

Approved 3.1.23
-H.O.

Menu Save Reset Cancel Help

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Pool Spa	B23000555	02/22/2023
Description of Work		
SFD/Install approx. 300sq inground concrete pool. 12 x 24, 3ft to 5ft, 3'patio around pool, 175lf 48" fence around pool		

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
15445	RIVERCREST	CT	
Unit Type	Unit #	X Coordinate	Y Coordinate
--Select--		-77.04732	39.25418
City	State	Zip Code	Primary
BROOKVILLE	MD	20833	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
922623	270	1.35	208500	208500	0	RURAL
Legal Description						
LOT 6 1.135 A[]15445 RIVERCREST CT[]RIVERCREST RS LT 1 BUICE						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	6	605601	5				
Plan Area	State Tax Id	Subdivision Name					
	1404370619	RIVERCREST					
Section	Area	Tax Map					
		21					
Grid	Zoning District	ADC Map					
21-20	RC-DEO	4812-C10					
SDP No.	Final Plan No.	WP File No.					
	F-04-057						
Record Plat No.	WS Contract No.	FDP No.	Primary				
18210			Yes				
Owner Occupied	Year Built	Historic District					
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No					
Historic District Registry No.	Stat Area	Flood Plain					
	4-09	<input type="radio"/> Yes <input checked="" type="radio"/> No					
Building No							

Owner * (This section is required.)

Search Reset Clear

Name *
VALLANCE PHILLIP JAMES

Address Line 1
2135 ROUTE 97

Address Line 2

Address Line 3

Mail City
COOKSVILLE

Phone
410-371-6155

E-mail
pjvalla@gail.com

Cell Number

Mail State
MD

Mail Zip Code
21723

Primary
Yes

Fax Number

Professionals (This section is not required.)

License # *
 08010045377
License Type *
 MHIC Ind
Primary
 Yes

Business Name
 NOVA BUILDERS INC
First Name
 ARTHUR
Middle Name
 C
Last Name
 TATE
Address Line 1
 8371 BALTIMORE ANNAPOLIS BLVD
Address Line 2

City
 PASADENA
State
 MD
ZIP Code
 21122-0000
Phone 1
 4104973731
Phone 2
Phone 2
Fax
 4107661497
E-mail
 ACTTOO@AOL.COM

Applicant (This section is not required.)

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

Type *
 Applicant
Relationship
 Applicant
Primary
 Yes

Full Name
 MARK WEEKS
Organization Name
 NOVA BUILDERS INC
Street Address
 8371 A BALTIMORE ANNAPOLIS BOULEVARD
Address Line 2

City
 PASADENA
State
 MD
Zip Code
 21122
Phone
 410-766-1770
Cell
 443-250-1153
Fax
 410-766-1497
E-mail *
 builders@novapoolandspa.net

Addtl Info

Est Construction Cost * **Housing Units *** **Number of Buildings *** **Public Owned**
 30000 0 0 No

Construction Type
 329 - Structures Other Than Buildings (Retaining Walls/Tents)

POOL INFORMATION

MISCELLANEOUS POOL INFORMATION

Capital Project-No Fee * **Capital Project Number** **Fee Exempt *** **Water Supply *** **Sewage Disposal ***
 Yes No Yes No Private Private

Existing Use * **Type of Pool or Spa *** **Pool Safety Device *** **Electrical Permit Number** **Expiration Date**
 SFD In Ground Pool Fence 8/28/2023

Submit Cancel

1" = 40'

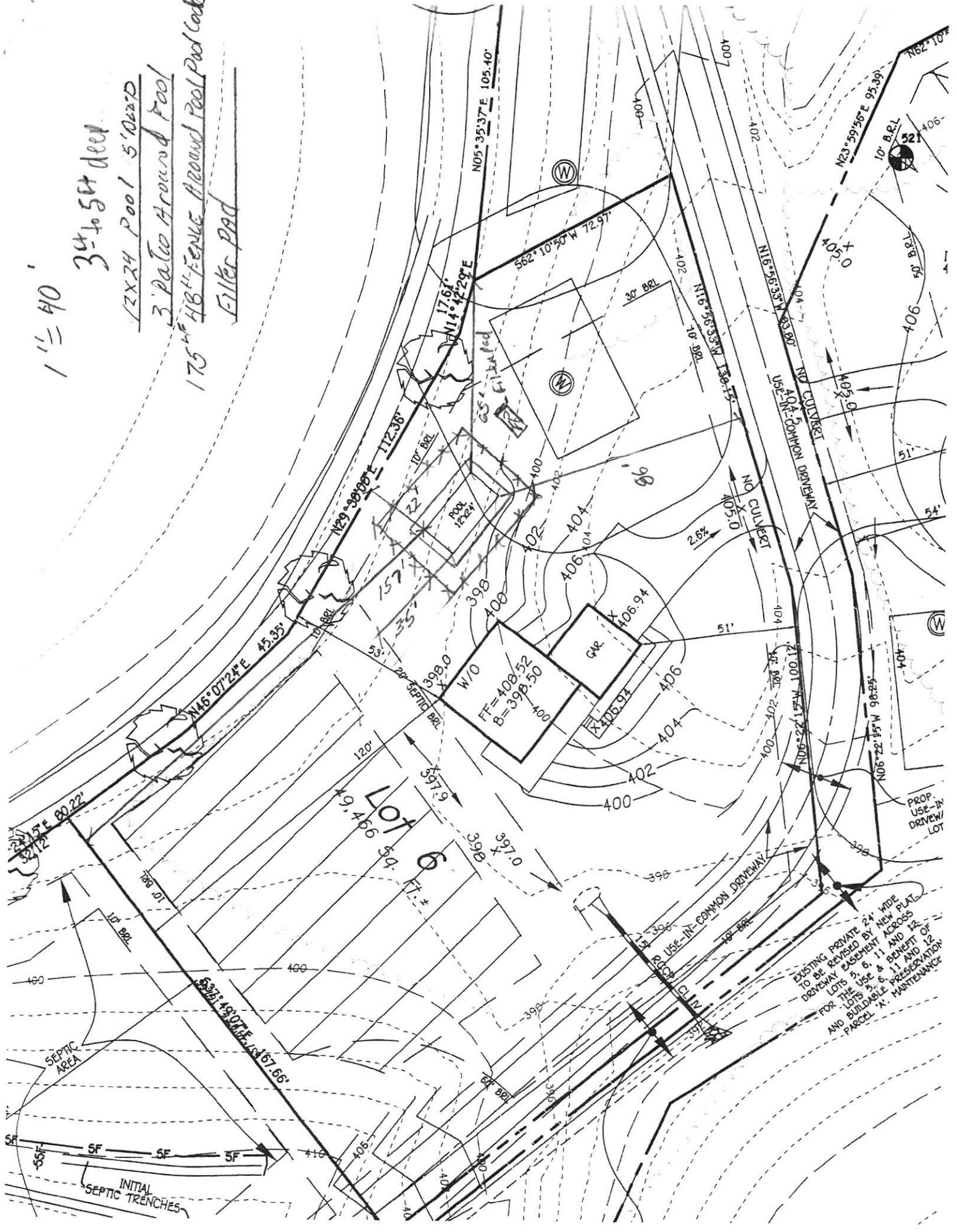
3'-6" 5ft deep

12x24 Pool 5'0x2'D

3' Patco Around Pool

175" 48" Fence Around Pool Pad Cont

Filter Pad



Lot 6

EXISTING PRIVATE 24' WIDE DRIVEWAY EASEMENT ACROSS LOTS 5, 6, 11 AND 12 FOR THE USE & BENEFIT OF AND BUILDABLE PRESERVATION PARCEL 'A', MAINTENANCE

PROP. USE-IN-DRIVEWAY LOT