

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
B08001394

Building Address 1606 Brittle Branch Way
Woodbine MD 21797
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision Lisbon Estates
Section _____ Area _____ Lot Lot 12
Tax Map _____ Parcel _____ Grid _____
Zoning _____ Map Coordinates _____ Lot size 3.2

Property Owner's Name Jim + Vicky Franke
Address 1606 Brittle Branch Way
City Woodbine State MD Zip Code 21797
Phone 410-442-1125 Cell 443-621-4768
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone _____ Fax _____

Existing Use Yard
Proposed Use 24' above ground round swimming pool
Estimated Construction Cost \$ _____
Description of Work Swimming pool installation

Contractor Company C+D Installers Inc.
Contact Person Dwight Harman (owner)
any C+D Installer available
Address 260 Gateway Drive
City Bel Air State MD Zip Code 21014
License No. 48713 Phone 1-800-818-2637 Fax 410 420 7908

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 <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
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 <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
_____ State Certified Modular	Sprinkler system: N/A <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"/> Depth Width	Water Supply: _____ Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Heating System: _____ Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
No. of Bedrooms <u>4</u>	Sprinkler system: N/A <input checked="" type="checkbox"/> NFFA #13D <input type="checkbox"/> NFFA #13R <input type="checkbox"/> Other: _____
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: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof Height: _____	
_____ 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 HERETO; (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.

Jim Franke
Applicant's Signature

Vicky Franke
Print Name

Title/Company _____

May 7, 2008
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>5/7/08</u>	<u>R. Bricker</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"/>		
Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA		

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 NewTown Zone _____	
SDP/Red-line approval date _____	Accepted by _____

MD RTE 94

N49°12'05"E N49°43'37"E 187.92'

6605'

N49°14'09"W

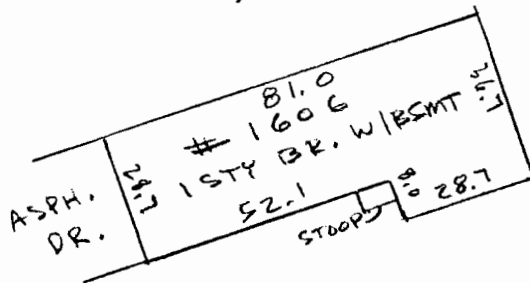
60' BRL

LOT 12
3.2242 AC

S40°53'40"E
135.34'

L. 223
F. 448

N49°00'20"E
34.01'



INSET 1"=40'

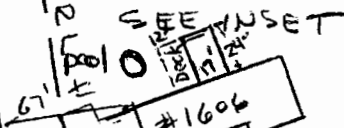
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APPROVED

WALKTHRU BUILDING PERMIT
BP# B08001394 A#

APP SAN RB
DATE: 5/2/08
DESC OF WORK: 74' diameter
above ground pipe
18.835



Septic Easement

ASPH DR
S 69°45'28"W

S40°18'45"E
30' BRL
370.23'
S41°28'18"E
80.00'

N 69°45'28"E 204.20'

BRITTLE
BRANCH WAY

911313

Property shown hereon is not in a flood plain per existing records unless otherwise noted.

SCALE: 1" = 100'
RECORDED IN:
PLAT BOOK:
PLAT: 9447

HOUSE LOCATION

LOT 12
LISBON ESTATES
SECTION 1
HOWARD COUNTY, MD

NOTE: This drawing is not intended to establish property lines nor are the existence of corner markers guaranteed. All information shown hereon taken from the land records of the county in which the property is located. Do not attempt to erect fences from information contained on this drawing.

I hereby certify that to the best of my knowledge and belief, the position of all the existing improvements on the above described property has been established by accepted field practices.

Date: August 9, 1991

Jefferson D. Lawrence
JEFFERSON D. LAWRENCE,
PROFESSIONAL LAND SURVEYOR #5216