

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

Building Address 13448 ALLNUTT LANE
HIGHLAND, MD. 20777
 Suite/Apt. #: _____ SDP/WPP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot _____
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name SHAMIM IFTIKHAN
 Address 13448 ALLNUTT LANE
 City HIGHLAND State MD Zip Code 20777
 Home Phone 301-854-9110 Work Phone _____
 Applicant's Name & Mailing Address (if other than stated hereon):
854-9110
 Phone _____ Fax _____

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ _____
 Description of Work ABOVE GROUND
POOL - TEMPORARY STRUCTURE
17X31 - WITH LEGS OCCUPIES
19X33 SPACE.

Contractor Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 License No. _____
 Phone _____ Fax _____

Occupant or Tenant SHAMIM IFTIKHAN
 Contact Name IRFAN MARTIN IFTIKHAN
 Address 13448 ALLNUTT LANE
 City HIGHLAND State MD Zip Code 20777
 Phone 301-854-9110 Fax _____

Engineer or Architect Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawlspace <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____ Height: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R Other: _____

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Shamim Iftikhan
 Applicant's Signature
 Title/Company _____

SHAMIM IFTIKHAN
 Print Name
8-2-06
 Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 FOR OFFICE USE ONLY

AGENCY	DATE	SIGNATURE/ APPROVAL	DEPT SETBACK INFORMATION	PROPERTY ID#	
Land Development DPZ			Front: _____ Filing fee \$ _____		
State Highway			Rear: _____ Permit fee \$ _____		
Public Official			Side: _____ Excise fee \$ _____		
Dev Engineering DPZ			Side St: _____ Advt per fee \$ _____		
Health	<u>8/2/06</u>	<u>[Signature]</u>	All easements satisfied? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____	
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____	
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____	
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for New/Team Zone _____	Check \$ _____	
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red line approval state _____	Validation \$ _____	
Distribution of Copies: _____	White: Building Official	Green: LOD, DPZ	Yellow: DED, DPZ	Pink: Health	Gold: SHA

This site not in flood plain area per F.E.M.A. Flood Insur. Rate Maps.

APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# 24691
APP. SAN SF DATE: 8/2/06
DESC. OF WORK: ~~excav~~

above ground:
19x33'
or existing
patio

S 61° 20' 00" E

8
40047

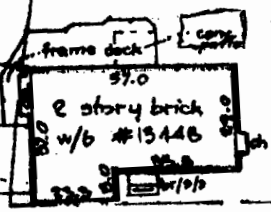
LONG DAYS COURT (50')

A=203.49'

R=675'

N 38° 15' 00" W
35.33'

40' BRK 30'



*SEPTIC CLEANOUT

EXISTING WELL

75' BRK 20'

S 9° 30' 00" W 150.72'

N 63° 45' 00" W 119.76' A=09.77' R=1230'

ALLNUTT (00) LANE

I hereby certify that improvements have been located and depicted hereon, in relation to recorded property descriptions, at a nearest foot accuracy, and that there are no encroachments except as shown.



4/29/97

Date _____ WESS _____
Registered Professional Surveyor
Maryland

- (i) This plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer, financing or refinancing;
- (ii) This plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements; and
- (iii) This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing of financing or refinancing.

HOUSE LOCATION PLAT

Address 13448 Allnut Lane
Lot 8, Block —, Section 2, Area —
Plat No. —, Plat Book —, Plat 5841
ALLNUTT FARMS ESTATES
Howard County, Maryland
5th Election District

W. COOK & ASSOCIATES

13829 Wayside Drive
Clarksville, MD 21030

KJ
Case No. 134-48 Survey 970503

MAY 28
PK 515-2111
61

216 515 2111