

Record Detail \* (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Deck	B24004524	11/29/2024

Description of Work  
SFTH/ CONSTRUCT 18' X 12' OPEN DECK WITH STEPS \*\*SUBJECT TO FIELD INSPECTION\*\*

Online BP.  
y.b 12/5/24

[check spelling](#)

Address \* (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
8906	PEMBROOK WOODS	--Select--	
Unit #	Unit #	X Coordinate	Y Coordinate
--Select--		-76.8634	39.12405
City	State	Zip Code	Primary
LAUREL	MD	20723	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
836437	1021	1698	75000	278700	169900	SOUTHE
Legal Description						
LOT 114 .039 A [ ]8906 PEMBROOK WOODS [ ]WYNDEMERE SEC 1						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	114	606903	3				
Plan Area	State Tax Id		Subdivision Name				
	1406533787						
Section	Area		Tax Map				
			47				
Grid	Zoning District		ADC Map				
47-19	R-SC		5169-B1				
SDP No.	Final Plan No.		WP File No.				
Record Plat No.	WS Contract No.		FDP No.		Primary		
10073					Yes		
Owner Occupied	Year Built		Historic District				
<input type="radio"/> Yes <input type="radio"/> No	1992		<input type="radio"/> Yes <input checked="" type="radio"/> No				
Historic District Registry No.	Stat Area		Flood Plain				
	6-28		<input type="radio"/> Yes <input checked="" type="radio"/> No				
Building No							

Owner \* (This section is required.)

Search Reset Clear

Name \*  
WILSO

Address Line 1  
8906 PEMBROOK WOODS

Address Line 2

Address Line 3

Approved Septic System Plan  
Howard County Health Department

Bernard      12-18-24  
Signature                      Date

Mail City  
LAUREL  
Mail State  
MD  
Mail Zip Code  
20723  
Phone  
804-921-5017  
Primary  
Yes  
E-mail

Cell Number                      Fax Number

**Professionals** (This section is not required.)

License #                      Business Name  
08050136081                      DECK ARMOR LLC  
License Type                      First Name                      Middle Name                      Last Name  
MHIC Co                      ✓ IEVGENII                                           KHOMIAK  
Primary                      Address Line 1  
Yes                      ✓ 8520 DAKOTA DRIVE  
Address Line 2  
  
City                      State                      ZIP Code  
GAITHERSBURG                      MD                      20877-0000  
Phone 1                      Phone 2                      Fax  
2404838165  
E-mail  
XOMAPSF1988@GMAIL.COM

**Applicant** (This section is not required.)

Search                      As Owner                      As Lic. Prof                      As Contact

Type                      First Name                      MI                      Last Name  
Applicant                      LEVGENII                                           Khomiak  
Relationship                      Full Name  
--Select--                      ✓ LEVGENII Khomiak  
Primary                      Organization Name  
Yes                      ✓ DECK ARMOR LLC  
Street Address  
South Summit Avenue  
Address Line 2  
  
City                      State                      Zip Code  
Gaithersburg                      MA                      20877  
Phone                      Cell                      Fax  
240-483-8165  
E-mail  
manager@deck-armor.com

**Addtl Info**

Est Construction Cost                      Housing Units                      Number of Buildings                      Public Owned  
20000                      0                      0                      No                      ✓  
Construction Type  
--Select--                      ✓

**MISC PERMIT INFO**

**MISCELLANEOUS PERMIT INFORMATION**

Capital Project-No Fee                      Capital Project Number                      Fee Exempt                      Roadside Tree Project Permit                      Roadside Tree Project Permit #  
 Yes  No                      (Text)                       Yes  No                       Yes  No                      (Text)  
Existing Use                      Water                      Sewage                      Expiration Date  
Townhouse                      ✓ Public                      ✓ Public                      ✓ 6/3/2025                      [a]

Submit

Cancel