

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Deck	B21002934	08/09/2021
Description of Work		
SFD/ CONSTRUCT A 22'X24' IRREG SHAPED DECK W/LANDING & STEPS 462 SQFT		

[check spelling](#)

Address * (This section is required.)

OK
8/10/21
REB

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type
3617	CLEAR DRIVE	CT
Unit Type	Unit #	X Coordinate
--Select--		-77.03622
		Y Coordinate
		39.2782
City	State	Zip Code
GLENWOOD	MD	21738
	Primary	
	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
897483	228	41168	205000	0	676500	RURAL
Legal Description						
IMPVLOT 14 41,168 SQ[]3617 CLEAR DRIVE CT[]CATTAIL RIDGE RSB 1-3						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	14	605601	5				
Plan Area	State Tax Id	Subdivision Name					
	1404364368	CATTAIL RIDGE					
Section	Area	Tax Map					
		21					
Grid	Zoning District	ADC Map					
21-3	RC-DEO	4812-E6					
SDP No.	Final Plan No.	WP File No.					
	F-99-145						
Record Plat No.	WS Contract No.	FDP No.	Primary				
14157			Yes				
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input type="radio"/> No	2002	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	4-08	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Building No							

Owner * (This section is required.)

Search Reset Clear

Name *

WELLS KIMBERLY J

Address Line 1

3617 CLEAR DRIVE CT

Address Line 2

Address Line 3

Mail City

GLENWOOD

Mail State

MD

Mail Zip Code

21738

Phone

240-417-6355

E-mail

Primary

Yes

Cell Number

Fax Number

Professionals (This section is not required.)

Search Reset Clear

License # * 08010092404
 License Type * MHIC Ind
 Primary Yes

Business Name NORTH AMERICAN DECK & PATIO EXPERTS

First Name ROBERT Middle Name Last Name LOEWY

Address Line 1
 Address Line 2
 312 HIGHLAND TERRACE

City PRINCE FREDERICK State MD ZIP Code 20678 000

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
 Relationship Applicant
 Primary Yes

First Name MICHELLE MI Last Name CLANCY

Full Name MICHELLE CLANCY

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 * 25000 Housing Units * 0 Number of Buildings * 0 Public Owned No

Construction Type --Select--

MISC PERMIT INFO

MISCELLANEOUS PERMIT INFORMATION

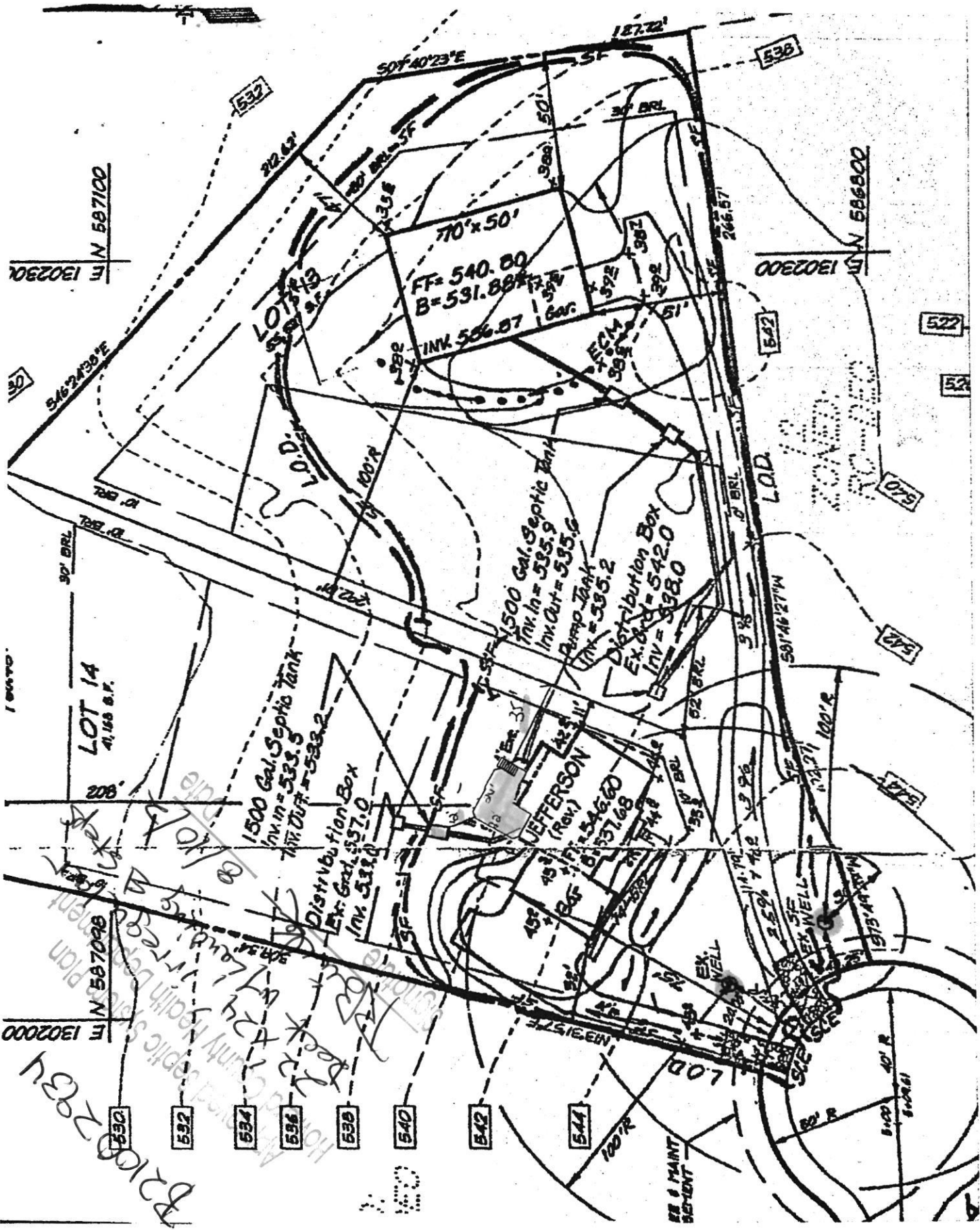
Capital Project-No Fee * Yes No Capital Project Number Fee Exempt * Yes No Roadside Tree Project Permit * Yes No Roadside Tree Project Permit #

Existing Use * SFD Water Private Sewage Private Expiration Date 2/5/2022

PAYMENT INFORMATION

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

Submit Cancel



LOT 14
4,168 S.F.
N 58°10'00"
E 130°23'00"

LOT 19
4,168 S.F.
N 58°10'00"
E 130°23'00"

LOT 20
4,168 S.F.
N 58°10'00"
E 130°23'00"

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3617 Clear Drive Ct.

Scale 1"=50'