

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
300159831

Building Address 4004 Penn Cross Ct
Glenelg MD 21737

Suite/Apt. #: _____ SDPWP/Petition #: _____

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name COCCIA

Address 4004 Penn Cross Ct

City Glenelg State MD Zip Code 21737

Home Phone 410-489-2817 Work Phone 410-997-0188

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

Phone _____ Fax _____

Existing Use _____

Proposed Use _____

Estimated Construction Cost \$ _____

Description of Work ADDITION OF ARBOR
TO EXISTING PATIO

Contractor Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

License No. _____

Phone _____ Fax _____

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"/> State Certified Modular <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"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input 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 type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFA #13D <input type="checkbox"/> NFA #13R <input type="checkbox"/> Other: _____
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: <u>ARBOR</u>	
Dimensions: _____	
Footings: _____	
Roof Height: _____	
State Certified Modular <input type="checkbox"/>	
Manufactured Home <input type="checkbox"/>	

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.

Shan Coccia
Applicant's Signature

Title/Company

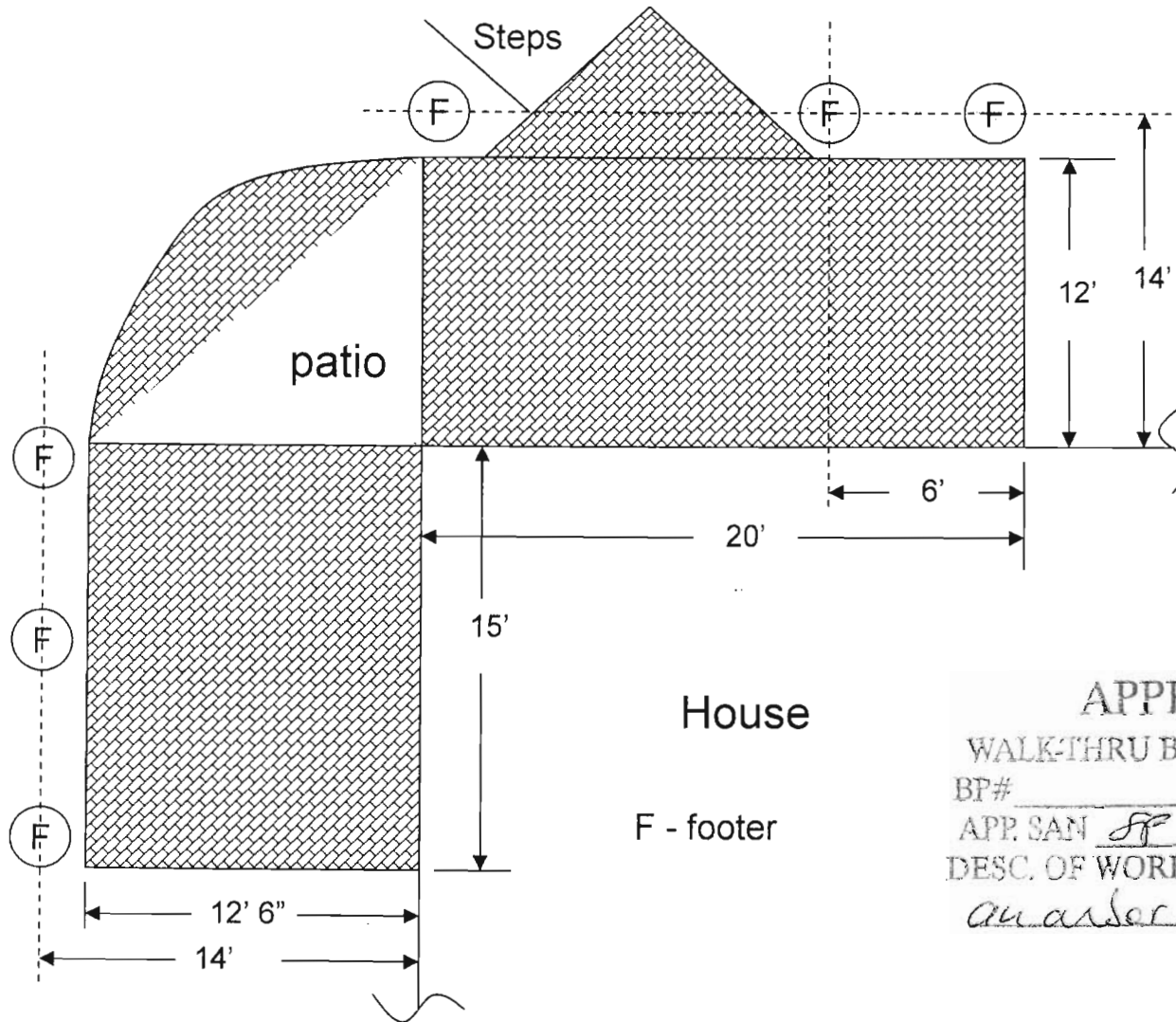
SHARZI COCCIA
Print Name

5/25/06
Date

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>5/25/06</u>	<u>Shan Coccia</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 # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
			Lot Coverage for NewTown Zone _____	
			SDP/Red-line approval date _____	Accepted by _____

Coccia Arbor Plans: Patio Layout and Footer Locations



APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# # 511090-C

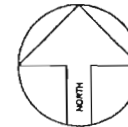
APP. SAN SP DATE: _____

DESC. OF WORK: addition adding an arbor to existing patio

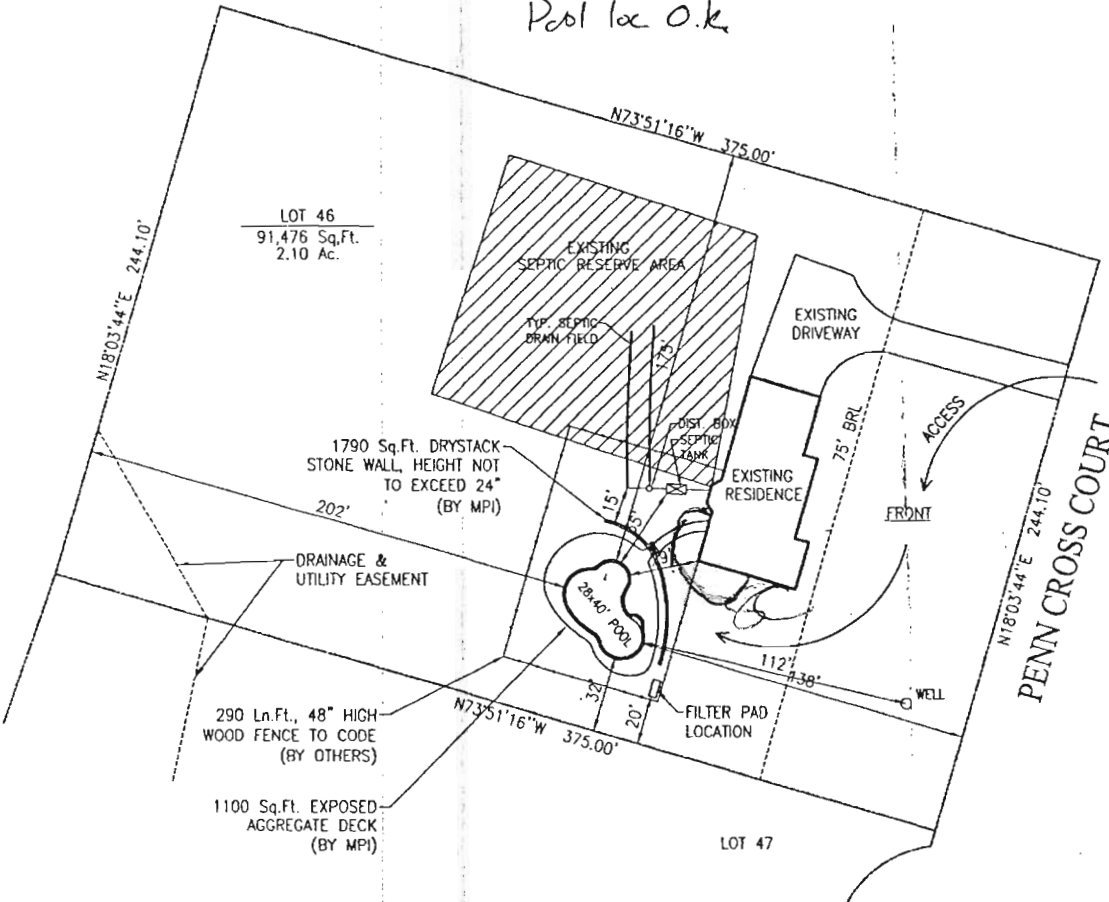
HOUSE 0'
SEPTIC 20'
WELL 30'

11/5/03
Pool loc O.K.

PRIVATE WELL
& SEPTIC



ZONE 1



SITE PLAN

1"=50'

LOT 46
THE HERITAGE
ZONING RRDEO
ACCOUNT # 380782
MAP 21, GRID 18, PARCEL 184
ELECTION DISTRICT NO. 05
HOWARD COUNTY, MARYLAND

Inc.
9515 GERWIG LANE SUITE 119 COLUMBIA, MD 21046 410-993-6600
11166 MAIN STREET SUITE 402 FAIRFAX, VA 22030 703-359-7192
800-252-SWIM
WWW.MARYLANDPOOLS.COM

EQUIPMENT LIST

DIRT/GRADING: MOST HAUL
SPA: NONE
RAISED BEAM: NONE
TILE: SURF 240
COPING: PA FULL RANGE FLAGSTONE
PLASTER: WHITE MARBELITE
FILTER SYS: C&C 420 SF CART. W/2 HP PUMP
CLEANING SYS: PCC 2000
TREATMENT SYS: MINERAL SPRINGS
CONTROL SYS: NONE
HEATER: AC-125 HEAT PUMP
LIGHTS: ONE WATTS: 500 VOLTS: 120
LOVESEAT: (1) 6' OUTSIDE
AQUA BENCH: (1) 10'
RAIL GOODS: NONE
DECKING: 1100 Sq.Ft. EXPOSED AGGREGATE
FENCE: BY OWNER
POOL COVER: NONE TYPE: N/A
CHEMICALS: \$100 CHEMICAL ALLOWANCE
OTHER ITEMS: 8' DIVING BOARD & STAND
(4) 4' LONG 6" RISERS EXP. AGG.
170 Sq.Ft. DRYSTACK STONE WALL
70 Ln.Ft. DRAIN TILE & STONE
ELECTRIC: 200 FT.

POOL DATA

SIZE/SHAPE: 28' x 40' - CUSTOM
POOL AREA: 750 SPA: OTHER: 12
TOTAL AREA: 762
PERIMETER: 115 SPA:
GALLONAGE: 30,900 DEPTH: 3'-0" TO 8'-6"

DIRECTIONS TO SITE

Rt-32 WEST TO L/T ON TEN OAKS RD.
GO TO R/T ON IRADAPHA RD.
GO TO L/T ON SHARP RD.
GO TO R/T ON PENN CROSS CT.
GO TO SITE ON RIGHT

MAP #
9
GRID
F11

ZONE 1

Mitchell & Shari Coccia
4004 Penn Cross Ct.
Glenelg, MD 21737
Howard County

HOME PHONE: 410-489-2817
MRS. CELL: 410-917-0177
OFFICE PHONE 2:

SITE PLAN

LOT: 46	SUBDIVISION NAME: THE HERITAGE	DISTRICT: 05	PK # 380782
SCALE: 1"=50'	BY: CNL	DATE: 10/21/03	JOB NUMBER: DW03-7657
		SHEET #: S-1	

REVISIONS:
00/00/00

Coccia Arbor Plans: Structural Layout

