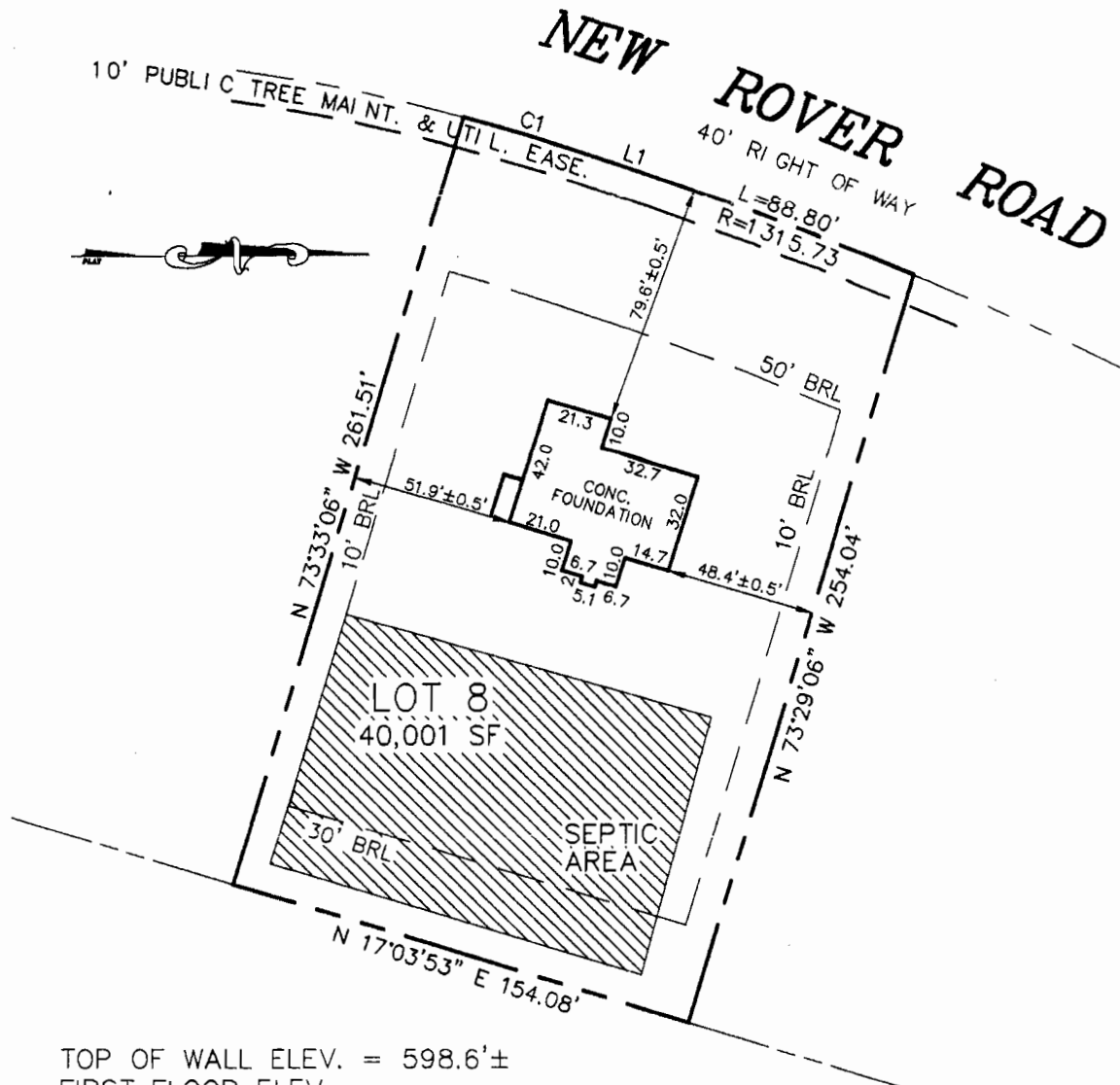
BP# 60157155 # 59902-D

APP SAN SFD DATE: 11/23/05

DESC OF WORK Shed 12' x 24'

CURVE TABLE						
No.	Radius	Length	Delta	Tangent	Chord	Distance
C1	660.00	46.29	04°01'06"	23.15	S17°17'21"W	46.28

LINE TABLE		
LINE	Bearing	Length
L1	N19°17'54"E	0.00



TOP OF WALL ELEV. = 598.6'±
 FIRST FLOOR ELEV. =

FRIENDSHIP LAKES
LOTS 5 - 15 &
PRESERVATION PARCELS 'A' & 'B'

LEGEND

- O/H = OVERHANG
- A/C = AIR COND./HEAT PUMP
- G/M = GAS METER
- E/M = ELECTRIC METER
- CH = CHIMNEY
- B/W = BAY WINDOW
- D/W = DRIVEWAY
- CONC = CONCRETE

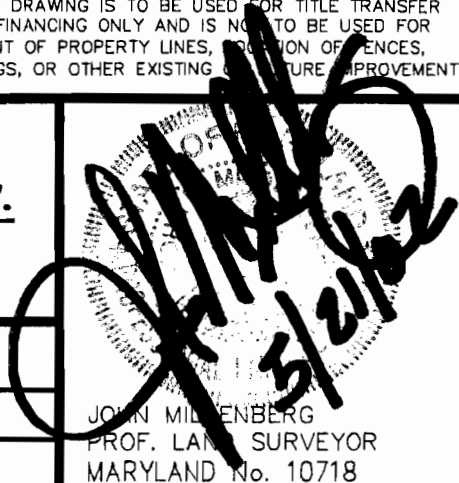
ADDRESS No.:

PLAT No.: 14909
 ELECTION DISTRICT No. 3
 HOWARD COUNTY, MARYLAND

THE INFORMATION SHOWN HAS BEEN ESTABLISHED BY CURRENT ACCEPTABLE SURVEY PROCEDURES AND FROM AVAILABLE RECORD INFORMATION. THIS DRAWING IS TO BE USED FOR TITLE TRANSFER FINANCING, OR REFINANCING ONLY AND IS NOT TO BE USED FOR THE ESTABLISHMENT OF PROPERTY LINES, LOCATION OF FENCES, GARAGES, BUILDINGS, OR OTHER EXISTING STRUCTURE IMPROVEMENTS.

MILDENBERG
BOENDER, & ASSOC., INC.

Engineers Planners Surveyors
 5072 Dorsey Hall Drive, Suite 202, Ellicott City, Maryland 21042
 (410) 997-0296 Balt. (301) 621-5521 Wash. (410) 997-0298 Fax.



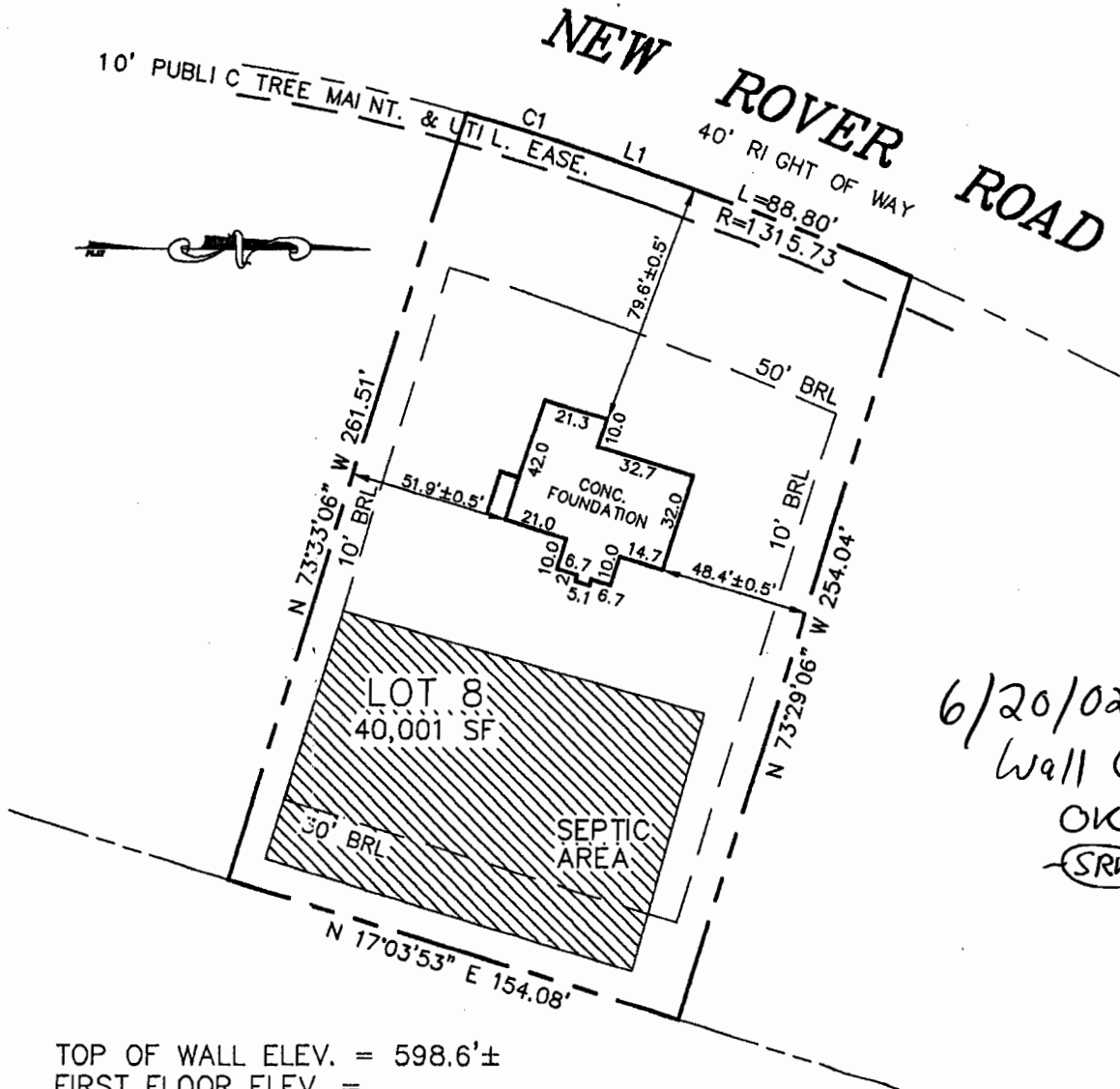
FOUNDATION	DATE: 05/15/02	FINAL	DATE:
DRAWN BY: T. HILL	SCALE: 1" = 60'		
PROJECT NO.: 01-019	LOCATION DRAWING		

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BLDG PERMIT # B0013527

CURVE TABLE						
No.	Radius	Length	Delta	Tangent	Chord	Distance
C1	660.00	46.29	04°01'06"	23.15	S17°17'21"W	46.28

LINE TABLE		
LINE	Bearing	Length
L1	N19°17'54"E	0.00



6/20/02 -
Wall Check
OK
SRK

TOP OF WALL ELEV. = 598.6'±
FIRST FLOOR ELEV. =

FRIENDSHIP LAKES
LOTS 5 - 15 &
PRESERVATION PARCELS 'A' & 'B'

LEGEND

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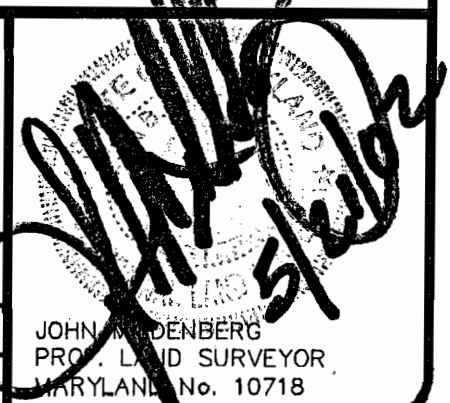
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DRAWN BY: T. HILL	SCALE: 1" = 60'		
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