

**HOWARD COUNTY
 PERMIT APPLICATION**

B09001108

PERMIT NUMBER

Building Address 1720 PRESERVATION CT.
FULTON MD. 20759.

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates _____ Lot Size _____

Property Owner's Name KODSI
 Address 1720 PRESERVATION CT.
 City FULTON State MD Zip Code 20759
 Home Phone 410.701.6000 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated herein): _____

Phone _____ Fax _____

Existing Use SINGLE FAMILY
 Proposed Use OUTDOOR LIVING SPACE.
 Estimated Construction Cost \$ 30,000.00.

Contractor Company SPL ENTERPRISE INC
 Contact Person JOHN SO.
 Address 14521 BURNT WOODS RD
 City GLENWOOD State MD Zip Code 21738
 License No. MHIC 96638
 Phone 301.346.9248 Fax 410.489.9127.

Description of Work BUILD A FREE STANDING DECK
 MAINTENANCE FREE. 2X22 @ 100 SQFT
 W/STEPS INCLUDING 1 LANDING.

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Occupant or Tenant _____

Contact Name _____

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"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	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"/> Depth _____ Width _____ 1 st floor: _____ 2 nd floor: _____ Basement: _____	Water Supply: _____ Public <input checked="" type="checkbox"/> Private <input type="checkbox"/> Sewage Disposal: _____ Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
No. of Bedrooms _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ 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.

[Signature]
 Applicant's Signature
Manager 1 SPL ENTERPRISE INC.
 Title/Company

TONY SEO.
 Print Name
5/20/09.
 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 Officials			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per fee \$ _____
Health	<u>5/20/09</u>	<u>[Signature]</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 New Town Zone _____	Accepted by _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	

Distribution of Copies - White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA
 T:\Operations\Updated forms

APPROVED

WALK-THRU BUILDING PERMIT

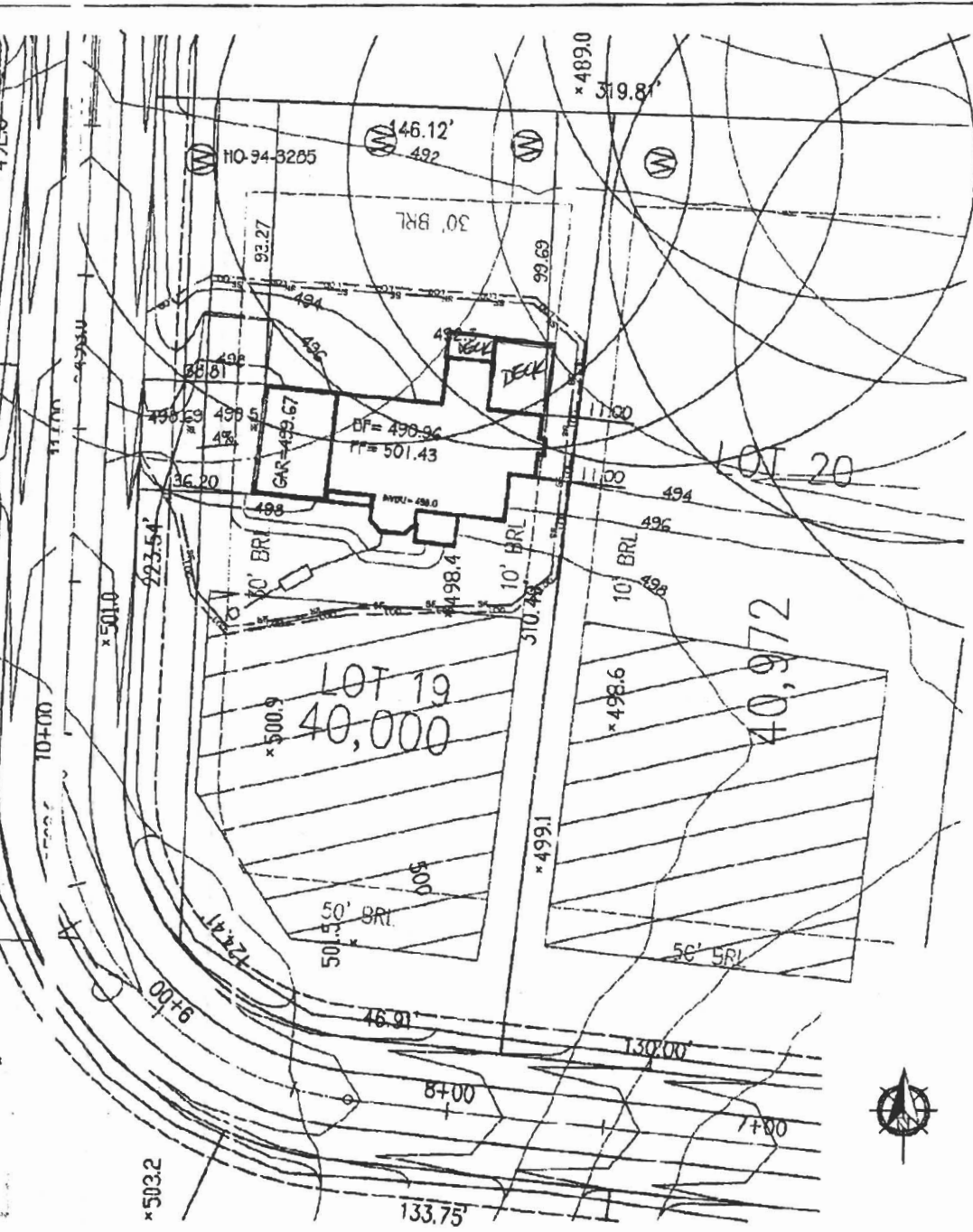
BP# 520133

APP. SAN SFO DATE: 8/12/03

DESC. OF WORK: Dred

32' X 32'

503.6



PLOT PLAN

SINGLE FAMILY DWELLING
the KODSI Residence

LOT 19
PINDELL WOODS
HOWARD COUNTY, MARYLAND

DATE: AUGUST 13, 2003
SCALE: 1" = 50'

OWNER/BUILDER:
DALE THOMPSON BUILDERS
6300 WOODSIDE COURT
COLUMBIA, MD 21046
410-995-6736

PROPOSED ELEVATIONS:

BASEMENT SLAB:	490.96
TOP OF FOUNDATION WALL:	500.00
FIRST FLOOR:	501.43
INVERT OUT OF HOUSE:	498.00
INVERT INTO TANK:	497.30
INVERT INTO DISTRIBUTION BOX:	496.77
GRADE AT SEPTIC TANK:	498.90
GRADE AT DISTRIBUTION BOX:	499.77
GRADE AT TRENCHES:	500.00
PAVING SPECIFICATIONS:	
2" ASPHALT OVER 4" CR-6 OR	
2.5" ASPHALT OVER 1.5" OVERLAY	