

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Tanks	B23002126	06/14/2023
Description of Work		
SFD//INSTALL (1) 500 GAL UNDERGROUND PROPANE TANK		

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type
13963	CLARKSVILLE	PIKE
Unit Type	Unit #	X Coordinate
--Select--		-76.96849
		Y Coordinate
		39.16327
City	State	Zip Code
HIGHLAND	MD	20777
	Primary	
	Yes	

Approved 7/5/23
KA

Parcel * (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
846759	409	5	285000	546700	261700	RURAL
Legal Description						
IMPSLOT 5 5.000 ACRES[]13963 ROUTE 108[]HIGHLAND						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	5	605102	5				
Plan Area	State Tax Id	Subdivision Name					
	1405347076						
Section	Area	Tax Map					
		40					
Grid	Zoning District	ADC Map					
40-15	RR-DEO	5051-E4					
SDP No.	Final Plan No.	WP File No.					
Record Plat No.	WS Contract No.	FDP No.	Primary				
			Yes				
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input type="radio"/> No	1979	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	5-15A	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Building No							

Owner * (This section is required.)

Search Reset Clear

Name *
WILLIAMS JAMES N TR
Address Line 1
PO BOX 161

Address Line 2

Address Line 3

Mail City HIGHLAND	Mail State MD	Mail Zip Code 20777
Phone 410-733-9991	Primary Yes	
E-mail		
Cell Number	Fax Number	

Professionals (This section is not required.)

License # * 60003	Business Name THOMPSON GAS		
License Type * Propane Gs	First Name J. RANDALL	Middle Name	Last Name THOMPSON
Primary Yes	Address Line 1 6708 OLD NATIONAL PIKE		
	Address Line 2		
	City BOONSBORO	State MD	ZIP Code 21713
	Phone 1 301-432-6611	Phone 2	Fax 301-432-7147
	E-mail BROHRER@THOMPSONGAS.COM		

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

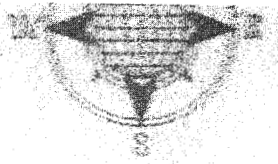
Est Construction Cost * 750	Housing Units * 0	Number of Buildings * 0	Public Owned No
Construction Type 327 - Retail Buildings (Stores/Customer Service)			

TANK INFORMATION

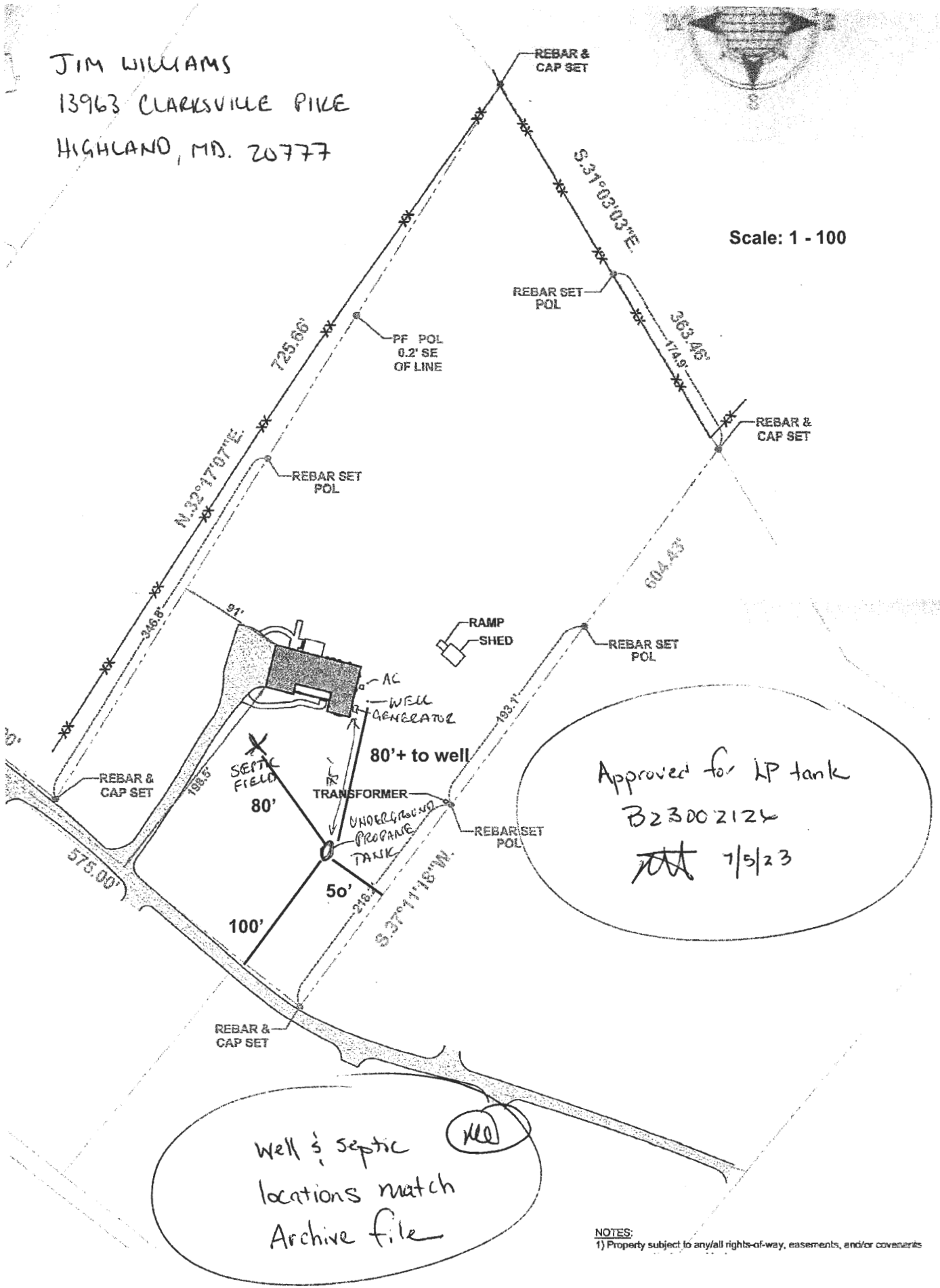
RESIDENTIAL TANK INFORMATION

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	Roadside Tree Project Permit * <input type="radio"/> Yes <input checked="" type="radio"/> No	Roadside Tree Permit # <input type="text"/>
Existing Use * SFD	Number of Tanks Installed * 1	Number of Tanks Removed * 0		
Water Supply	Sewage Disposal	Expiration Date	Relocate Existing Tank *	

JIM WILLIAMS
 13963 CLARKVILLE PIKE
 HIGHLAND, MD. 20777



Scale: 1 - 100



Approved for LP tank
 B23002124
 JWA 7/5/23

Well & septic locations match
 Archive file

NOTES:
 1) Property subject to any/all rights-of-way, easements, and/or covenants