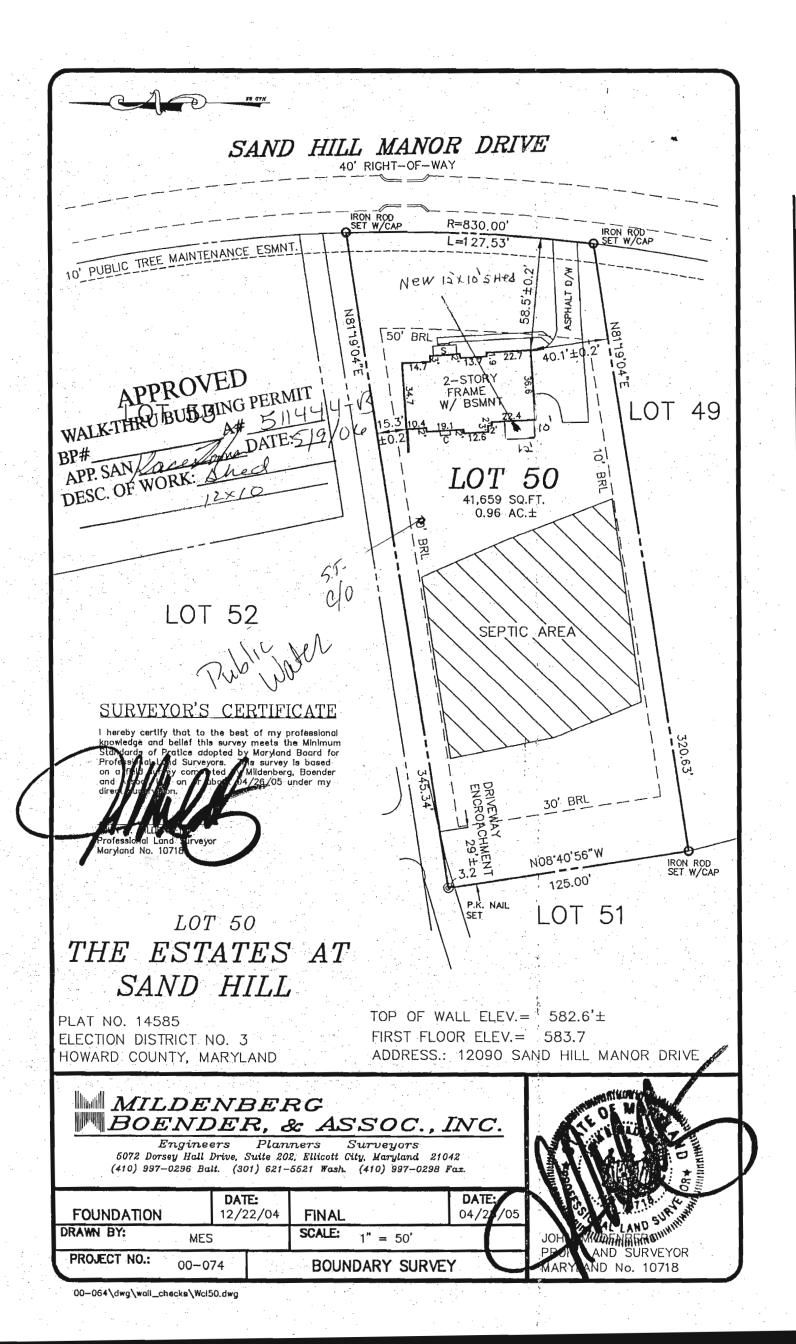
DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MO 21043
PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER B 00169534

Building Address 12090 Sandhill Manor Drive		Property Owner's NameMr. & Mr	Property Owner's NameMr. & Mrs. Erik Endler	
Marriottsville, MD 21104		Address		
Suite/Apt. #: SDP/WP/P	etition #:	12090 Sandhill Manor	<u>Drive</u>	
Census Tract 603000 Subdivisio	Æstates at SandHi	Ill _{City} Marriottsville Sta	teMD Zip Code 21104	
Section Area Lot 50 Tax Map 16 Parcel 3 Grid Zoning Map Coordinates Lot size		Home Phone 410-203-9298 Work Phone Applicant's Name & Mailing Address, (if other than stated hereon): Martin J. Niessner Const. Inc. 4839 Rollingtop Road, E.C. MD 21043 Phone 410-465-0435 Fax 410-461-8390		
Existing Use sfd		-	Contractor CompanyMartin J. Niessner Const. In	
Proposed Use sfd	200.00	Contact Person		
Estimated Construction Cost \$5	-	Martin J. Niessner, Sr.		
Description of Work Build 12' x 10' shed under deck.		Address 4839 Rollingtop Road		
		City Ellicott City State MD Zip Code 21043 License No. 9080 Phone 410-465-0435 Fax 410-461-8390		
Occupant or Tenant		Engineer or Architect Companyn/a		
Contact Name		Contact Person		
Address				
City State Zip Code		Address		
Phone Fax		City State	Zip Code	
T AX		Phone Fax	(
BUILDING DESCRIPTION	N - COMMERCIAL	BUILDING DESCRIPTION - RESIDENTIAL		
Building Characteristics	<u>Utilities</u>	Building Characteristics	Utilities	
Heismo	Water Supply:	SF Dwelling 🐧 SF Townhouse		
no. of stories:	Private	1st floor: $\frac{\text{Depth}}{10^{}}$ $\frac{\text{Width}}{12^{}}$	Public Private Sewage Disposal:	
	Sewage Disposal: Public	2nd floor:	Sewage Disposal: Public	
Gross area, sq. ft. per floor:	Private	Basement: Finished Basement Unfinished Basement	X Private	
Use group:	Electric Yes No Gas Yes No D	Crawl space Slab on Grade X No. of Bedrooms Height:	Electric Yes □X No □ Gas Yes M2 No □	
	Heating System:	Multi-family dwellings: No. of efficiency units:	Heating System:	
Construction type: Reinforced Concrete	Electric 🗆 Oil 🗆	No. of 1 BR units: No. of 2 BR units:	Electric 🗍 Oil 🗆 Natural Gas 🗆	
Structural Steel	Natural Gas ☐ Propane Gas ☐	No. of 3 BR units:	Propane Gas □	
Masonry Wood Frame		Other Structure:	Sprinkler system: N/A □	
vvou i rame	Sprinkler system: N/A 🗆	Dimensions: 8"x20" trench 30"	NFPA #13D	
State Certified Modular	Partial Other Suppression	Roof Height: 81 below gr	Other:	
	# of Heads	State Certified Modular Manufactured Home	·	
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE THEREBY TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF	(1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS AP ISHE WILL PERFORM NO WORK ON THE ABOVE REF	PLICATION; (2)THAT THE INFORMATION IS CORRECT; (3) THAT HE/S ERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLI	SHE WILL COMPLY WITH ALL REGULATIONS OF CATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS	
THE PURPOSE OF THIS PROPERTY FOR THE PURPOSE OF	INSPECTING THE WORK PERMITTED AND POSTING	Martin J. Niessner, Sr		
Applicant's Signature		Print Name		
President		5-9-06		
Title/Company	** PLEASE WRITE N	Date PF FINANCE OF HOWARD COUNTY EATLY AND LEGIBLY. **		
	SIGNATURE APPROVAL	CE USE ONLY - DPZ SETBACK INFORMATION	PROPERTY ID#:	
Land Development, DPZ State Highwayn		Front:	iling fee \$	
State nurweyn Building Official			ermit fee \$	
ON A CONTRACT OF THE PROPERTY		就是一个人的。 第一个人的人的是一个人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的	xcise tax \$dd'i per, fee \$	
Health 59/00	teeth 59/04 Kacu Joman		OTAL FEES \$	
Fire Protection is Sediment Control approval required prior to it			ub-total paid \$	
YES D NO D			alance due \$	
			alidation #	
		YES O NO O		
ONE STOP SHOP:		Lot Coverage for NewTown Zone	14.000000000000000000000000000000000000	
Distribution of Copies- White: Building O	fficial Green: LDD, DPZ	SDP/Red-line approval date Yellow: DED, DPZ Pinic Health	Gold: SHA	
T://orme\PERMIT.FRM		rak neeth	Gold: SHA Rev. 11/4//04	



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HOWARD COUNTY

PERMIT NUMBER

	PERMIT AF	PLICATION BOO	159202
Building Address 12090 Sandhil	1 Manor Drive	Property Owner's Name Mr. & I	·
Marriottsville, MD 21104		Address	
Suite/Apt. #: SDP/WP/Petition #:		12090 Sandhill Manor Drive	
Census Tract 6030 Subdivision The Estates at Sand Hill Section Area Lot 50 Tax Map 16 Parcel Grid		City Marriottsville State MD Zip Code 21104	
Section Area	Lot	Home Phone 410–203–9298 Work Phone Applicant's Name & Mailing Address, (if other than stated hereon):	
Tax Map Parcel Grid Zoning Map Coordinates Lot size		Martin J. Niessner Cons. Inc.	
Zoning Map Coordinates	Lot size	4839 Rollingtop Rd. E.C. 21043 410-465-0435 Fax 410-461-8390	
Existing Use SFD Proposed Use SFD		Contractor CompanyMartin J. Niessner Const. Inc.	
Estimated Construction Cost \$ 26,350.00		Contact Person Martin J. Niessner, Sr.	
Description of Work <u>Build deck on</u> 19' x 16' screened-in porch	with shed roof and	Address § 4839 Rollingtop Road	1
12' x 40'6" open area with bumpout. Deck to have 4' x 10' walkway and landing with steps		City Ellicott City State MD Zip Code 21043	
to grade.		License No. 9080 Phone 410-465-0435 Fax 410-461-8390	
Occupant or Tenant Owner		Engineer or Architect Company n/a	
Contact Name		Contact Person	
Address City Zip Code		Address	
, 0.00		City State Zip Code	
Phone Fax		Phone Fax	
BUILDING DESCRIPTION	- COMMERCIAL	BUILDING DESCI	RIPTION - <u>RESIDENTIAL</u>
Building Characteristics	Utilities	Building Characteristics	Utilities
Height:	Water Supply: Public	SF Dwelling X SF Townhouse Depth Width	Water Supply: _X_Public
No. of stories:	Private Sewage Disposal:	1st floor:	Private Sewage Disposal:
Groce groe on the new floor	Public	2nd floor: Basement:	Public X Private
Gross area, sq. ft. per floor:	Private	Finished Basement Unfinished Basemer Crawl space Slab on Grade	
Use group:	Electric Yes No Gas Yes No	No. of Bedrooms Height: Multi-family dwellings:	Gas Yes□ No□
Capetruction type	Heating System:	No. of efficiency units: No. of 1 BR units:	Electric Li Oii Li
Construction type: Reinforced Concrete	Electric □ Oil □ Natural Gas □	No. of 2 BR units: No. of 3 BR units:	Natural Gas LI
Structural Steel Masonry	Propane Gas		
Wood Frame	Sprinkler system: N/A Full	Other Structure: Dimensions: Footings: Pier	- Sprinkler system: N/A □ - NFPA #13D NFPA #13R
		Roof Height:	11AA/311LWAN
State Certified Modular	Partial Other Suppression	}	Other:
	Other Suppression # of Heads	State Certified ModularManufactured Home	
THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/	Other Suppression # of Heads (1) That He/she is authorized to make this api she will perform no work on the above refi	State Certified Modular Manufactured Home PLICATION; (2)THAT THE INFORMATION IS CORRECT; (3) THAT IS EREMCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS AF	4E/SHE WILL COMPLY WITH ALL REGULATIONS OF
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The undersigned hereby certifies and agrees as follows: Howard County which are applicable thereto; (4) that he/ the right to enter onto this property for the purpose of Applicant's Signature President Title/Company AGENCY DATE Land Development, DPZ	Other Suppression # of Heads (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS API SHE WILL PERFORM NO WORK ON THE ABOVE REFI INSPECTING THE WORK PERMITTED AND POSTING Checks payable to: DIRECTOR O ** PLEASE WRITE NI - FOR OFFI SIGNATURE APPROVAL	State Certified Modular Manufactured Home PLICATION, (2)THAT THE INFORMATION IS CORRECT; (3) THAT HE REPUCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS AR NOTICES. Martin J. Niessn Print Name 4-26-06 Date F FINANCE OF HOWARD COUNTY EATLY AND LEGIBLY. "" CE USE ONLY- DPZ SETBACK INFORMATION Front:	He/she will comply with all regulations of prication; (5) that he/she grants county officer, Sr. PROPERTY ID#: Filing fee \$
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Rev. 11/4//04

