

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Alteration/SFD	B24000100	01/10/2024

Description of Work
 SFD/Interior alterations to pull and replace Kitchen renovation project that includes new appliances installation, new electrical wiring, a new gas line for stove, plumbing work for sink, pot filler and ice maker, new duct work for exhaust hood.

[check spelling](#)

Online BP, files in online public database.

98 1/23/24

Address * (This section is required.)

Search	Reset	Clear	Get Parcel & Owner
Street #	Street Name	Street Type	
7151	MOORLAND	DR	
Unit Type	Unit #	X Coordinate	Y Coordinate
-Select-		-76.93799	39.17406
City	State	Zip Code	Primary
CLARKSVILLE	MD	21029	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
847595	475	33000	266000	899600	633600	RURAL

Legal Description
 IMPSLOT 98 33,000 SQ[]7151 MOORLAND DR[]ASHLEIGH KNOLLS P4

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	98	605102	4				
Plan Area	State Tax Id		Subdivision Name				
	1405420458						
Section	Area		Tax Map				
			40				
Grid	Zoning District		ADC Map				
40-12	RR-DEO		5051-K3				
SDP No.	Final Plan No.		WP File No.				
Record Plat No.	WS Contract No.		FDP No.		Primary		
11839					Yes		
Owner Occupied	Year Built		Historic District				
<input type="radio"/> Yes <input type="radio"/> No	1999		<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 not required.)

Search	Reset	Clear
Name *	HEMPHILL ANTHONY	
Address Line 1	7151 MOORLAND DR	
Address Line 2		
Address Line 3		
Mail City	Mail State	Mail Zip Code
CLARKSVILLE	MD	21029
Phone	Primary	
301-655-3690	Yes	
E-mail		
Cell Number	Fax Number	

Approved Septic System Plan
 Howard County Health Department
 Dana Bencard 1-29-24
 Signature Date

Did not approve additional BR.

Professionals (This section is not required.)

License # * 08050142915
 License Type * MHIC Co Primary Yes
 Business Name DESIGN KITCHEN AND BATH LLC
 First Name ANGELA Middle Name Last Name DOGANCI
 Address Line 1 8450 BALTIMORE NATIONAL PIKE 150
 Address Line 2 8450 BALTIMORE NATIONAL PIKE 150
 City ELLICOTT CITY State MD ZIP Code 21043-0000
 Phone 1 4436788103 Phone 2 Fax
 E-mail ANGDOGANCI87@GMAIL.COM

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type * Applicant
 Relationship Applicant Primary No
 First Name Angela MI Last Name Doganci
 Full Name Angela Doganci
 Organization Name Design Kitchen and Bath
 Street Address 8450 Baltimore National Pike suite 150
 Address Line 2
 City Ellicott City State MD Zip Code 21043
 Phone 443-824-6755 Cell Fax
 E-mail angela@designkitchenandbath.com

Contact (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type * Contact
 Relationship Licensed Professional Primary Yes
 First Name Angela MI Last Name Doganci
 Full Name Angela Doganci
 Organization Name Design Kitchen and Bath
 Street Address 8450 Baltimore National Pike suite 150
 Address Line 2
 City Ellicott City State MD Zip Code 21043
 Phone 443-824-6755 Cell Fax
 E-mail angela@designkitchenandbath.com

Addtl Info

Est Construction Cost * 40000
 Housing Units * 0
 Number of Buildings * 0
 Public Owned No
 Construction Type 434 - Additions, Alterations and Conversions - Residential

RESIDENTIAL ALTERATION INFO

RESIDENTIAL ALTERATION INFORMATION

Total Square Footage * 275 SQFT
 No of Stories * 2
 Basement Full Finished
 Bedrooms Full Baths Half Baths Water * Private Sewage * Private
 Existing Utilities * Gas & Electric
 Existing Heating System * Natural Gas
 Existing Sprinkler System * None
 Type of New Fireplace --Select--
 Expiration Date 7/15/2024
 Fee Exempt * Yes No

Submit Cancel