

TAXED 06-431437

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE P. ELICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		HOWARD COUNTY PERMIT APPLICATION		PERMIT NUMBER B00156533	
Building Address <u>9120 RIVERHILL RD</u> <u>Laurel, MD 20723</u>			Property Owner's Name <u>Kenneth & Lisa Ecker</u>		
Suite/Apt. #: _____ SDP/WP/Petition #: _____			Address <u>9120 Riverhill Rd</u>		
Census Tract _____ Subdivision _____			City <u>Laurel</u> State <u>MD</u> Zip Code <u>20723</u>		
Section _____ Area _____ Lot _____			Home Phone <u>301-362-3301</u> Work Phone <u>301-466-4967</u>		
Tax Map <u>50</u> Parcel <u>429</u> Grid _____			Applicant's Name & Mailing Address, (if other than stated hereon): _____		
Zoning <u>PSC</u> Map Coordinates _____ Lot size _____			Phone _____ Fax _____		
Existing Use <u>GRASS</u>			Contractor Company _____		
Proposed Use <u>FRONT PORCH</u>			Contact Person _____		
Estimated Construction Cost \$ <u>2000.00</u>			Address _____		
Description of Work <u>FRONT PORCH made w/</u> <u>concrete floor and covered.</u>			City _____ State _____ Zip Code _____		
Occupant or Tenant <u>Occupant</u>			Engineer or Architect Company _____		
Contact Name <u>Kenneth Ecker</u>			Contact Person _____		
Address <u>9120 Riverhill Rd</u>			Address _____		
City <u>Laurel</u> State <u>MD</u> Zip Code <u>20723</u>			City _____ State _____ Zip Code _____		
Phone <u>301-362-3301</u> Fax _____			Phone _____ Fax _____		

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: ☐ Reinforced Concrete ☐ Structural Steel ☐ Masonry ☐ Wood Frame ☐ State Certified Modular	Utilities Water Supply: _____ ☐ Public ☐ Private Sewage Disposal: _____ ☐ Public ☐ Private Electric Yes ☐ No ☐ Gas Yes ☐ No ☐ Heating System: Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐ Sprinkler system: N/A ☐ ☐ Full ☐ Partial ☐ Other Suppression ☐ # of Heads	Building Characteristics SF Dwelling ☐ SF Townhouse ☐ <u>Depth</u> <u>Width</u> 1st floor: _____ 2nd floor: _____ Basement: _____ Finished Basement ☐ Unfinished Basement ☐ Crawl space ☐ Slab on Grade ☐ No. of Bedrooms: _____ 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 ☐ Manufactured Home	Utilities Water Supply: _____ ☐ Public ☐ Private Sewage Disposal: _____ ☐ Public ☐ Private Electric Yes ☐ No ☐ Gas Yes ☐ No ☐ Heating System: Electric ☐ Oil ☐ Natural Gas ☐ Propane Gas ☐ Sprinkler system: N/A ☐ ☐ 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 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.

<u>Kenneth Ecker</u> Applicant's Signature	<u>Kenneth Ecker</u> Print Name
_____	<u>10/13/05</u> Date
_____	_____

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

AGENCY	DATE	SIGNATURE APPROVAL	DPZ 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.: _____	Add'l per. fee \$ _____
Health	<u>10/13/05</u>	<u>[Signature]</u>	All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES ☐ NO ☐	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$ _____
YES ☐ NO ☐			YES ☐ NO ☐	Check # _____
CONTINGENCY CONSTRUCTION START: ☐			Historic District?	Validation # _____
ONE STOP SHOP: ☐			YES ☐ NO ☐	
Distribution of Copies: _____			Lot Coverage for NewTown Zone _____	
White: Building Official			SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ			Yellow: DED, DPZ	Pink: Health
T:Name/PERMIT.FRM				Gold: SHA

Thomas N. & Deborah
Kuckuda
L. 705 at F. 302
Parcel 361

Property of
Kenneth E. & Lisa M
Ecker
L. 4604 at F. 682
Parcel 492

Property of
Kenneth E. & Lisa M. Ecker
L. 5325 at F 602
Parcel 360

Ralph A. & Priscilla
Verdeschi
L 4326 at F. 55
Parcel 362

APPROVED
WALK-THRU BUILDING PERMIT
APP. # 100156033 A# 67
APP. SAN KJR DATE 6/1/84
DESC. OF WORK: Shed

Total Area
59 p or 4.2093 ac

30' use-in-common
as per L. 282 at
F 404

20' utility easement
as shown on Howard
County Capital Project
Nos W-8182 & S-6170

APPROVED
THRU BUILDING PERMIT

_____ ROAD
DATE: 10/13/05 Robert Lee Bolton
SS _____ L1271 at F. 186
Parcel 1



Note: This survey has been prepared without the benefit of a title report and is subject to any fact that may be disclosed by a full and accurate title search.

Drawn By, SACB
Checked By, SCB
Date: 12-28-01
Scale: 1" = 60'
Job No. 01-22
Case No. -



SURVEYS, INC.

Land Development ∞ Surveying ∞ Planning
Engineering ∞ Permit
350 MAIN STREET
LAUREL, MARYLAND 20707