

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER

307004254

Building Address 13307 RIDGEWOOD DRIVE
ELLIOTT, CITY 21042
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision RIDGEWOOD
 Section _____ Area _____ Lot 3
 Tax Map 22 Parcel 160 Grid 15
 Zoning _____ Map Coordinates _____ Lot size 3.32 AC

Property Owner's Name STEVE SMITH
 Address 13307 RIDGEWOOD DRIVE
 City ELLIOTT CITY State MD Zip Code 21042
 Home Phone 410-8086988 Work Phone 410-5885690
 Applicant's Name & Mailing Address, (if other than stated hereon):
Mike Shaffery
 Phone 410-5885690 Fax 410-5885692

Existing Use SFD
 Proposed Use INGRAN
 Estimated Construction Cost \$ 40,000.00
 Description of Work 20X40 INGROUND SWIMMING
POOL FREEDOM, FILLED BY TANKER
3 1/2 to 8' DEEP, CONCRETE POOL

Contractor Company ELITE POOLS
 Contact Person MIKE SHAFFERY
 Address 1503 WINDWOOD RD
 City BEL AIR State MD Zip Code 21015
 License No. 71753
 Phone 410-8086988 Fax 410-5885692

Occupant or Tenant Steve Smith
 Contact Name MIKE SHAFFERY
 Address 1503 WINDWOOD RD
 City BEL AIR State MD Zip Code 21015
 Phone 410 808 6988 Fax 410 588 5692

Engineer or Architect Company N/A
 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: <u>10</u>	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	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____
<input type="checkbox"/> State Certified Modular	

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

Applicant's Signature _____
Elite Pools/owner
 Title/Company

Print Name Michael Shaffery
 Date 10/17/07

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	<u>10/17/07</u>	<u>[Signature]</u>	Side St.: _____	Add'l per. fee \$ _____
Health			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 _____

SUBJECT PROPERTY IS SHOWN IN ZONE C
 ON THE NATIONAL FLOOD INSURANCE PROGRAM
 FLOOD INSURANCE RATE MAP OF HOWARD COUNTY,
 MARYLAND, PANEL NO. 2400440021 B COMMUNITY
 PANEL NO. 21 OF 45.
 EFFECTIVE DATE: DECEMBER 4, 1986

APPROVED

WALK-THRU BUILDING PERMIT
 BP# B07004254 A#
 APP. SAN SFO DATE: 10/17/86
 DESC. OF WORK: 20' x 40'
 In-ground Pool

13307
 RIDGEWOOD DRIVE
 (50' R/W)

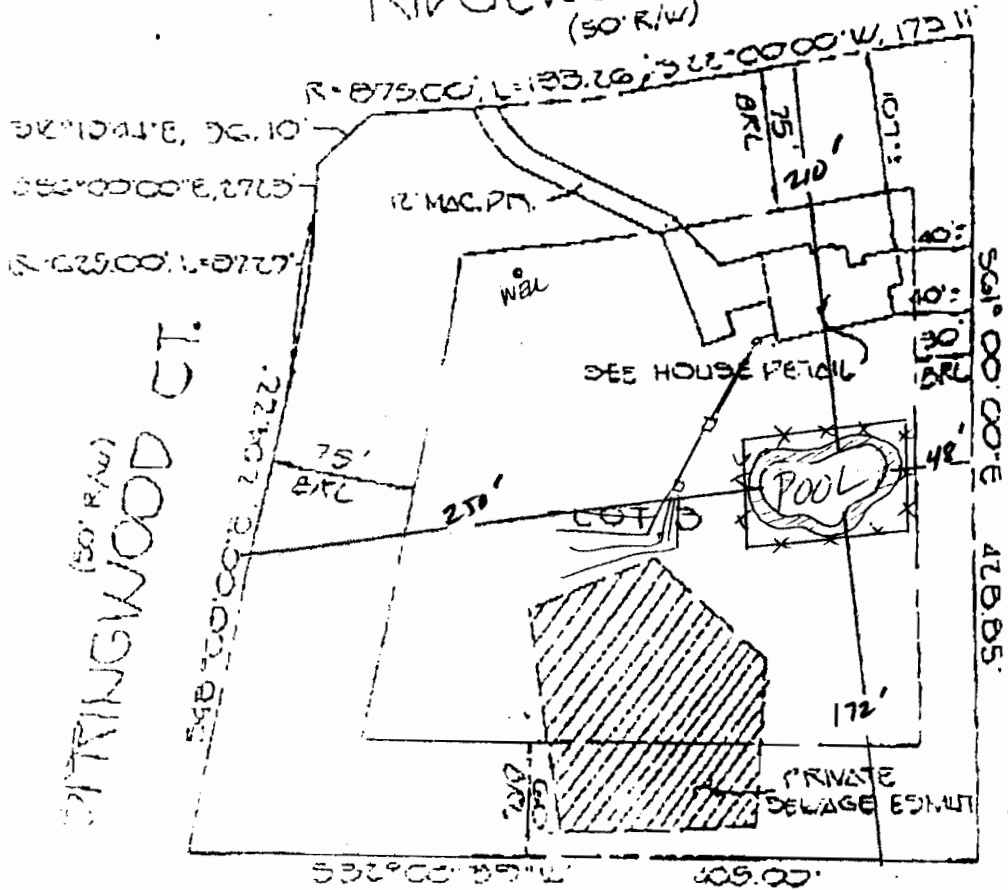
SETBACKS

FRONT: 210'
 REAR: 172'
 LEFT: 48'
 RIGHT: 250'

DISTANCE TO
 CLOSEST POINT
 OF SEPTIC:
 40'

DISTANCE OF
 CLOSEST POINT
 AND/OR WELL:
 150'

X-X-X =
 FENCE PER
 HOWARD COUNTY



BRL - BUILDING RESTRICTION LIL

SCALE
 1" = 100'

Elite Pools
 #71753
 MHIC

