

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COUNTY HOUSE DRIVE ELIJAH CITY, MD 21043 PERMITS (410) 313-2466 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3880	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER <u>B00148690</u> <u>XN</u>
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Building Address <u>3900 Sharp Road</u> <u>Glenwood, MD 20738</u>	Property Owner's Name <u>Robert & Deborah Nichols</u>
Suite/Apt. #: _____ SDP/WP/Petition #: _____	Address <u>3900 Sharp Road</u>
Census Tract <u>604002</u> Subdivision _____	City <u>Glenwood</u> State <u>MD</u> Zip Code <u>20738</u>
Section _____ Area _____ Lot _____	Home Phone <u>410-489-5357</u> Work Phone _____
Tax Map <u>21</u> Parcel <u>81</u> Grid <u>17</u>	Applicant's Name & Mailing Address, (if other than stated hereon): _____
Zoning <u>RROFD</u> Map Coordinates <u>9010</u> Lot size _____	Phone _____ Fax _____
Existing Use <u>Single Family Residence</u>	Contractor Company <u>Potomac Valley Contractors Inc.</u>
Proposed Use <u>Same</u>	Contact Person <u>Ray Rosenbloom</u>
Estimated Construction Cost \$ <u>80,000</u>	Address <u>P.O. Box 412</u>
Description of Work <u>Remove Garage Rmt</u> <u>Add Bedroom & Bathroom above</u> <u>Garage</u>	City <u>Fulton</u> State <u>MD</u> Zip Code <u>20759</u>
Occupant or Tenant _____	License No. <u>MHIC 67151</u>
Contact Name _____	Phone <u>301-776-1635</u> Fax <u>301-776-8929</u>
Address _____	Engineer or Architect Company _____
City _____ State _____ Zip Code _____	Contact Person _____
Phone _____ Fax _____	Address _____
	City _____ State _____ Zip Code _____
	Phone _____ Fax _____

BUILDING DESCRIPTION - <u>COMMERCIAL</u>		BUILDING DESCRIPTION - <u>RESIDENTIAL</u>	
Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: _____	SF Dwelling ☒ SF Townhouse ☐	Water Supply: _____
No. of stories: _____	Public _____	Depth _____ Width _____	Public _____
Gross area, sq. ft. per floor: _____	Private _____	1st floor: _____	Private ☒
Use group: _____	Sewage Disposal: _____	2nd floor: _____	Sewage Disposal: _____
Construction type: _____	Public _____	Basement: _____	Public ☒
Reinforced Concrete _____	Private _____	Finished Basement ☐ Unfinished Basement ☐	Private ☒
Structural Steel _____	Electric Yes ☐ No ☐	Crawl space ☐ Slab on Grade ☐	Electric Yes ☒ No ☐
Masonry _____	Gas Yes ☐ No ☐	No. of Bedrooms _____	Gas Yes ☐ No ☒
Wood Frame _____	Heating System: _____	Multi-family dwellings: _____	Heating System: _____
State Certified Modular _____	Electric ☐ Oil ☐	No. of efficiency units: _____	Electric ☐ Oil ☒
	Natural Gas ☐	No. of 1 BR units: _____	Natural Gas ☐
	Propane Gas ☐	No. of 2 BR units: _____	Propane Gas ☐
	Sprinkler system: N/A ☐	No. of 3 BR units: _____	Sprinkler system: N/A ☒
	Full _____	Other Structure: _____	NFPA #13D _____
	Partial _____	Dimensions: _____	NFPA #13R _____
	Other Suppression _____	Footings: _____	Other: _____
	# of Heads _____	Roof: _____	
		State Certified Modular _____	
		Manufactured Home _____	

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 THE PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

<u>Ray Rosenbloom</u> Applicant's Signature	<u>Ray Rosenbloom</u> Print Name
<u>President/Potomac Valley Contractors Inc.</u> Title/Company	<u>June 4, 2004</u> Date

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

AGENCY	DATE	SIGNATURE APPROVAL	DFZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	62330
State Highway			Rear: _____	Filing fee \$ <u>25</u>
Building Official			Side: _____	Permit fee \$ _____
Dev. Engineering, DPZ			Side St: _____	Excise tax \$ _____
Health	<u>6/10/04</u>	<u>Kacie A. Naranjo</u>	All minimum setbacks met? YES ☐ NO ☐	Add'l per. fee \$ _____
Fire Protection			Is Entrance Permit required? YES ☐ NO ☐	TOTAL FEES \$ _____
Is Sediment Control approval required prior to issuance? YES ☐ NO ☐			Historic District? YES ☐ NO ☐	Sub-total paid \$ _____
CONTINGENCY CONSTRUCTION START: ☐			Lot Coverage for New Town Zone _____	Balance due \$ _____
ONE STOP SHOP: ☐			SDP/Red-line approval date _____	Check # <u>3204</u>
				Validation # <u>20110</u>
				Accepted by <u>ex</u>

New 2nd Floor
Cantilevered over
Rear of Existing
Garage by 2'0"

BOOK 148690
ADD BEDROOM ON TOP
OF GARAGE

D
BY
RP
6/10/04

