

DEPT. OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		<b>HOWARD COUNTY</b> <b>PERMIT APPLICATION</b>		<b>PERMIT NUMBER</b> B08000153	
Building Address <u>2813 Rustic Manor Ct</u> <u>Glenwood MD</u>			Property Owner's Name <u>Ann KuczarSKI</u> Address <u>Same</u> City <u>Glenwood</u> State <u>MD</u> Zip Code _____ Phone _____ Phone _____ Applicant's Name & Mailing Address, (if other than stated herein): <u>John Manzari</u> <u>2460 Johnson Mill Rd</u> <u>Forest Hill, MD 21050</u> Phone _____ Fax _____ <u>301-252-2882</u>		
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision _____ Section _____ Area _____ Lot _____ Tax Map _____ Parcel _____ Grid _____ Zoning _____ Map Coordinates _____ Lot Size _____			Contractor Company <u>Welcome Home Improvements</u> Contact Person <u>John Manzari</u> Address <u>2460 Johnson Mill Rd.</u> City <u>Forest Hill</u> State <u>MD</u> Zip Code <u>21050</u> License No. <u>82887</u> Phone _____ Fax _____ <u>443-752-3455</u> <u>410-399-2557</u>		
Existing Use <u>SFD</u> Proposed Use <u>SFD</u> Estimated Construction Cost \$ <u>10,000</u> Description of Work <u>Deck Rebuild</u>			Engineer or Architect Company <u>N/A.</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____		
Occupant or Tenant _____ Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____ <u>443-752-3455</u>			City _____ State _____ Zip Code _____ Phone _____ Fax _____		

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

  
 Applicant's Signature  
Owner  
 Title/Company

John Manzari  
 Print Name  
1-23-08  
 Date

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

AGENCY: _____ Building Department DPZ _____ State Highway _____ Building Official _____ Dev. En. Inspection DPZ _____ Health _____ Fire Protection _____ Is Sediment Control approved prior to issuance? _____ YES <input type="checkbox"/> NO <input type="checkbox"/>	DATE: _____ SIGNATURE APPROVAL: _____ DPZ SETBACK INFORMATION: Front _____ Rear _____ Side _____ Side Set _____ All minimum setbacks met? _____ YES <input type="checkbox"/> NO <input type="checkbox"/> Is Erosion Permit required? _____ YES <input type="checkbox"/> NO <input type="checkbox"/> Historic District? _____ YES <input type="checkbox"/> NO <input type="checkbox"/> Let. Coverage for New Town Zone _____ SDP/Re-use approval only _____	PROPERTY ID: _____ Plan No. _____ Permit Fee _____ Examination Fee _____ Add'l fee per sq. ft. _____ TOTAL FEES: _____ Submittal paid _____ Balance due \$ _____ Check _____ Validation _____ Accepted by: _____
CONTINGENCY CONSTRUCTION START: _____ ONE STOP SHOP: _____ Distribution of Copies: White: Building Officials Green: I.D.D. DPZ Yellow: D.D. DPZ Pink: Health Gold: SHA 11 forms/building permit application		

REV 10/25/04

# APPROVED

WALK-THRU BUILDING PERMIT

BP# 08808000153 A# 48636

APP. SAN SS

DATE: 1/23/08

DESC. OF WORK: 14' X 36' deck

NOTE: THIS LOCATION DRAWING IS OF BENEFIT TO A CONSULTANT ONLY AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH A CONVEYANCED INTEREST AND FINANCING, AND IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OF LOCATION OR FENCE SHEDS, GARAGES, BUILDINGS, LANDSCAPING, OR OTHER EXISTING OR FUTURE IMPROVEMENTS, AND DOES NOT PROVIDE FOR THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES. UTILITY IDENTIFICATION MAY NOT BE REQUIRED FOR THE RAISE OF TITLE OR SECURING FINANCING. THIS LOCATION DRAWING WAS PREPARED WITHOUT THE BENEFIT OF A CURRENT TITLE REPORT. THIS PROPERTY IS SUBJECT TO WAY AND ALL EASEMENTS, RIGHTS OF WAY, EASEMENTS, AND RESTRICTIONS, ETC., OF RECORD, SOME OF ALL OF WHICH MAY OR MAY NOT BE SHOWN AND/OR REFERENCED HEREON. BEARINGS AND DISTANCES OF THE PROPERTY BOUNDARY LINES SHOWN HEREON ARE PER AVAILABLE RECORDS AND HAVE NOT BEEN FIELD VERIFIED.

