

Walk-Through

DEPARTMENT OF INSPECTIONS, LICENSING AND PERMITS
3430 COURT HOUSE DRIVE
ELLSWORTH CITY, MD 21043
PERMITS (410) 313-3430 INSPECTIONS (410) 313-1910
AUTOMATED INFORMATION (410) 313-3832

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

309002222

Building Address 13989 Route 108
Highland, MD 20777

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

Census Tract _____ Subdivision _____

Section _____ Area _____ Lot _____

Tax Map 40 Parcel 33 Grid 15

Zoning _____ Map Coordinates _____ Lot size 19.40 ACRES

Existing Use SFD

Proposed Use _____

Estimated Construction Cost \$ 55,000

Description of Work _____

Construct 20x50 Inground Pool

Occupant or Tenant _____

Contact Name Jill Romano

Address 1925 Norfolk Drive

City Owings State MD Zip Code 20736

Phone 301855 6512 Fax 301855 7068

Property Owner's Name John + Patricia Meehan

Address Merrell

13989 Route 108

City Highland State MD Zip Code 20777

Home Phone 301854 9624 Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon): _____

Phone _____ Fax _____

Contractor Company Stevenson Pools

Contact Person Jill Romano

Address 1925 Norfolk Drive

City Owings State MD Zip Code 20736

License No. State 3 / 23797

Phone 301 853 6512 Fax 301 855 7068

Engineer or Architect Company _____

Contact Person _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Utilities

Height: _____
No. of stories: _____
Gross area, sq. ft. per floor: _____
Use group: _____
Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads _____

Building Characteristics

Utilities

SF Dwelling SF Townhouse
Depth Width
1st floor: _____
2nd floor: _____
Basement: _____
Finished Basement Unfinished Basement
Crawl space Slab on Grade
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

Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 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 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.

Jill Romano
Applicant's Signature

Jill S. Romano
Print Name

8/26/09
Date

Title/Company

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 8-26-09 Dana Bernard

Fire Protection _____

Is Sediment Control approval required prior to issuance?
YES NO

CONTINGENCY CONSTRUCTION START:
ONE STOP SHOP:

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 NO Sub-total paid \$ _____
Is Entrance Permit required? Balance due \$ _____
YES NO Check # _____
Historic District? Validation # _____
YES NO

Lot Coverage for NewTown Zone _____
SDP/Red-line approval date _____ Accepted by _____

Distribution of Copies- White: Building Official Green: LDD, DPZ

Yellow: DED, DPZ Pink: Health Gold: SHA

T:\Forms\PERMIT.FRM

Rev. 11/4/04

ALAN, AND BERNICE D. RILEY
PARCEL 416
LIBER 5721 FOLIO 8
ZONE-RR-DEO

JOHN AND HELEN BE GRIFITHS
PARCEL 417
LIBER 3699 FOLIO 331
ZONE-RR-DEO

APPROVED
WALK-THRU BUILDING PERMIT
BP# _____ A#1
APP. SAN D. Bernard DATE 8/26/09
DESC. OF WORK: 20x50 Pool
Pool Approved as shown

MORRELL PROPERTY
PARCEL 33
19.4 AC±
LIBER 5721/1
ZONED - RR-DEO



ENA
CHD2