

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER

600 800158431

Building Address 7229 Preservation Road
Fuller, MO
 Suite/Apt. # _____ SDP/WP/Petition # _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot P14
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Learn Rhodes
 Address Same
 City Fuller State MO Zip Code _____
 Home Phone (301) 362-7496 Work Phone (240) 593-6377
 Applicant's Name & Mailing Address, (if other than stated hereon): _____
 Phone _____ Fax _____

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ Raised concrete porch
 Description of Work ADD Block wall Slab
and porch Footing.
32 x 17.5'

Contractor Company TML Construction
 Contact Person JEFF WAY
 Address 3506 Prices Distillery Rd
 City Tiamsville State MO Zip Code 21754
 License No. 77575
 Phone (240) 372-0910 Fax (301) 831-9715

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: _____
No. of stories: <u>1 1/2 story</u>	<input checked="" type="checkbox"/> Public
Gross area, sq. ft. per floor: <u>7600</u>	<input checked="" type="checkbox"/> Private
Use group: _____	Sewage Disposal: _____
Construction type: _____	<input checked="" type="checkbox"/> Public
<input type="checkbox"/> Reinforced Concrete	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Structural Steel	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Masonry	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Wood Frame	Heating System: _____
<input type="checkbox"/> State Certified Modular	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
	# of Heads _____

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____
Depth _____ Width _____	<input type="checkbox"/> Public
1st floor: <u>32'</u>	<input checked="" type="checkbox"/> Private
2nd floor: _____	Sewage Disposal: _____
Basement: _____	<input type="checkbox"/> Public
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	<input checked="" type="checkbox"/> Private
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
No. of Bedrooms: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Height: _____	Heating System: _____
Multi-family dwellings: _____	Electric <input type="checkbox"/> Oil <input type="checkbox"/>
No. of efficiency units: _____	Natural Gas <input type="checkbox"/>
No. of 1 BR units: _____	Propane Gas <input type="checkbox"/>
No. of 2 BR units: _____	Sprinkler system: N/A <input type="checkbox"/>
No. of 3 BR units: _____	<input type="checkbox"/> NFPA #13D
Other Structure: _____	<input type="checkbox"/> NFPA #13R
Dimensions: _____	<input type="checkbox"/> Other:
Footings: _____	
Roof Height: _____	
<input type="checkbox"/> State Certified Modular	
<input type="checkbox"/> 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.

Jeff Way
 Applicant's Signature
TML CONSTRUCTION (owner)
 Title/Company

Jeff Way
 Print Name
4/5/06
 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>4/5/06</u>	<u>Jeff Way</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"/>	
Distribution of Copies- _____			Lot Coverage for NewTown Zone _____	
White: Building Official			SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ			Yellow: DEP, DPZ	Pink: Health
T: Home/PERMIT.FRM			Pink: Health	Gold: SHA

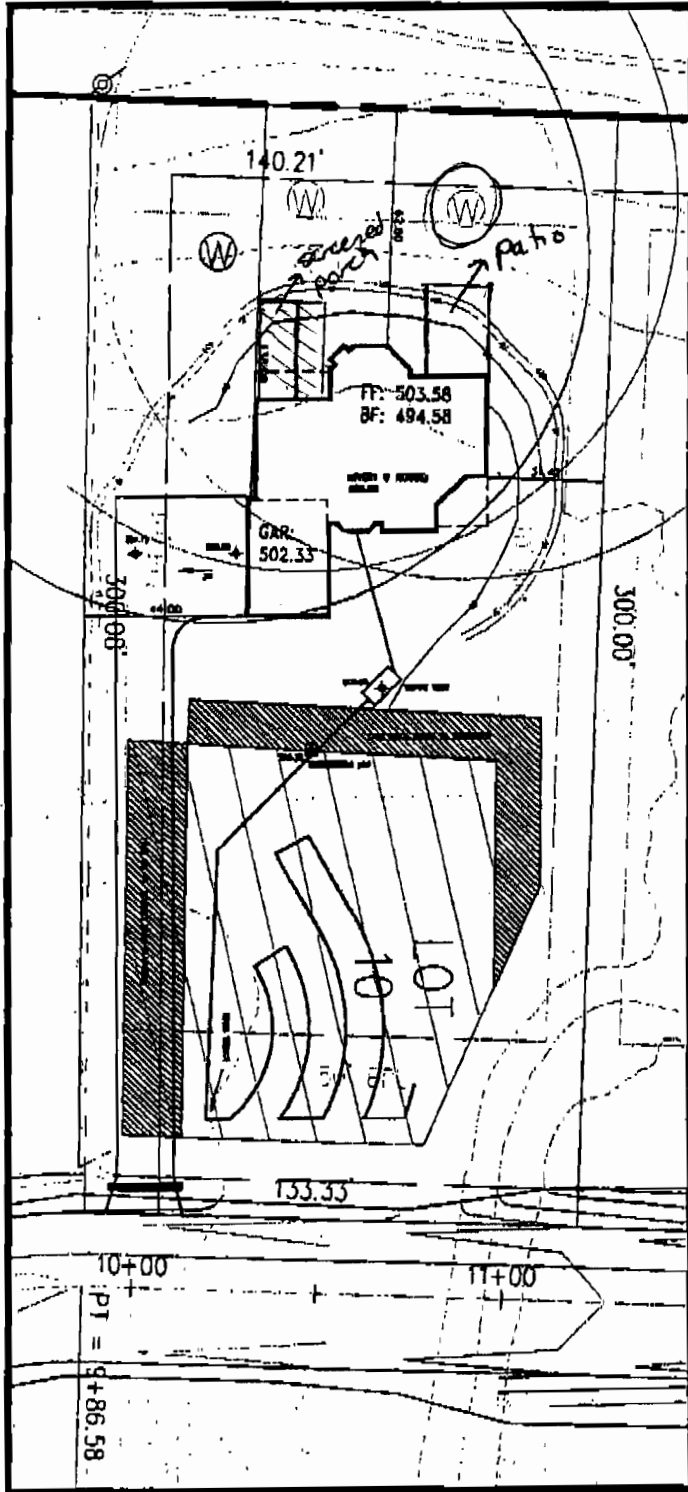
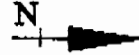
APPROVED

WALKTHRU BUILDING PERMIT
BP# 600158931 A# 5136410-J
APP SAN SP DATE: 4/5/06
DESC. OF WORK:

32 X 17.5' porch.

BILT FENCE

LIMIT OF DISTURBED AREA



PAVING SPECIFICATION:
2" ASPHALT 4" CR-6 OR
2.5" ASPHALT 1.5" OVERLAY

GRADE AT SEPTIC TANK: 500.00
GRADE AT DISTRIBUTION BOX: 500.35
GRADE AT TRENCHES: 502.00

PROPOSED:
FIRST FLOOR: 503.58
BASEMENT: 494.58
INVERT OUT OF HOUSE: 495.58
INVERT INTO SEPTIC TANK: 497.50
INVERT INTO DISTRIBUTION BOX: 497.00
INVERT INTO TRENCHES: 496.00

RECORD RESIDENCE
AUGUST 27, 2003
SCALE: 1" = 50'

**PLOT PLAN
SINGLE FAMILY DWELLING**

LOT 19 PINNELL WOODS
HOWARD COUNTY, MARYLAND

OWNER/BUILDER:
DALE THOMPSON BUILDERS
6308 WOODSIDE COURT
COLUMBIA, MD 21046
(410) 996-8736

APPROVED

Dale Thompson
page 5 of 6