

Approved 11/17/2020 H.O.

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Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Alteration/SFD	B20003873	11/04/2020

Description of Work

SFD/Frame basement. Install electric and plumbing via subcontractor permits. Hang and finish REC/EXERCISE ROOM, wet bar, and bathroom that has existing rough in locations from original builder.

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
14005	BIG BRANCH	DR	
Unit Type	Unit #	X Coordinate	Y Coordinate
--Select--		-77.00636	39.24639
City	State	Zip Code	Primary
DAYTON	MD	21036	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
887735	141	1.16	127600	669800	542200	RURAL

Legal Description

IMPVLOT 1 1.16 A[]14005 BIG BRANCH DR[]BIG BRANCH OVERLOOK

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	1	605101	5				
Plan Area	State Tax Id	Subdivision Name					
	1405431875	BIG BRANCH OVERLOOK					
Section	Area	Tax Map					
		27					
Grid	Zoning District	ADC Map					
27-6	RC-DEO	4932-J1					
SDP No.	Final Plan No.	WP File No.	Primary				
	S-97-021		Yes				
Record Plat No.	WS Contract No.	FDP No.					
13852							
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input type="radio"/> No	2003	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	5-01	<input type="radio"/> Yes <input checked="" type="radio"/> No					

Building No

Owner (This section is not required.)

Search Reset Clear

Name *

Address Line 1

Address Line 2

Address Line 3

Mail City Mail State Mail Zip Code

DAYTON	MD	21036
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Phone Primary

443-561-5890	Yes
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E-mail

Cell Number

Fax Number

Professionals (This section is not required.)

Search Reset Clear

License # *

Business Name

License Type *

First Name

Middle Name

Last Name

Primary

Address Line 1

Address Line 2

City

State

ZIP Code

Phone 1

Phone 2

Fax

E-mail

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type *

First Name

MI

Last Name

Relationship

Full Name

Primary

Organization Name

Street Address

Address Line 2

City	State	Zip Code
HIGHLAND	MD	20777-0000
Phone	Cell	Fax
2406444548		3018540058
E-mail *		
AARONBATESRNR@GMAIL.COM		

Contact (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type	First Name	MI	Last Name
Contact	AARON	R	BATES
Relationship	Full Name		
Licensed Professiona	AARON R BATES		
Primary	Organization Name		
Yes	BATES REPAIR AND RENOVATION		
Street Address			
12946 BYEFIELD DRIVE			
Address Line 2			
City	State	Zip Code	
HIGHLAND	MD	20777	
Phone	Cell	Fax	
240-644-4548	240-644-4548		
E-mail			
AaronBatesRNR@gmail.com			

Addtl Info

Est Construction Cost *	Housing Units *	Number of Buildings *	Public Owned
70000	0	0	No
Construction Type			
434 - Additions, Alterations and Conversions - Residential			

RESIDENTIAL ALTERATION INFO

RESIDENTIAL ALTERATION INFORMATION

Total Square Footage *	Bedrooms	Full Baths	Half Baths	Water *	Sewage *	Existing Utilities *
1200 SQFT	0	1	0	Private	Private	Gas & Electric
Existing Heating System *	Existing Sprinkler System *	Type of New Fireplace	Expiration Date	Fee Exempt *		
Natural Gas	None	--Select--	5/15/2021	<input type="radio"/> Yes <input checked="" type="radio"/> No		

PAYMENT INFORMATION

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

Submit Cancel

