

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

Building Address 14197 Day Farm Dr
Glenely MD
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision _____
Section _____ Area _____ Lot _____
Tax Map _____ Parcel _____ Grid _____
Zoning _____ Map Coordinates _____ Lot Size _____
Existing Use SFD
Proposed Use SFD
Estimated Construction Cost \$ 5000
Description of Work Deck 12x17 w/Steps

Occupant or Tenant _____
Contact Name John Manzari
Address 2460 Johnson Mill Rd
City Forest Hill State MD Zip Code 21050
Phone 443-752-3455 Fax _____

Property Owner's Name Melissa Preston
Address same
City Glenely State MD Zip Code _____
Home Phone _____ Work Phone _____
Applicant's Name & Mailing Address, (if other than stated herein): _____

Phone 443-345-4626 Fax _____
Contractor Company welcome Home Decks
Contact Person John Manzari
Address 2460 Johnson Mill Rd
City FH State MD Zip Code 21050
License No. 82887
Phone 443-752-3455 Fax _____

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

BUILDING DESCRIPTION - COMMERCIAL

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

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____
Depth _____ Width _____	Public _____
1 st floor: _____	Private _____
2 nd floor: _____	Sewage Disposal: _____
Basement: _____	Public _____
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Private _____
No. of Bedrooms _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Multi-family dwellings: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
No. of efficiency units: _____	Heating System: _____
No. of 1 BR units: _____	Electric <input type="checkbox"/> Oil <input type="checkbox"/>
No. of 2 BR units: _____	Natural Gas <input type="checkbox"/>
No. of 3 BR units: _____	Propane Gas <input type="checkbox"/>
Other Structure: _____	Sprinkler system: N/A <input type="checkbox"/>
Dimensions: _____	NFPA #13D _____
Footings: _____	NFPA #13R _____
Roof: _____	Other: _____
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 THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature John Manzari
Print Name John Manzari
Email Address john@welcomehomedecks.com
Owner _____
Title/Company _____

Date 1-13-10
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 Officials		
Dev. Engineering, DPZ		
Health	<u>1-13-10</u>	<u>Heidi Stott</u>
Fire Protection		
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION	PROPERTY ID #
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per fee \$ _____
All minimum setbacks met?	TOTAL FEES \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit Required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>3551</u>
Historic District?	Validation # _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	
Lot Coverage for New Town Zone _____	Accepted by _____
SDP/Red-line approval date _____	

APPROVED

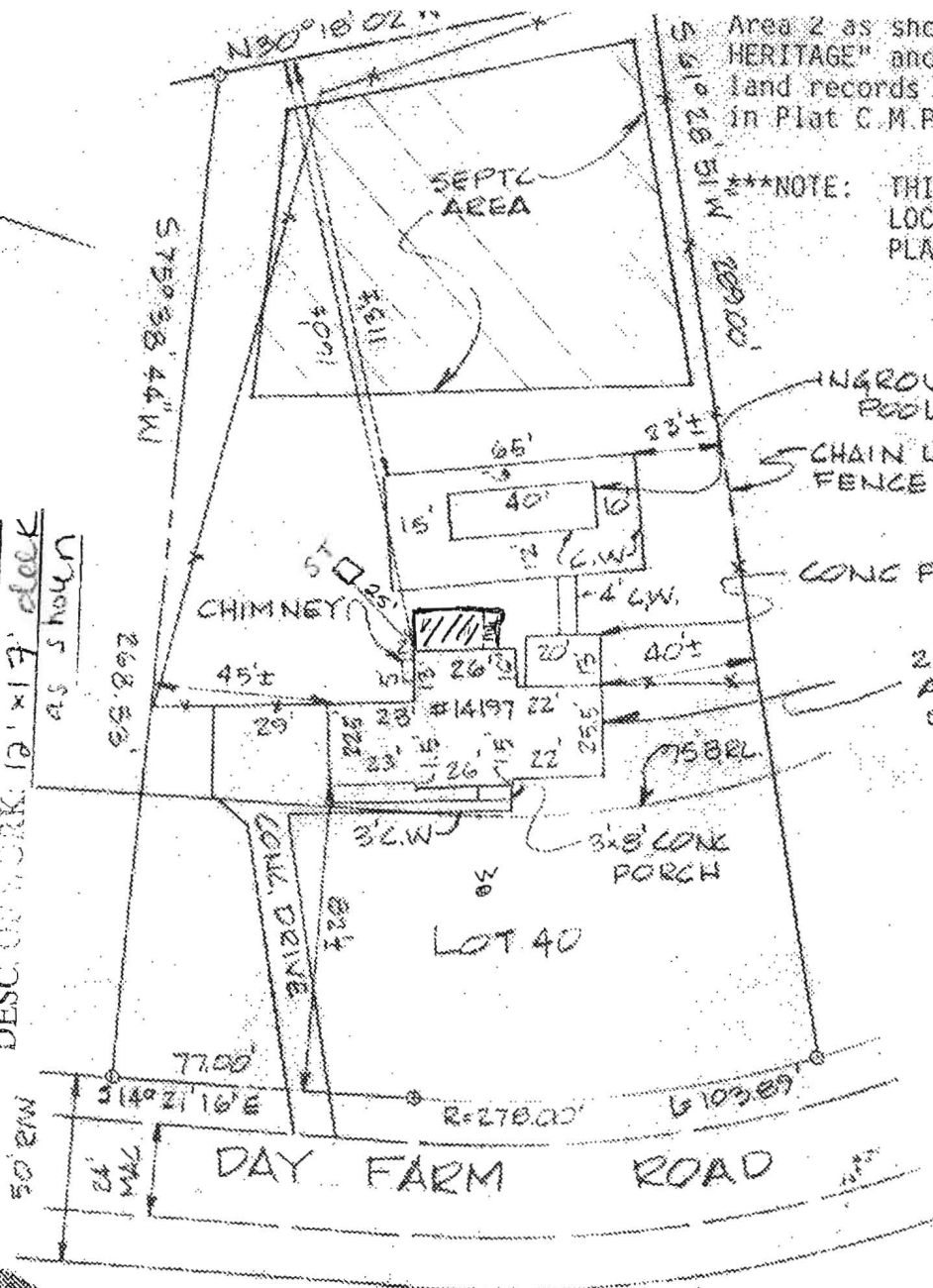
WALK-THRU BUILDING PERMIT

BP# A# P 32977

APP. SAN HS DATE: 1-13-10

DESC. OF WORK: 12' x 17' deck

as shown



Area 2 as shown on Plat of "THE HERITAGE" and recorded among the land records of Howard County in Plat C.M.P. # 3778.

***NOTE: THIS HOUSE IS NOT LOCATED IN THE FLOOD PLAIN.



Bourabie Mearns

This is to certify that the improvements indicated hereon are located as shown. This is not a property line survey and should not be used as such.

THIS PLAT IS NOT INTENDED FOR THE USE IN THE ESTABLISHMENT OF PROPERTY LINE

DON LYNCH ASSOC., INC.
4907 HARFORD ROAD
BALTIMORE, MD. 21214

Scale: 1" = 50'

Date: 1/12/92