

Record Detail * (This section is required.)

Permit Type Building/Residential/Misc/Pool Spa Permit Number B23003797 Opened Date 09/18/2023
 Description of Work add a 8'x14 therapy spa in fenced backyard with a locked security cover off of existing patio

[check spelling](#)

Online permit,
 JB 9/20/23

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street # 4405 Street Name COLLEGE Street Type AVE
 Unit Type -Select-- Unit # -76.77656 X Coordinate 39.25053 Y Coordinate
 City ELLICOTT CITY State MD Zip Code 21043 Primary Yes

Parcel * (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID * 889603 Parcel 80 Parcel Area 3.23 Land Value 292900 Improved Value 780700 Exemption Value 487800 Plan Area ELLICO
 Legal Description IMPS3.23 ACRES[]4405 COLLEGE AVE[]

[check spelling](#)

Block Lot Census Tract 602700 Council Dist 1 Inspection Dist 6 Supervisor Dist Map # DAP Zone
 Plan Area State Tax Id 1402230844 Subdivision Name
 Section Area Tax Map 25
 Grid Zoning District R-ED ADC Map 4816-F10
 SDP No. Final Plan No. WP File No.
 Record Plat No. WS Contract No. FDP No. Primary Yes
 Owner Occupied Year Built 2014 Historic District Yes No
 Historic District Registry No. Stat Area 2-18 Flood Plain Yes No
 Building No

Owner * (This section is required.)

Search Reset Clear

Name * MILLER JUDITH
 Address Line 1 4405 College Ave
 Address Line 2
 Address Line 3
 Mail City Ellicott City Mail State MD Mail Zip Code 21043
 Phone 443-540-3279 Primary Yes
 E-mail jmiller@abd-architects.com
 Cell Number Fax Number

Professional's (This section is not required.)

License # * 21040008509
 License Type * Architect
 Primary No

Business Name *
 First Name JUDITH Middle Name Last Name MILLER
 Address Line 1 8355 COURT AVENUE
 Address Line 2

City ELLICOTT CITY State MD ZIP Code 21043-0000
 Phone 1 Phone 2 Fax

E-mail JMILLER@ABD-ARCHITECTS.COM

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type * Applicant
 Relationship -Select--
 Primary Yes

First Name JUDITH MI A Last Name MILLER
 Full Name JUDITH A MILLER
 Organization Name ARCHITECTURE BY DESIGN
 Street Address 4405 COLLEGE AVENUE
 Address Line 2

City ELLICOTT CITY State MD Zip Code 21043
 Phone 410-750-1918 Cell 443-540-3279 Fax 410-480-2480
 E-mail * jmiller@abd-architects.com

Addtl Info

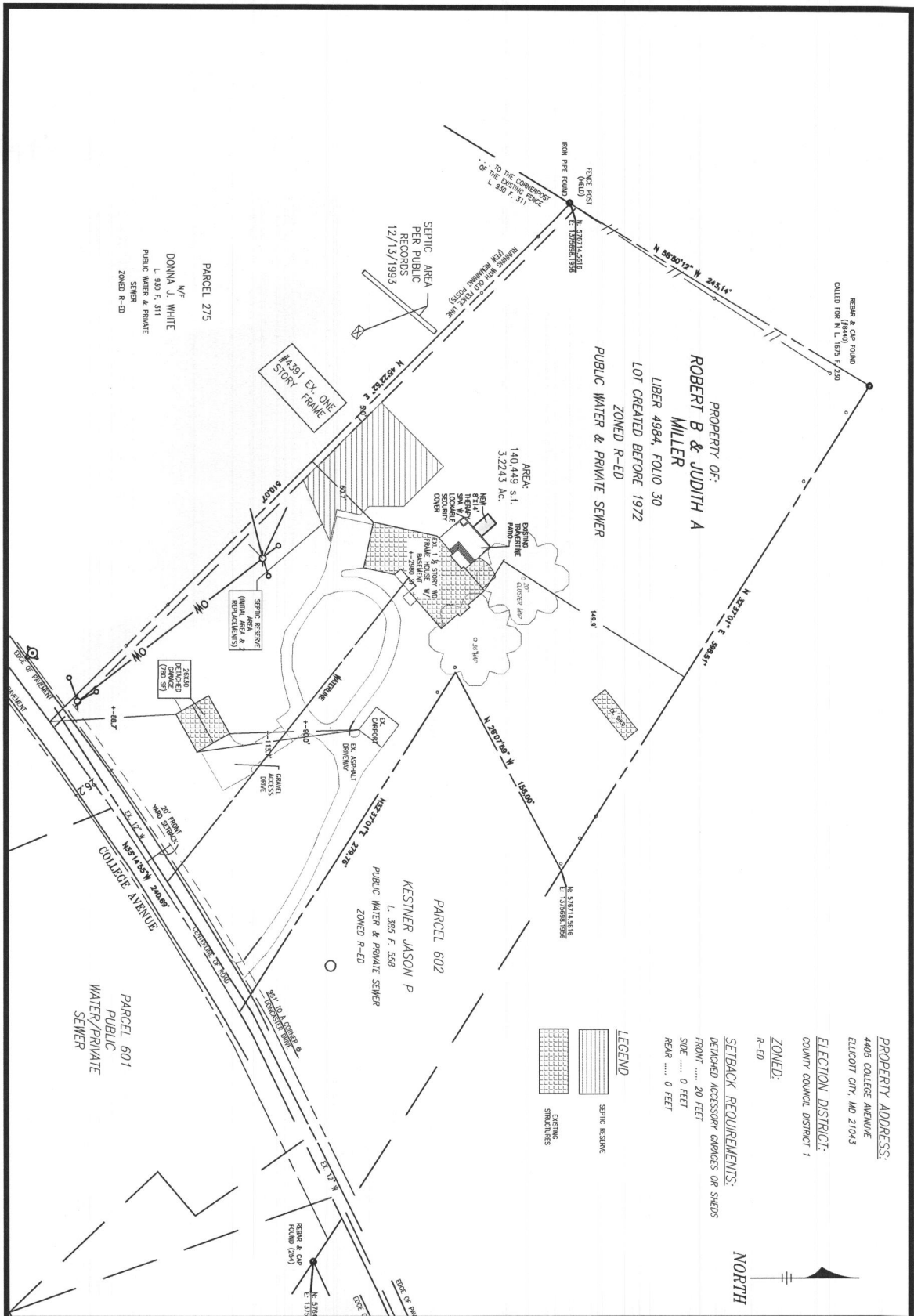
Est Construction Cost * 50000 Housing Units * 0 Number of Buildings * 0 Public Owned No
 Construction Type -Select--

POOL INFORMATION

MISCELLANEOUS POOL INFORMATION

Capital Project-No Fee * Yes No Capital Project Number Fee Exempt * Yes No Water Supply * Public Sewage Disposal * Private
 Existing Use * SFD Type of Pool or Spa * Above Ground Pool Pool Safety Device * Fence Electrical Permit Number Expiration Date 3/17/2024

Submit Cancel



PROJECT NAME
MILLER THERAPY SPA

DATE
9/18/2013

OWNER/DEVELOPER
ROBERT & JUDITH MILLER

PLOT PLAN W/ LOCATED SPA

SHEET
C-1

Scale: 1"=80'

Architecture by Design

8355 Court Avenue • Ellicott City, MD 21043
phone 410-480-3210 • fax 410-480-2480
www.abd-architects.com