

**HOWARD COUNTY  
 PERMIT APPLICATION**

**PERMIT NUMBER**  
 B07002003

Building Address 6516 PRESTWICK DR  
HIGHLAND, MD 20777  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract \_\_\_\_\_ Subdivision Greene Fields  
 Section 1 Area \_\_\_\_\_ Lot 9  
 Tax Map 34 Parcel 75+318 Grid 23  
 Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name JAY + GINA GULLIFORD  
 Address 6516 PRESTWICK DR  
 City Highland State MD Zip Code 20777  
 Home Phone 301-854 3816 Work Phone 410 917 1853  
 Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax 301-854 9061

Existing Use \_\_\_\_\_  
 Proposed Use DECK  
 Estimated Construction Cost \$ 6,000  
 Description of Work Deck + SCREENED  
Porch 12'x16' + 8'x10' + 4'x4'  
= 288 sq'ft.

Contractor Company SELF  
 Contact Person self  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 License No. \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

Occupant or Tenant JAY Gulliford  
 Contact Name JAY Gulliford  
 Address 6516 Prestwick DR  
 City Highland State MD Zip Code 20777  
 Phone 410-917/1853 Fax 301-854 9061

Engineer or Architect Company GARLINGTON  
 Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_

**BUILDING DESCRIPTION - COMMERCIAL**

**BUILDING DESCRIPTION - RESIDENTIAL**

Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
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: _____ <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____ Height: _____	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: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Other Structure: <u>Deck/Porch</u> Dimensions: <u>12x16 + 8x10</u> 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.

Jay Gulliford  
 Applicant's Signature  
owner  
 Title/Company

Jay Gulliford  
 Print Name  
5/23/07  
 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>5/24/07</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		

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone _____	Check # _____
SDP/Red-line approval date _____	Validation # _____
Accepted by _____	

SEPTIC INFORMATION:

- INV. @ HOUSE = 428.6
- ① INV. @ TANK (IN) = 428.0
- INV. @ TANK (OUT) = 427.9
- ② INV. @ DIST. BOX (IN) = 427.8
- INV. @ DIST. BOX (OUT) = 427.7
- ③ INV. @ TRENCH = 427.6
- TRENCH = 3'0" WIDE, INLET 3'0" BELOW GRADE
- BOTTOM OF TRENCH - 4'6", 1'6" STONE BELOW PIPE
- LENGTH OF TRENCH - 195'
- SEPTIC TANK = 1250 GALLON (4 BEDROOM)

GAITHER  
L. 241 P. 349

FRESTWICK DRIVE

NAECKER  
L. 268, F. 104



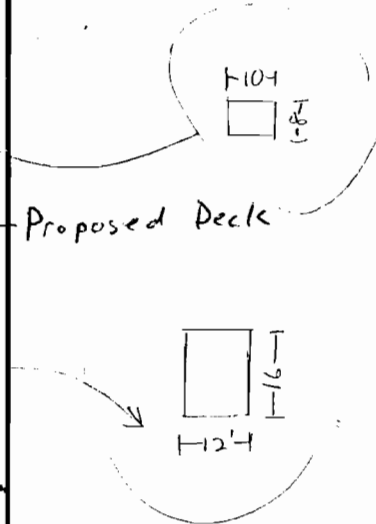
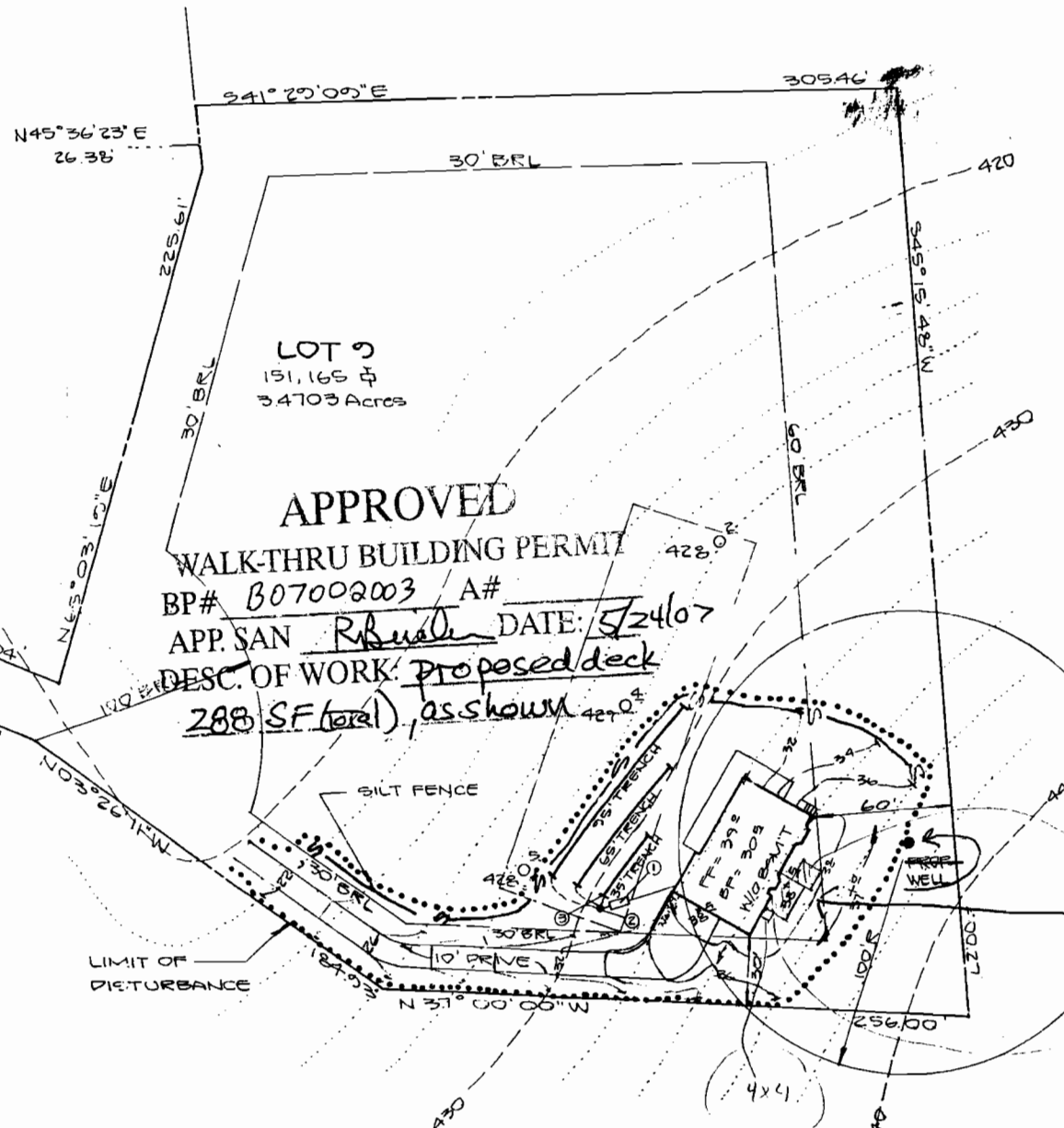
I CERTIFY THAT THE PERC TEST HOLES WERE FIELD LOCATED.

*Jefferson D. Lawrence*  
JEFFERSON D. LAWRENCE  
MD REG. P.L.S. #5216

APPROVED FOR PRIVATE WATER AND PRIVATE SEWAGE SYSTEMS, HOWARD COUNTY HEALTH DEPARTMENT

DATE \_\_\_\_\_

HOWARD COUNTY HEALTH OFFICER \_\_\_\_\_



JAY GULLIFORD  
12101 ASPENWOOD LANE  
LAUREL, MD. 20708  
725-9474



DEVELOPMENT CONSULTANTS GROUP, INC.  
17904 GEORGIA AVENUE \* 102  
OLNEY, MARYLAND 20832  
301-924-4570

SITE PLAN FOR LOT 9  
GREENE FIELDS  
5<sup>TH</sup> ELECTION DISTRICT  
HOWARD COUNTY, MARYLAND

9-14-87  
J.P.L.  
21-502