

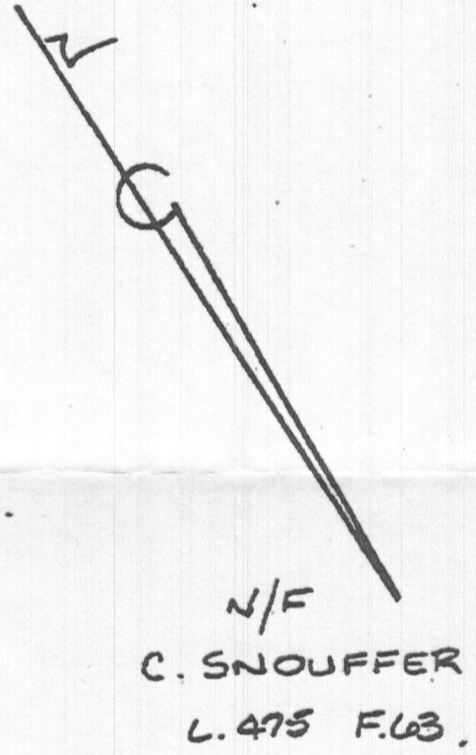
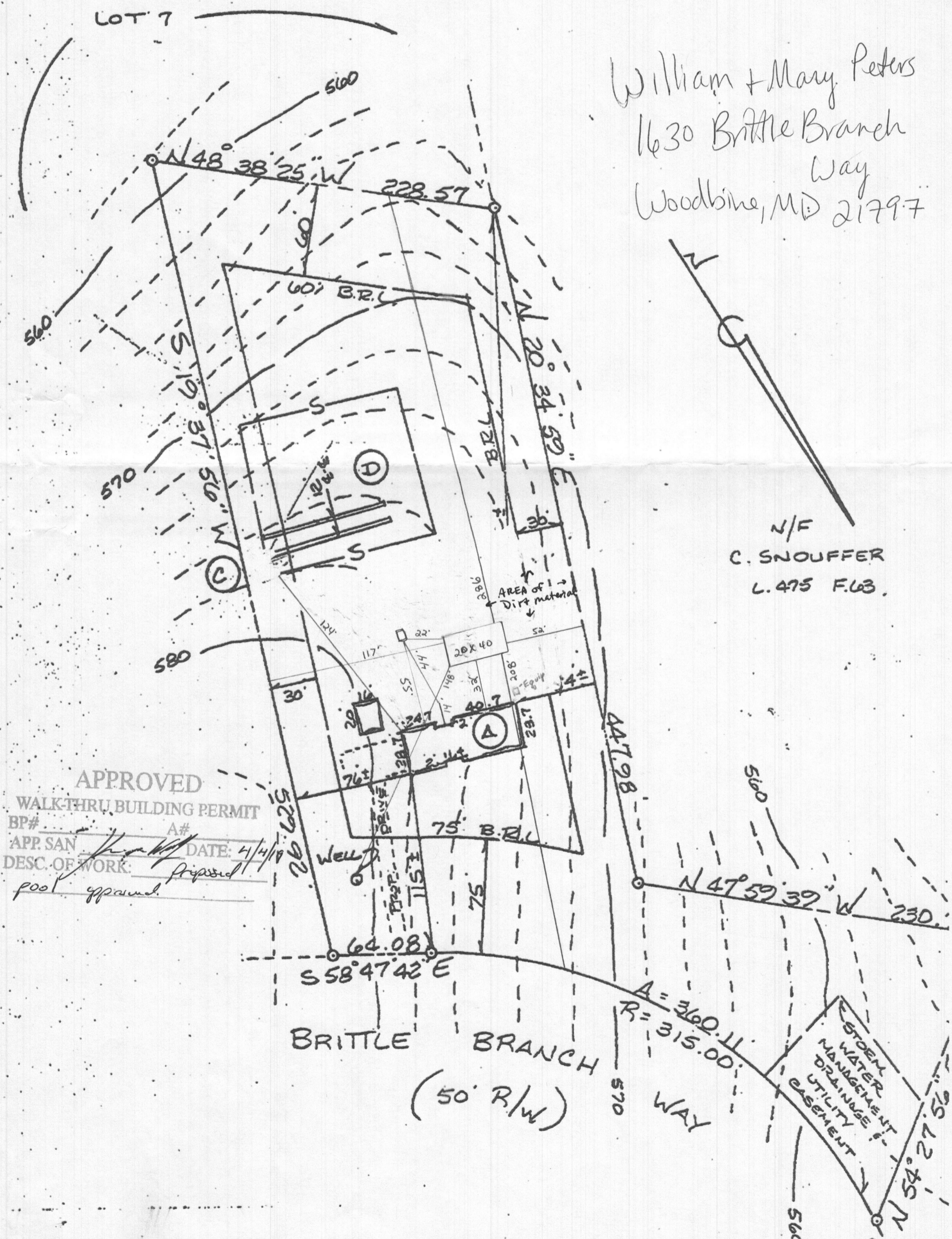
(A) PROP. 4 BED. HOUSE
 F.F. ELEV. = 581.0
 BSMT. ELEV. = 572.0
 INV. ELEV. = 576.8

(B) PROP. SEPTIC TANK
 EX. ELEV. = 579.5
 INV. IN = 576.1
 INV. OUT = 575.8

(C) PROP. DIST. BOX
 EX. ELEV. = 577.3
 INV. ELEV. = 575.1

(D) PRC
 INV. E
 1.5' =
 LENGTH
 AT THE
 ISSUA

William + Mary Peters
 1630 Brittle Branch
 Way
 Woodbine, MD 21797



APPROVED
 WALK-THRU BUILDING PERMIT
 BP# _____ A# _____
 APP. SAN _____ DATE: 4/4/19
 DESC. OF WORK: Proposed
 pool approved.



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: _____

Permit No.: _____

Building Address: 1630 Brittle Branch Way
 City: Woodbine State: MD Zip Code: 21797
 Suite/Apt. #: _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: Lisbon Estates
 Section: 1 Area: _____ Lot: 8 see 1
 Tax Map: 0007 Parcel: 0002 Grid: 0017
 Zoning: _____ Map Coordinates: _____ Lot Size: 3.03 Ac

Existing Use: Residential Home
 Proposed Use: 20 x 40 Inground Pool Addition
 Estimated Construction Cost: \$ 60,900.00
 Description of Work: Install '20' x 40' Inground Concrete Pool Rectangle in shape - Fence to be done by others -
 Occupant or Tenant: William + Mary Peters
 Was tenant space previously occupied? Yes No
 Contact Name: William + Mary Peters
 Address: 1630 Brittle Branch Way
 City: Woodbine State: MD Zip Code: 21797
 Phone: 301-8546790 Fax: _____
 Email: N/A

Property Owner's Name: William + Mary Peters
 Address: 1630 Brittle Branch Way
 City: Woodbine State: MD Zip Code: 21797
 Phone: 301-854-6790
 Email: N/A

Applicant's Name & Mailing Address, (If other than stated herein)
 Applicant's Name: Cozy Pools Spas + Hearth, llc
 Address: 1001 Twin Arch Road
 City: Mount Airy State: MD Zip Code: 21771
 Phone: 301-829-4008 Fax: 301-829-1755
 Email: Cozypools@gmail.com

Contractor Company: Cozy Pools Spas + Hearth, llc
 Contact Person: Leslie Herbert
 Address: 1001 Twin Arch Road
 City: Mt. Airy State: MD Zip Code: 21797
 License No.: 99721
 Phone: 301-829-4008 Fax: 301-829-1755
 Email: Cozy pools@gmail.com

Engineer/Architect Company: Cozy Pools Spas + Hearth, llc
 Responsible Design Prof.: Leslie Herbert
 Address: 1001 Twin Arch Road
 City: Mt Airy State: MD Zip Code: 21771
 Phone: 301-829-4008 Fax: 301-829-1755
 Email: Cozy pools@gmail.com

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
Construction type:	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	Multi-family Dwelling	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
➤ Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities
Water Supply
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Sewage Disposal
<input type="checkbox"/> Public
<input checked="" type="checkbox"/> Private
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
Heating System
<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Other:
Sprinkler System:
<input type="checkbox"/> Yes <input type="checkbox"/> No
Grading Permit Number:
Building Shell Permit Number:

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.

Cozy Pools
 Applicant's Signature
Cozypools@gmail.com
 Email Address
VP
 Title/Company

Leslie Herbert
 Print Name
4/3/19
 Date

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
PLEASE WRITE NEATLY & LEGIBLY
-FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>4/4/19</u>	<u>[Signature]</u>

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub-Total Paid	\$
Balance Due	\$
Check	#

Distribution of Copies: White: Building Officials Green: PSZA,Zoning Yellow: PSZA,Engineering Pink: Health Gold: SHA