

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER
 B07000540

Building Address 1052 Ridge RD.
MT AIRY MD. 21771
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision Burdette
 Section _____ Area _____ Lot 1
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Sombat TANITRAWANIT
 Address 1052 Ridge RD.
 City MT AIRY State MD Zip Code 21771
 Home Phone 240-506-5535 Work Phone 240-506-5535
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax 301 670 6233

Existing Use WAS A DECK
 Proposed Use GREAT ROOM
 Estimated Construction Cost \$ 28,000
 Description of Work CONSTRUCT 1 FLOOR ADDITION
14'x40' - Flat Roof - GREAT ROOM

Contractor Company Weatherproof
 Contact Person HAROLD METZ - SHELILA METZ
 Address 4703 Green Valley Rd
 City MONROVIA State MD Zip Code 21770
 License No. 120993
 Phone 301 865-3931 Fax 301 865-3002

Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Engineer or Architect Company _____
 Contact Person SAMUE
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
No. of stories: <u>1</u>	Sewage Disposal: _____ <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Gross area, sq. ft. per floor: <u>560</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <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 checked="" type="checkbox"/> Masonry <input checked="" 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 checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth <u>14'</u> Width <u>40'</u> 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input checked="" type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: <u>0</u> Height: <u>8'6"</u> Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
Other Structure: <u>FRONT PORCH ROOF</u> Dimensions: _____ Footings: <u>EXISTING</u> Roof Height: <u>10 FT.</u>	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
_____ State Certified Modular _____ Manufactured Home	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
	Heating System: _____ <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFA #13D <input type="checkbox"/> NFA #13R <input type="checkbox"/> Other: _____

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 THERE TO; (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.

Applicant's Signature Harold Metz
 Title/Company _____

Print Name HAROLD METZ 2-21-07
 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>2/21/07</u>	<u>[Signature]</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
T:Norma/PERMIT.FRM		

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

Lot Number: 1
 Block/Section: -
 Plat Reference: C.M.P. N
 Title of Plat: Burdette



...ation Drawing

Scale: 1" = 60'

...nefit to a consumer only insofar as it is
 ...er or a title insurance company or its agent
 contemplated transfer, financing or refinancing.
 he relied upon for the establishment or location
 s, buildings, dwellings or other existing or
 ents nor does this plat purport to reflect
 stances with any specific level of accuracy. This
 vade for the accurate identification of
 ines, but such identification may not be required
 f title or securing financing or refinancing.
 ocation of the dwelling is shown in relation
 roperty lines for the property known as

1052 Ridge Road
 and County, Maryland

L. Matthews 6/22/05

Design Corporation
 422 Bellona Lane
 Suite 300
 on, Maryland 21204
 410-823-5000
 410-823-0115 fax

m.com www.ruxtondesign.com **805-0521**

APPROVED

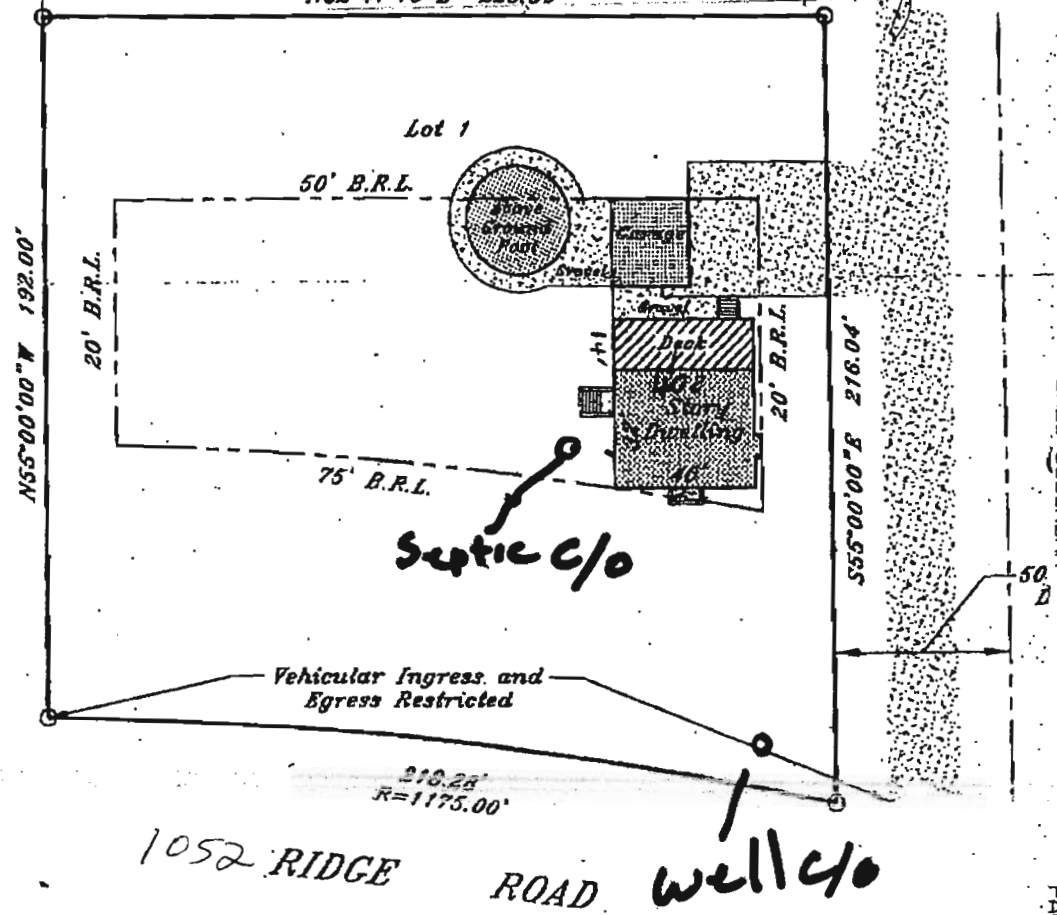
WALK-THRU BUILDING PERMIT

Lot # B07000540 P# 50148

APP. SAN: SP DATE: 2/21/07

DESC. OF WORK: 14' x 40' greatroom
1 story addition

N32°47'10"E 225.00'



02/13/2007 13:33 301-670-6233 BEMU SUBURBAN PAGE 01

7/18/94
7/14/94
11:00 ✓
M661 CONTRA CONTRA

7/14 P.C.O.
C.B.S.

PERMIT

SEWAGE DISPOSAL SYSTEM

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

327683

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH
X661333X 313-2640

INDEXED

P 50148
A REPAIR

DISTRICT 4th

DATE 7/14/94

DATE SYSTEM APPROVED 7/18/94

INSPECTOR Alm

H. S. S. { Woodburne Septics }
Tanks Service

IS PERMITTED TO INSTALL _____ ALTER

ADDRESS _____ PHONE _____

SUBDIVISION _____ LOT 1 ROAD 1052 Ridge Road

PROPERTY OWNER Michael Schaefer

ADDRESS 1052 Ridge Road
Mt. Airy, Maryland 21771

SEPTIC TANK CAPACITY 1500 GALLONS

NUMBER OF BEDROOMS 5

_____ SQUARE FEET PER BEDROOM

LINEAR FEET OF TRENCH REQUIRED (New added 100')

BUILDING PERMIT SIGNED AND RETURNED

2/21/97 - 807000540 - 1 story addition

REPAIR - PURPOSE - SEPTIC SYSTEM HAS FAILED.

Call for inspection when ground is opened so sanitarian can recommend repair. 07/05/94

CONTRACTOR REPORTS LINE BLOCKAGE FOUND ^{4 CONNECTED} EXISTING TRENCH IN GOOD CONDITION

APPLICANT DECIDED TO INSTALL ADDITIONAL TRENCH ANYWAY

(1) Trench 100' long, 2' wide, 9' deep, sided 4' (CW)
5' of stone, 500' sq. ft. effective area plus old trench

PLANS APPROVED BY [C.B.S. for C.W. - Unfield (A.M.)] DATE 7/14/94 C.B.S.

COVER NO WORK UNTIL INSPECTED AND APPROVED

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINES FROM HOUSE TO DRAIN FIELDS, 90° ELBOWS NOT ACCEPTABLE.

NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX TRENCHES) TO BE 100 FEET FROM WELL (UNLESS OTHERWISE SPECIFICALLY AUTHORIZED)

NOTE: IF DEEP TRENCH(ES) ARE USED CALL FOR INSPECTION BEFORE AND AFTER PLACING GRAVEL IN TRENCH(ES)

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PVC OR ABS

PERMIT VOID AFTER TWO YEARS

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL STAND PIPES MUST BE 6 INCHES IN DIAMETER CAST IRON. CONCRETE OR TERRA COTTA OR PVA OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET. MANHOLE TO GRADE REQUIRED.

NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

R 50148