

HOWARD COUNTY  
PERMIT APPLICATION

PERMIT NUMBER

308001739

Building Address 11370 OLD HOPKINS RD.  
CHARKSVILLE MD. 21029  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
Census Tract \_\_\_\_\_ Subdivision HIGHMARK  
Section 1 Area \_\_\_\_\_ Lot 53  
Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_  
Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name JOON W KIM  
Address 11370 OLD HOPKINS  
City CHARKSVILLE State MD Zip Code 21029  
Home Phone 301-362-9981 Work Phone \_\_\_\_\_  
Applicant's Name & Mailing Address, (if other than stated hereon):  
Phone \_\_\_\_\_ Fax \_\_\_\_\_

Existing Use \_\_\_\_\_  
Proposed Use SEWER FAMILY  
Estimated Construction Cost \$ 7200  
Description of Work BUILD A 12X38'  
DECK ON THE REAR OF THE  
BUILDING

Contractor Company LAFLEUR ASSOCIATES  
Contact Person LAURENT LAFLEUR  
Address 7386 HOPKINS WAY  
City CHARKSVILLE State MD Zip Code 21029  
License No. 49355  
Phone 301-362-6622 Fax 240-568-6335

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 _____ 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 _____ State Certified Modular _____	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"/> 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: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2nd floor: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	
No. of Bedrooms _____	
Height: _____	
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 _____	

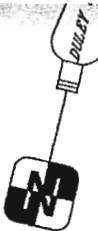
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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.

Laurent Lafleur  
Applicant's Signature  
OWNER LAFLEUR ASSOC.  
Title/Company

LAURENT LAFLEUR  
Print Name  
6-12-08  
Date

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

AGENCY	DATE	SIGNATURE APPROVAL	DEVELOPMENT SETBACK INFORMATION	PROPERTY #
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ	<u>6/12/08</u>	<u>[Signature]</u>	Side St.: _____	Add'l per. fee \$ _____
Health			All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Subtotal 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 New Town Zone _____	
Yellow: DEP, DPZ	Gold: SHA		SDP/Red-line approval date _____	Accepted by: _____
Permit FRM				



APPROVED

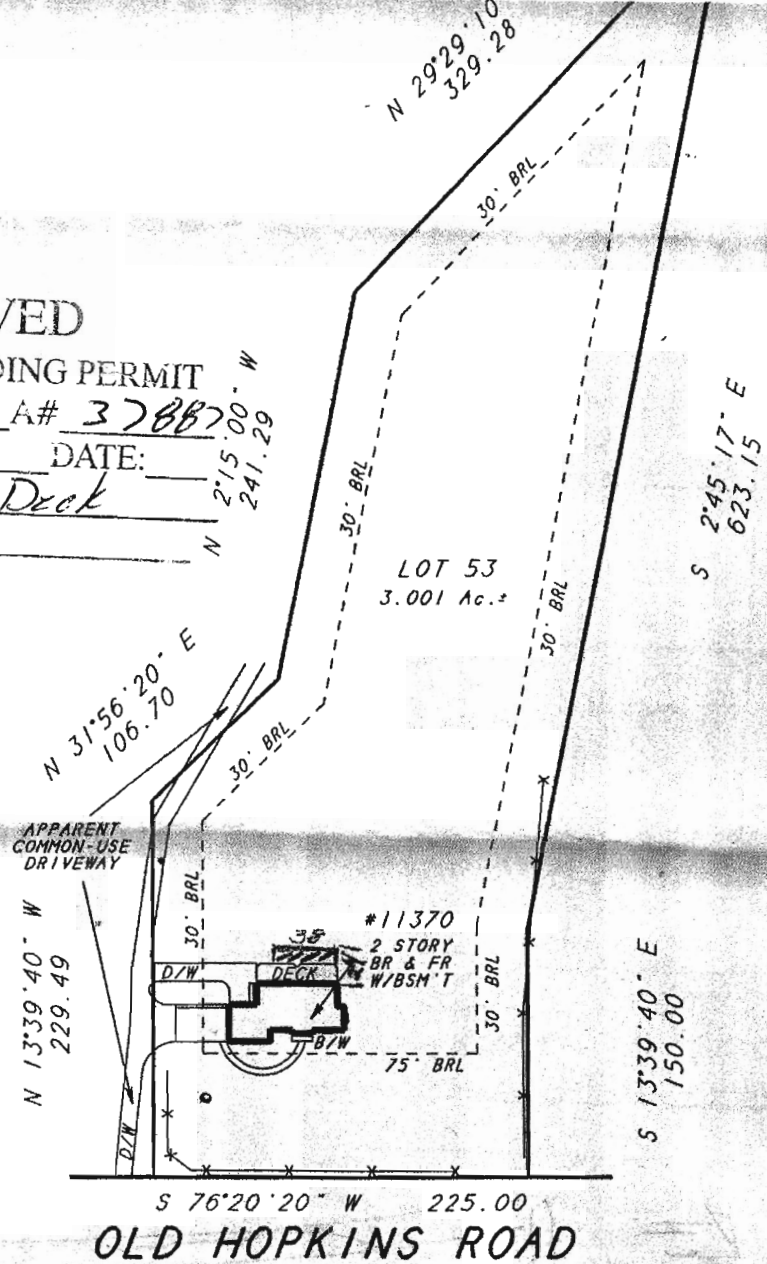
WALK-THRU BUILDING PERMIT

BP# B08001731 A# 37887

APP. SAN SFD DATE: \_\_\_\_\_

DESC. OF WORK: Deck

12' x 38'



NOTE  
POSSIBLE  
ENCROACHMENTS  
MAY EXIST

OLD HOPKINS ROAD

LOCATION SURVEY OF:  
**#11370 OLD HOPKINS ROAD**  
 LOT 53  
 SECTION ONE  
**HALLMARK**  
 5TH ELECTION DISTRICT  
 PLAT No. 7089  
 HOWARD COUNTY, MD  
 SCALE 1"=100'      DATE: 12-6-06

A LAND SURVEYING AND DESIGN COMPANY

**DULEY AND ASSOCIATES, INC.**  
SERVING D.C., MD, VA.

HOUSE LOCATION SURVEYS  
 BOUNDARY SURVEYS - ALTA SURVEYS  
 TOPOGRAPHIC SURVEYS - SITE PLANS

14604 ELM STREET  
 UPPER MARLBORO, MD. 20772

PHONE: 301-888-1111      FAX: 301-888-1114  
 PHONE: 1-888-88-DULEY      FAX: 1-888-88-DULEY



CASE # 06-0888J  
 KIM  
 FILE # 069142-413  
 DRAWN BY: CMM/B.G.

**SURVEYOR'S CERTIFICATE**

I HEREBY STATE THAT THE EXISTING VISIBLE IMPROVEMENTS ON THE ABOVE DESCRIBED PROPERTY HAS BEEN CAREFULLY ESTABLISHED BY ACCEPTED METHODS AND THAT THE IMPROVEMENTS APPEAR TO LIE WITHIN FLOOD ZONE C. THIS SURVEY IS NOT TO BE USED OR RELIED UPON FOR THE ESTABLISHMENT OF ANY FENCE, BUILDING, OR OTHER IMPROVEMENTS. 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. 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 THE CONTEMPLATED TRANSFER, FINANCING OR REFINANCING THE LEVEL OF ACCURACY FOR THIS DRAWING IS 1". NO TITLE REPORT WAS FURNISHED TO NOR DONE BY THIS COMPANY, SAID PROPERTY SUBJECT TO ALL NOTES, RESTRICTIONS AND EASEMENTS OF RECORD. BUILDING RESTRICTION LINES AND EASEMENTS NOT SHOWN ON RECORD PLAT MAY NOT BE SHOWN HEREON. IMPROVEMENTS WHICH IN THE SURVEYOR'S OPINION APPEAR TO BE IN A STATE OF DISREPAIR OR MAY BE CONSIDERED "TEMPORARY" MAY NOT BE SHOWN.