

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Pool Spa	B22004271	11/16/2022
Description of Work		
SFD/ INSTALL 48 X 22 FREEFORM 1000 SF INGROUND CONCRETE SWIMMING POOL, DEPTH 3'6"-8', WITH FENCE TO CODE		

[check spelling](#)

Address * (This section is required.)

*Approved R12
12/1/2022*

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type
16235	FREDERICK	RD
Unit Type	Unit #	X Coordinate
--Select--		-77.08105
		Y Coordinate
		39.33753
City	State	Zip Code
WOODBINE	MD	21797
	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
831818	467	5.22	246600	938600	692000	RURAL
Legal Description						
IMPSLOT 1 5.220 AR[]16235 FREDERICK RD[]STANLEY B MILLER						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	1	604001	5				
Plan Area	State Tax Id	Subdivision Name					
	1404334825	Stanley Miller Property					
Section	Area	Tax Map					
		7					
Grid	Zoning District	ADC Map					
7-11	RC-DEO	4691-G7					
SDP No.	Final Plan No.	WP File No.					
Record Plat No.	WS Contract No.	FDP No.					
27/22							
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input type="radio"/> No	2018	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	4-05	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Building No							

Owner * (This section is required.)

Search Reset Clear

Name *

Christopher Kopec
Address Line 1
 16235 Frederick Road
Address Line 2

Address Line 3

Mail City **Mail State** **Mail Zip Code**
 Woodbine MD 21784
Phone **Primary**
 410-442-5005 Yes
E-mail
 info@gallowaypoolservice.com
Cell Number **Fax Number**

Professionals (This section is not required.)

Search **Reset** **Clear**

License # * **Business Name**
 08010025223 GALLOWAY POOL SERVICES INC

License Type * **First Name** **Middle Name** **Last Name**
 MHIC Ind STEVEN GALLOWAY

Primary **Address Line 1**
 Yes 3240 CORPORATE COUT

Address Line 2
 SUITE C

City **State** **ZIP Code**
 ELLICOTT CITY MD 21042-0000

Phone 1 **Phone 2** **Fax**
 4104425005 4104425005

E-mail
 INFO@GALLOWAYPOOLSERVICE.COM

Applicant (This section is not required.)

Search **As Owner** **As Lic. Prof** **As Contact**

Type * **First Name** **MI** **Last Name**
 Applicant BETH M GALLOWAY

Relationship **Full Name**
 Applicant BETH M GALLOWAY

Primary **Organization Name**
 Yes GALLOWAY POOL SERVICE INC

Street Address
 11710 OLD FREDERICK ROAD

Address Line 2

City **State** **Zip Code**
 MARRIOTTSVILLE MD 21104

Phone **Cell** **Fax**
 410-442-5005 443-506-7043 866-237-5642

E-mail *
 beth@gallowaypoolservice.com

Addtl Info

Est Construction Cost * **Housing Units *** **Number of Buildings *** **Public Owned**
 123000 0 0 No

Construction Type
 --Select--

POOL INFORMATION

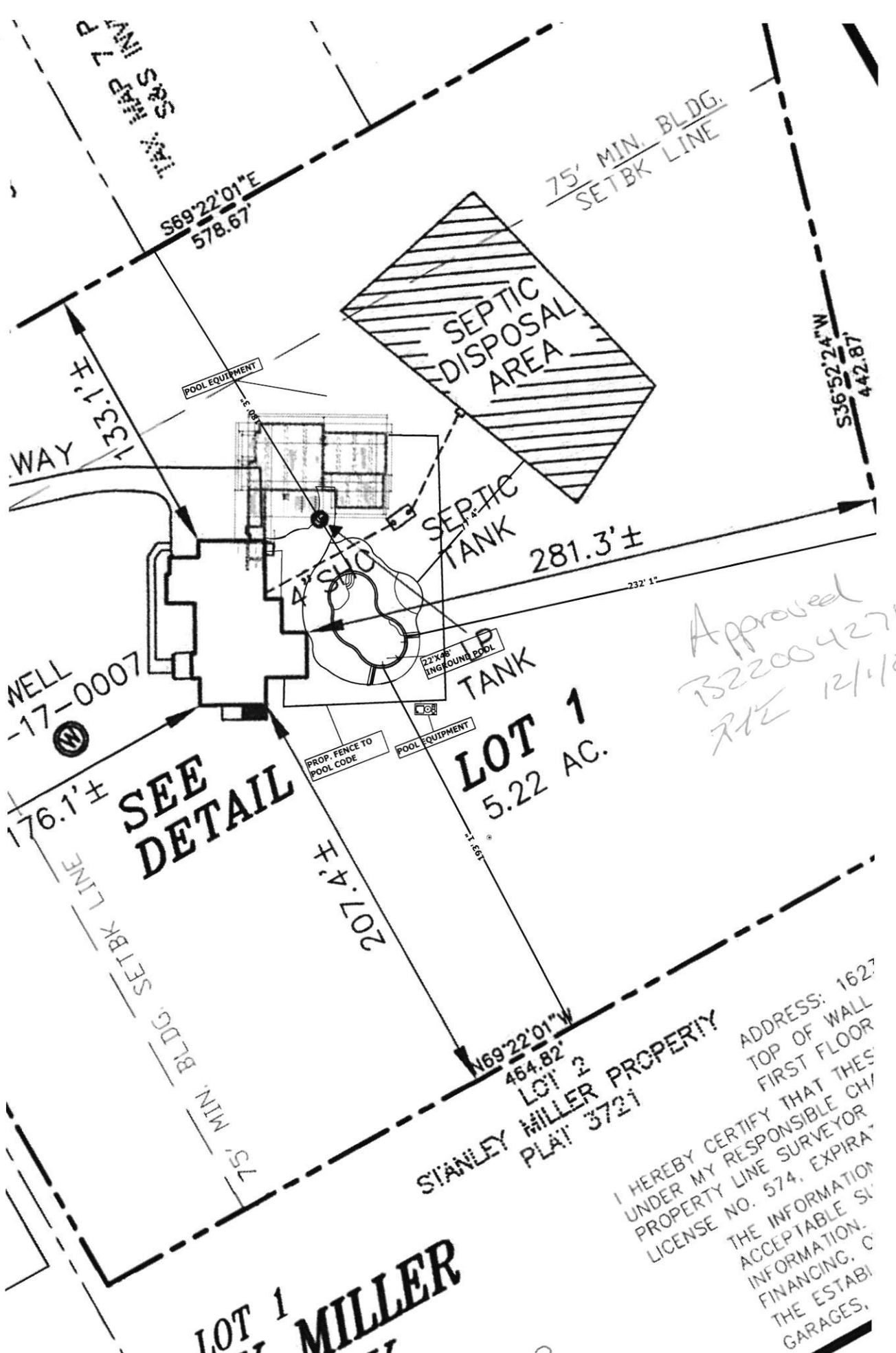
MISCELLANEOUS POOL INFORMATION _____

Capital Project-No Fee * <input type="radio"/> Yes <input checked="" type="radio"/> No	Capital Project Number <input type="text"/>	Fee Exempt * <input type="radio"/> Yes <input checked="" type="radio"/> No	Water Supply * Private <input type="checkbox"/>	Sewage Disposal * Private <input type="checkbox"/>	Existing Use * SFD <input type="checkbox"/>	Type of Pool or Spa * In Ground Pool <input type="checkbox"/>	Pool Safety Device * Fence <input type="checkbox"/>	Electrical Permit Number E22006306	Expiration Date 5/29/2023
--	---	--	---	--	---	---	---	--	-------------------------------------

PAYMENT INFORMATION

Check 1 <input type="text"/>	Payee 1 <input type="text"/>	SAP Doc No <input type="text"/>	SAP Entered <input type="text"/>	<input type="button" value=""/>
--	--	---	--	---------------------------------

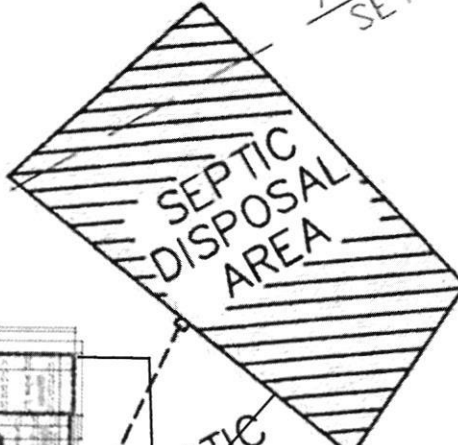
Submit Cancel



S89°22'01"E
 578.67'
 133.1' ±
 WAY
 S89°22'01"E
 578.67'

75' MIN. BLDG.
 SETBK LINE

S36°52'24"W
 442.87'



176.1' ±
 SEE DETAIL
 WELL -17-0007

281.3' ±
 232' 1"

207.4' ±
LOT 1
 5.22 AC.

Approved
 B22004271
 RZE 12/1/2022

75' MIN. BLDG. SETBK LINE
 207.4' ±

N69°22'01"W
 464.82'
LOT 2
 STANLEY MILLER PROPERTY
 PLAT 3721

ADDRESS: 1627
 TOP OF WALL
 FIRST FLOOR
 I HEREBY CERTIFY THAT THIS
 PROPERTY LINE SURVEYOR
 LICENSE NO. 574, EXPIRES
 THE INFORMATION
 ACCEPTABLE SURVEYING
 FINANCING, C
 THE ESTABLISHED
 GARAGES,

LOT 1
MILLER

4:30



2 Messages



51

Absolute | Permit Upd...

