

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
B00158999

Building Address 13442 Chris Mar Ct
Highland 20777
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision Chris Mar Estate
Section _____ Area 1.82ac Lot 4
Tax Map 34 Parcel 367 Grid 15
Zoning _____ Map Coordinates _____ Lot size 1.82ac

Property Owner's Name Raymond Carper
Address 13442 Chris Mar Ct
City Highland State MD Zip Code 20777
Home Phone _____ Work Phone _____
if other than stated hereon:
Mrs. Karen H. Klayman
293 Southland Ct.
Dunkirk, MD 20754 410 5077705

Existing Use SFD
Proposed Use Inground pool
Estimated Construction Cost \$ 30,000
Description of Work 18' x 40' inground pool,
3 to 7' depth, filled by truck
200' of 4" fence to code

Co _____
Co **JOHNSON POOLS & SPAS** _____
408 Headquarter Drive _____
Ad Millersville, Md. 21108 _____
410-729-8800 _____
Cit M.H.I.C. 120855 _____
Lic _____
Phone _____ Fax _____

Occupant or Tenant _____
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ 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: _____ Public <input type="checkbox"/> Private <input type="checkbox"/>
No. of stories: _____	Sewage Disposal: _____ Public <input type="checkbox"/> Private <input 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"/>
Use group: _____	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 <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

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

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.

Karen Klayman
Applicant's Signature

Karen Klayman
Print Name

Title/Company

4/3/06
Date

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

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>4/4/06</u>	<u>[Signature]</u>
Fire Protection		

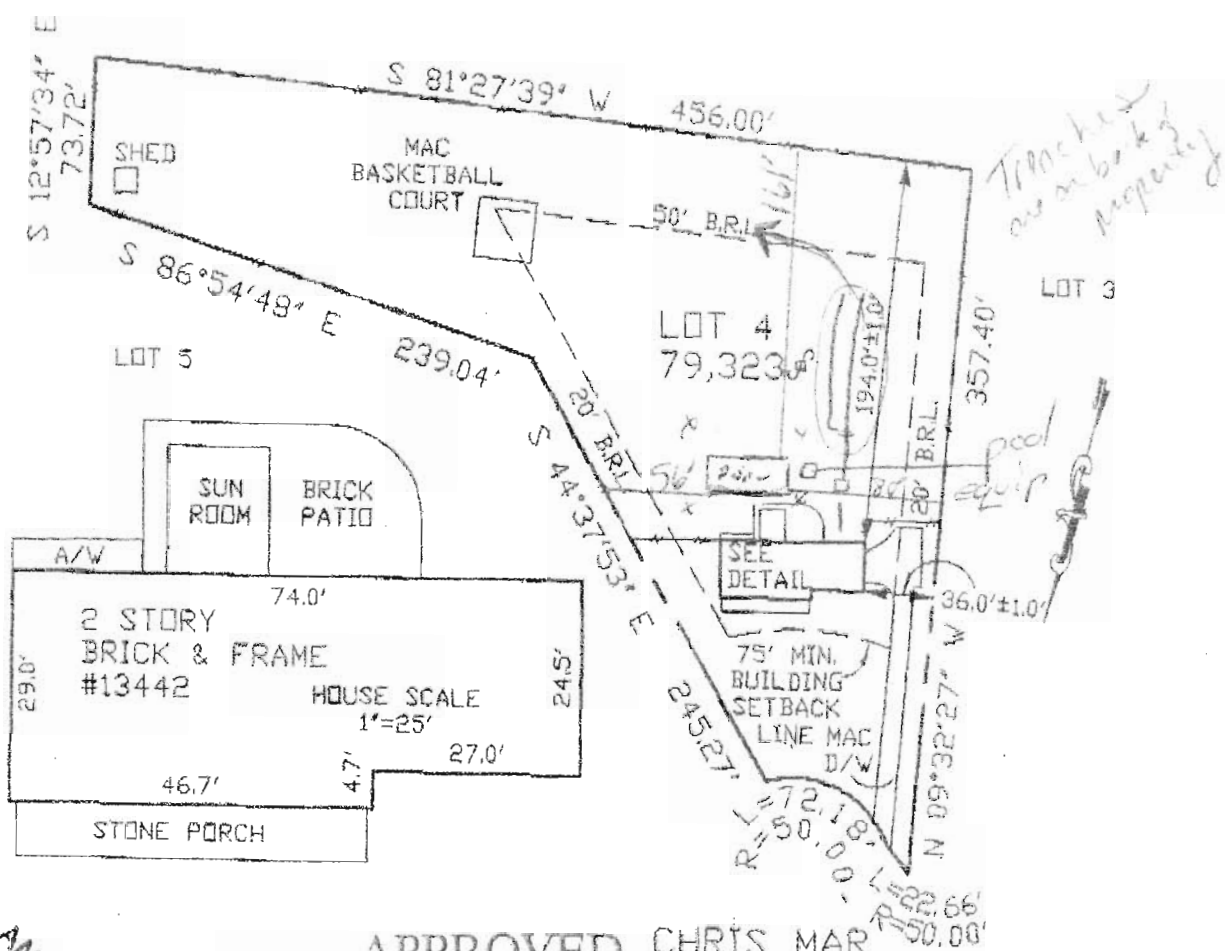
DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone _____	Check # _____
SDP/Red line approval date _____	Validation # _____

Is Sediment Control approval required prior to issuance?
YES NO

CONTINGENCY CONSTRUCTION START:

ONE STOP SHOP:

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA
T:\forms\PERMIT.FRM



**APPROVED CHRIS MAR COURT
WALK-THRU BUILDING PERMIT**

BP# B00158999 A# 27152
 APP. SAN JK DATE: 4/4/06
 DESC. OF WORK:
19' X 40' in ground pool

Setback requirements are as per plat.
 No evidence of property corners was found.
 Apparent occupation is shown.

Date: 02-28-06 Scale: 1"=100' Dwn: DWF
 Plat Book: NO TITLE REPORT FURNISHED
 Plat No.: 3728
 Work Order: 06-1568
 Address: 13442 CHRIS MAR COURT
 District: 5
 Jurisdiction: HOWARD COUNTY, MD

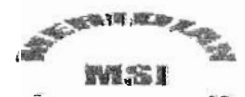
Surveyor's Certification

I hereby certify that the survey shown hereon is correct to the best of my knowledge and that, unless noted otherwise, it has been prepared utilizing description of record. This survey is not a boundary survey and the location or existence of property corners is neither guaranteed nor implied. Fence lines, shown, are approximate in location. Building restriction lines shown are as per available information and are subject to the interpretation of the originator.

Keith W. Leu

LOCATION DRAWING
 LOT 4
 SECTION ONE
 CHRIS MAR ESTATES

NOTE: 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, and it is not to be relied upon for the establishment of...



Meridian Surveys, Inc.
 811 Russell Avenue
 Suite #303