

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER

B06008795

Building Address 5385 BROADWATER LN
CLARKSVILLE, MD 21029
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot _____
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name KATHLEEN KUZIN
 Address 5385 BROADWATER LN
 City CLARKSVILLE State MD Zip Code 21029
 Home Phone _____ Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon): _____
 Phone _____ Fax _____

Existing Use SF DWELLING
 Proposed Use SAME W/ DECK
 Estimated Construction Cost \$ 29,000
 Description of Work DECK OFF REAR WITH
STAIRS, MEASURING 764" W, WITH
SECTIONS 27x14, 12x6, 10x25'

Contractor Company MARK S. MCWHORTER
 Contact Person RYAN MCWHORTER
 Address 6851 REDBERRY RD
 City CLARKSVILLE State MD Zip Code 21029
 License No. 9807
 Phone _____ Fax _____

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: _____ <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: 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"/> 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 checked="" 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: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	

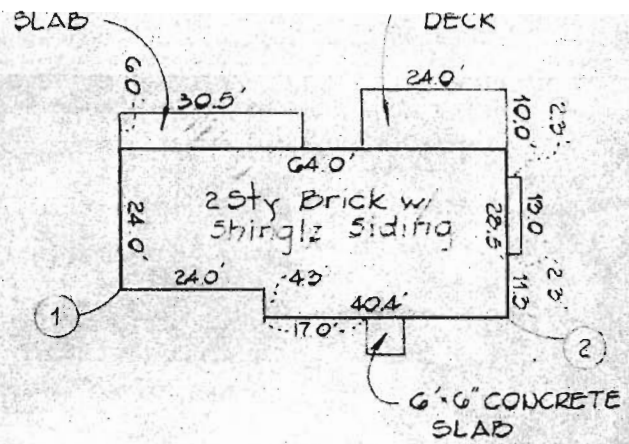
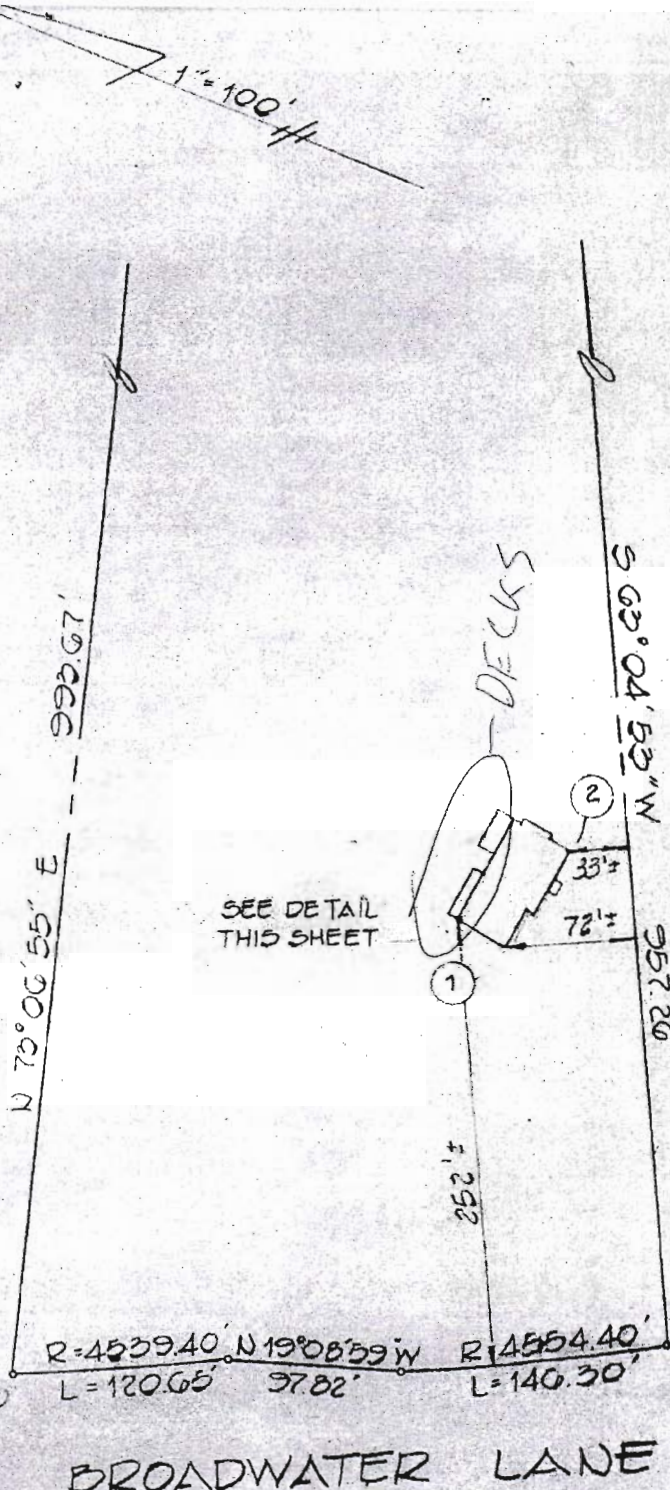
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED 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.

Ryan McWhorter
 Applicant's Signature
 Title/Company _____

RYAN MCWHORTER
 Print Name
12/5/06
 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	<u>12/5/06</u>	<u>John A. G...</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"/>	
Distribution of Copies -			Lot Coverage for NewTown Zone _____	
White: Building Official			SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ			Yellow: DED, DPZ	Pink: Health
T:\forms\PERMIT.FRM			Pink: Health	Gold: SHA



SCALE: 1"=30'

APPROVED
 WALK-THRU BUILDING PERMIT
 BP# BO6008795 A# 17594
 APP. SAN GAC DATE: 12/5/06
 DESC. OF WORK: DECK ON
Rear as described 2/14
12x6 10x25

BROADWATER LANE

This is to certify that I have surveyed the property known as: 5365 BROADWATER LANE
HOWARD COUNTY, MARYLAND

for the purpose of locating the improvements thereon, and the improvements are located as shown

Signed this 29th day of _____ 19 00



FISHER, COLLINS AND CARTER, INC.
 CIVIL ENGINEERS AND LAND SURVEYORS
 8388 COURT AVENUE
 ELLICOTT CITY, MARYLAND 21043

This plat is not intended for use in the establishment of property lines.

SYSTEM MUST BE INSTALLED FIRST BEFORE BUILDING PERMIT CAN BE SIGNED.

PERMIT

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH

HOWARD COUNTY

ELLICOTT CITY

DISTRICT 5th

DATE 3/15/79

INDEXED

P 29573

A 17594

Paul Schissler

IS PERMITTED TO INSTALL ALTER

ADDRESS 7311 Brangles Road, Marriottsville, Md. 21104 PHONE 795-2642

SUBDIVISION ROAD 5385 Broadwater Lane LOT 2

PROPERTY OWNER Frank G. Benham Charles J. Gallagher

ADDRESS 17649 Prince Edward Drive, Olney, Maryland 20832 Phone: 431-3968

SPECIFICATIONS 4 bedrooms

SEPTIC TANK CAPACITY 1250 GALLONS

DRAIN FIELD DEPTH FEET, BOTTOM AREA SQ. FT.

DEEP TRENCH DEPTH FEET, BOTTOM AREA SQ. FT.

SEEPAGE PITS ABSORBENT SIDE-WALL AREA SQ. FT.

INLET PIPE FT. BELOW ORIGINAL GRADE, MAXIMUM DEPTH FT. BELOW ORIGINAL GRADE

EFFECTIVE DEPTH AT FT. BELOW ORIGINAL GRADE.

LOCATE DISPOSAL AREA FT. FROM LOT LINE AND FT. FROM LOT LINE AS SEEN WHEN

BUILDING PERMIT SIGNED AND RETURNED

12/13/06 - 806008795- Deck

DRY WELL - 480 sq. ft. absorbent sidewall area to begin below the inlet. Maximum depth for inlet is 3 1/2 ft. Maximum depth permitted is 9 1/2 ft. below original grade. Locate dry well 315 ft. from front lot line and 19 ft. from right property line as seen from Broadwater Lane. OR Dig pit 12 ft. square, set block and top for 10 ft. diameter and fill in rest of pit with gravel. Come off dry well 5 ft. solid pipe (earth buffer) and begin trench. Trench to be 9 1/2 ft. deep - 20 ft. long - 2 ft. wide with 6 ft. of stone under pipe and call for inspection of trench before gravel is installed.

PLANS APPROVED BY Robert V. Torre DATE 3/6/73

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: IF TRENCH IS USED CALL FOR INSPECTION BEFORE PLACING GRAVEL IN TRENCH.

NOTE: NO DRY WELL SHALL EXCEED 15 FOOT IN DIAMETER.

NOTE: ALL PIPE FROM HOUSE TO DISPOSAL AREA MUST BE CAST IRON.

PERMIT VOID AFTER THREE 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 ACCEPTED.

*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT.

HD - 23

BLDG. PERMIT SIGNED AND RETURNED 1/13/88

Serial # 16289 address location

A 17594

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER
 Walk-Thru B06001443

Building Address 5385 BROADWATER LANE
CLARKSVILLE MD 21079

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

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates 14A4 Lot size _____

Property Owner's Name VICTOR KLEIN

Address 5385 BROADWATER LANE

City CLARKSVILLE State MD Zip Code 21079

Home Phone (410) 531-1000 Work Phone _____

Applicant's Name & Mailing Address (if other than stated hereon):
STEVE BOWERS
7 HAMMARLET CRT BALT 21236

Phone (410) 528-6339 Fax _____

Existing Use SFD

Proposed Use SFD w/ Porch

Estimated Construction Cost \$ 5500.-

Description of Work 22' x 6' FRONT
PORCH w/ STEPS

Contractor Company LONE FENCE CO

Contact Person STEVE BOWERS

Address 1114 RT 3 NORTH

City CLIFTON State MD Zip Code 21114

License No. 9615-01

Phone (410) 793-0600 Fax _____

Occupant or Tenant OWNER

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: _____ _____ Public _____ Private
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1st floor: _____ Depth _____ Width _____	Sewage Disposal: _____ _____ Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> _____ NFPA #13D _____ NFPA #13R _____ Other:
No. of Bedrooms _____	
Height: _____	
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: _____	
_____ State Certified Modular _____ Manufactured Home	

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[Signature]
 Applicant's Signature
AGENT
 Title/Company

R. SEVEN BOWERS
 Print Name
7/13/06
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
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Health	<u>7/13/06</u>	<u>[Signature]</u>	All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
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CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
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Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA			Lot Coverage for NewTown Zone _____	
T:\norma\PERMIT.FRM			SDP/Red-line approval date _____	Accepted by _____

$8^{\circ}24'54"E$
192.78

APPROVED

WALK-THRU BUILDING PERMIT
BP# 306001443 A# 17594
APP. SAN GAC DATE: 7/13
DESC. OF WORK:

22x6 Front porch w/ steps

PARCEL N^o 2
6.174 AC.

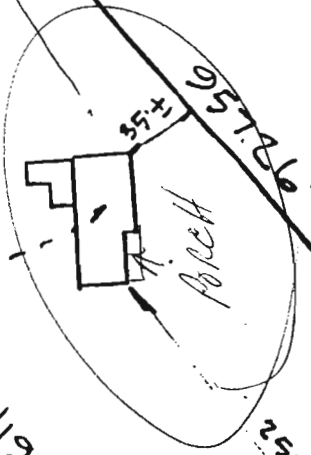
$S63^{\circ}04'53"W$
Approx location of septic

PARCEL 1

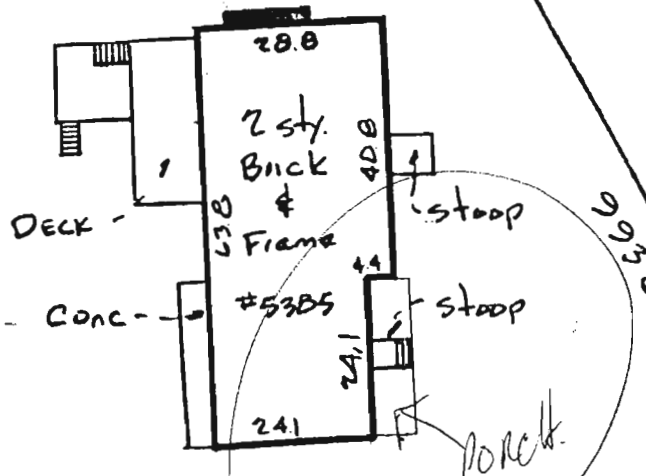
PERMIT

$N73^{\circ}06'55"E$

SEE DETAIL
Approx location of well



PARCEL 3



HOUSE DETAIL
SCALE 1"=30'

$N19^{\circ}08'59"W$ 97.82'
250'±

A=120.45'
R=453.940'

A=146.30'
R=455.440'
BROADWATER LANE