

ONE "C" PER. F.E.M.A. FLOOD INSURANCE RATE MAP 2400440019B

Duland

HARDY ROAD

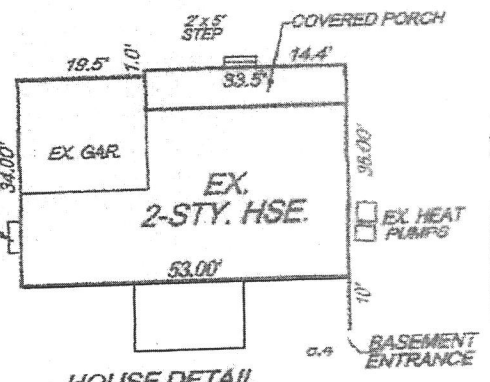
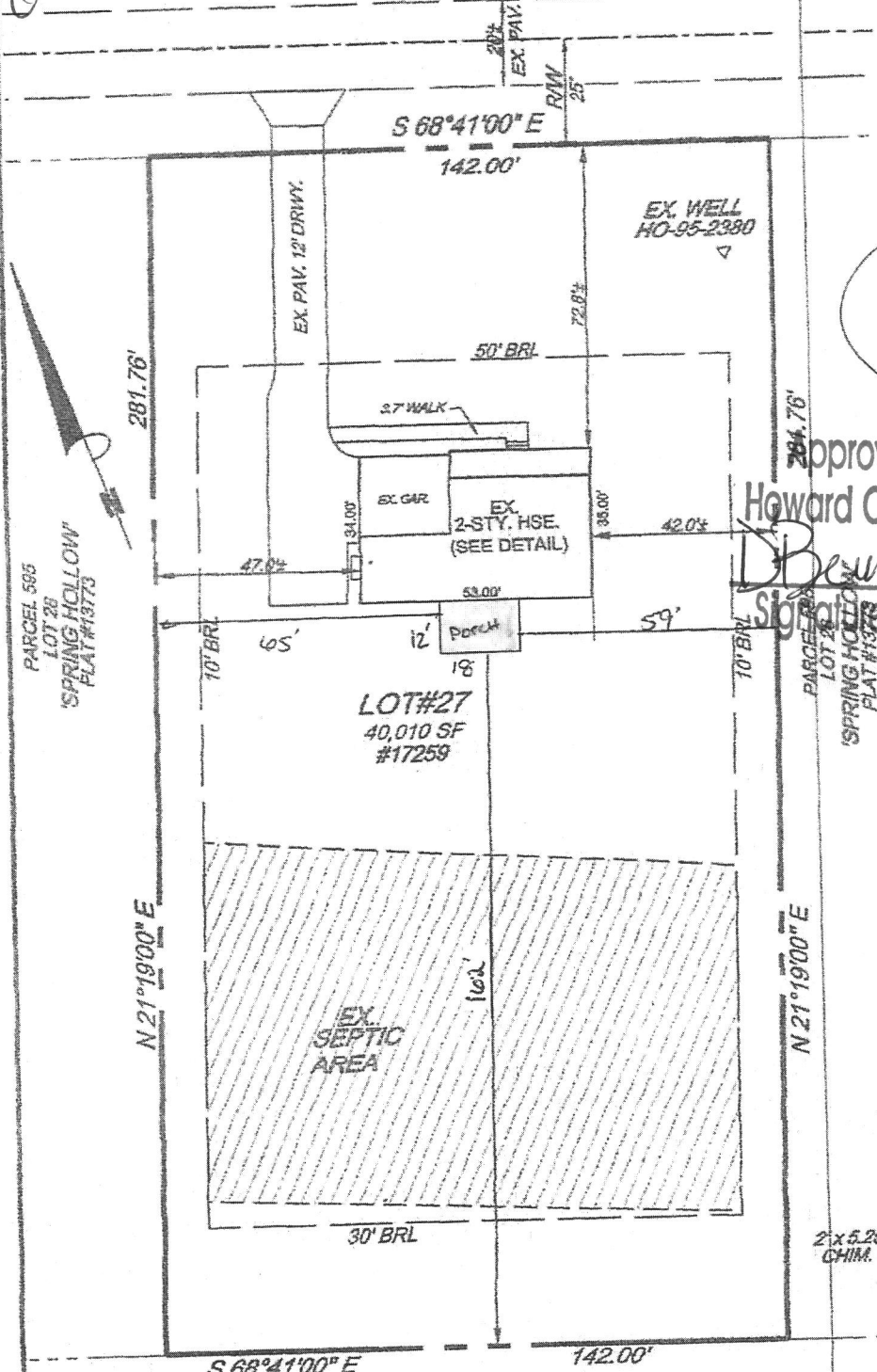
LOCAL ROAD 50' RW

Scale 1"=40'

Approved Septic System Plan
Howard County Health Department

Bevard 7-17-20
Signature Date

B 2000/198



HOUSE DETAIL
SCALE: 1"=30'

LOCATION CERTIFICATION
LOT 27

Menu Save Reset Cancel Help

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Porch	B20002198	07/14/2020
Description of Work		
SFD// CONSTRUCT 12'X18' SCREENED PORCH ON EXISTING DECK		

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
17259	HARDY	RD	
Unit Type	Unit #	X Coordinate	Y Coordinate
--Select--		-77.11535	39.34035
City	State	Zip Code	Primary
MOUNT AIRY	MD	21771	Yes

Parcel * (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
831272	528	40010	190600	526900	336300	RURAL
Legal Description						
IMPSLOT 27 40,010 SQ[]17259 HARDY RD[]SPRING HOLLOW RSB LOT 2						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	27	604001	5				
Plan Area	State Tax Id	Subdivision Name					
	1404363019	SPRING HOLLOW					
Section	Area	Tax Map					
		7					
Grid	Zoning District	ADC Map					
7-8	RC-DEO	4691-B6					
SDP No.	Final Plan No.	WP File No.					
Record Plat No.	WS Contract No.	FDP No.					
13773							
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input type="radio"/> No	2014	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	4-04	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Building No							

Owner * (This section is required.)

Search Reset Clear

Name *

BUECHLER JONATHAN M

Address Line 1

17259 HARDY RD

Address Line 2

Address Line 3

Mail City

MT AIRY

Mail State

MD

Mail Zip Code

21771

Phone

443-472-5326

Primary

Yes

E-mail

Cell Number

Fax Number

Professionals (This section is not required.)

Search Reset Clear

License # *

08010092404

Business Name

NORTH AMERICAN DECK & PATIO EXPERTS

License Type *

MHIC Ind

First Name

ROBERT

Middle Name

Last Name

LOEWY

Primary

Yes

Address Line 1

LLC

Address Line 2

312 HIGHLAND TERRACE

City

PRINCE FREDERICK

State

MD

ZIP Code

206780000

Phone 1

3019282627

Phone 2

Fax

2406529373

E-mail

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type *

Applicant

First Name

MICHELLE

MI

Last Name

CLANCY

Relationship

Applicant

Full Name

MICHELLE CLANCY

Primary

Yes

Organization Name

APPLIED & APPROVED PERMITS LLC

Street Address

P.O. BOX 310

Address Line 2

City

PERRY HALL

State

MD

Zip Code

21128

Phone

443-340-1229

Cell

Fax

E-mail *

MICHELLE@APPLIEDANDAPPROVED.COM

Addtl Info

Est Construction Cost *	Housing Units *	Number of Buildings *	Public Owned
15000	0	0	No
Construction Type			
--Select--			

PORCH INFORMATION

PORCH INFORMATION

Capital Project-No Fee *	Capital Project Number	Fee Exempt *	Roadside Tree Project Permit *	Roadside Tree Project Permit #
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Existing Use *	Type of Porch *	Type of Porch Foundation *	Total Square Footage *	
SFD	Screened Porch	Existing Deck	216 SQFT	
Water Supply	Sewage Disposal	Expiration Date		
Private	Private	1/13/2021		

PAYMENT INFORMATION

Check 1	Payee 1	Check 2	Payee 2	SAP Doc No	SAP Entered

Submit Cancel

