

Building Address 6565 CEDAR LANE
COLUMBIA, MD 21044

Property Owner's Name PETER STANGER
 Address 6565 CEDAR LANE
 City COLUMBIA State MD Zip Code 21044

Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Consue Tract 1050 Subdivision _____
 Section _____ Area _____ Lot -3
 Tax Map 35 Parcel 2111 Grid Q3
 Zoning RAL Map-Coordinates 310 Lot size _____

Home Phone 413-629-4240 Work Phone 5411
 Applicant's Name & Mailing Address, (if other than stated hereon):
ALAN TAPPER
P.O. Box 258
OWINGS MILLS MD 21117
410-363-7033 Phone 410-363-0120 Fax 410-363-0120

Existing Use SINGLE FAMILY HOME
 Proposed Use SUN DECK FOR SAME
 Estimated Construction Cost \$ 6100.00

Contractor Company TIMBER-TECH
 Contact Person ALAN TAPPER
 Address P.O. Box 258
 City OWINGS MILLS State MD Zip Code 21117
 License No. 15410 Phone 410-363-7033 Fax 410-363-0120

Description of Work BUILD AN IRREGULAR SHAPE
26X15 SUN DECK APPROX 30" HIGH ON
REAR OF EXISTING HOME WITH STEPS

Occupant or Tenant PETER STANGER
 Contact Name PETER STANGER
 Address 6565 CEDAR LANE
 City COLUMBIA State MD Zip Code 21044
 Phone 413-629-4240 Fax 410-715-9762

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

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: Public <input type="checkbox"/> Private <input type="checkbox"/>	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: Public <input checked="" type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: Public <input type="checkbox"/> Private <input type="checkbox"/>	1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: Public <input type="checkbox"/> Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>	Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <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: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____	Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____ State Certified Modular <input type="checkbox"/> Manufactured Home <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ 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 HERETO; (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 THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature Alan Tapper Print Name ALAN TAPPER
OWINGS MILLS - ALAN TAPPER'S TIMBER TECH, INC. Date 12/18/00
 Title/Company _____

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

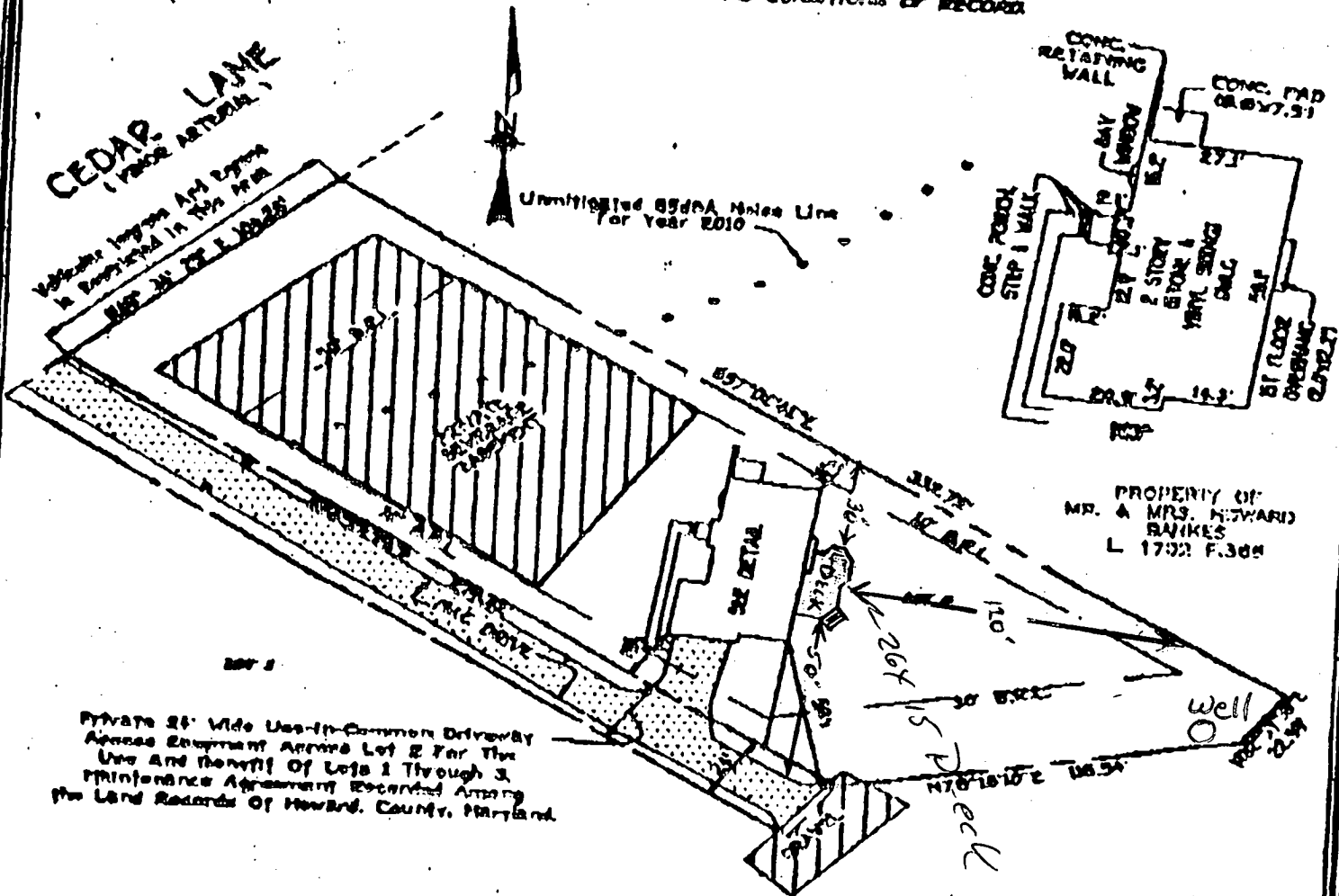
AGENCY	DATE	SIGNATURE APPROVAL	DEP. SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St: _____	Sub-total paid \$ _____
Health			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l permit fee \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
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/Town Zone _____	Check # _____
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # _____
			Accepted by _____	

GENERAL NOTES:

1. THIS PLAN IS PREPARED FOR THE PERMIT OF THE CLIENT SHOWING THE HOUSE LOCATION. SURVEY APPROVAL FORM BY THE COUNTY AS IT IS REQUIRED BY A LICENSED TITLE INSURANCE COMPANY AS ITS AGENTS IN CONNECTION WITH THE ESTABLISHED TRAILING TRAILING OR RE-TRAILING. UNLESS INDICATED AS BEING A FOUNDARY SURVEY, THIS PLAN IS NOT INTENDED FOR USE IN THE ESTABLISHMENT OF PROPERTY LINES AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OF LOCATIONS OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS AS A RESULT, THIS PLAN DOES NOT PROVIDE FOR ACCURATE IDENTIFICATION OF PROPERTY LINE BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE PURPOSES OF TITLE OR SECURING FINANCING OR RE-FINANCING SUBJECT PROPERTY AS SHOWN IN ZONE C ON THE NATIONAL FLOOD INSURANCE PROGRAM FLOOD INSURANCE RATE MAP OF MARYLAND COUNTY, MARYLAND. CONTINITY PANEL NO. 1702 F.308

2. THE OFFICE FROM BUILDING LINE TO PROPERTY LINE AS SHOWN ON THE PLAN HEREON ARE TO AN ACCURACY OF 1" PER 100' UNLESS OTHERWISE NOTED.

3. THIS TITLE REPORT FURNISHED SUBJECT TO ALL EASEMENTS AND CONDITIONS OF RECORD.

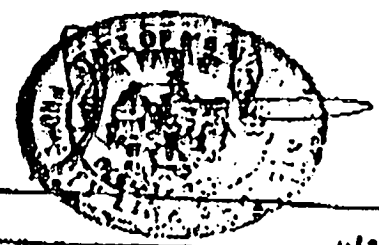


12/13/00
 Proposed deck location
 as shown

850PA BUILDING RESTRICTION LINE
 TOP OF FOUNDATION ELEV. 297.5'

LOT 3
 VINEYARD FARM
 LOTS 1-3
 5TH ELECTION DISTRICT
 HOWARD COUNTY, MARYLAND
 PLAT 827, 11089

ITSNER, COLLINS & GARDNER, INC.
 1100 W. BROADWAY, SUITE 1000
 BALTIMORE, MD 21201
 TEL: 410-528-1100
 FAX: 410-528-1101



PROFESSIONAL LAND SURVEYOR
 DATE 11/28/00
 PROJ. NO. 502

HOUSE LOCATION DRAWING

FOUNDATION LOCATION
 FINAL LOCATION
 BOUNDARY SURVEY

SCALE: 1" = 10'
 DATE: 11/28/00
 DRAWN BY: [Signature]
 CHECKED BY: [Signature]
 PROJECT NO. 502

