

DEPARTMENT 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	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER 120011 9457
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Building Address <u>12325 Rte 20 Scaggville Road</u> <u>FULTON RD 20759</u> Suite/Apt. #: <u>05102</u> SDP/WP/Petition #: _____ Census Tract _____ Subdivision _____ Section _____ Area _____ Lot _____ Tax Map _____ Parcel _____ Grid _____ Zoning _____ Map Coordinates <u>15E2</u> Lot size _____	Property Owner's Name <u>FAIRWIND HOMES</u> Address <u>12325 Rte 20</u> City <u>FULTON</u> State <u>MD</u> Zip Code <u>20759</u> Home Phone <u>301-881-7321</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____
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Existing Use <u>SFH w/ PORCH DECK & PATIO</u> Proposed Use <u>SFH w/ SUNROOM & PATIO</u> Estimated Construction Cost \$ <u>30,000</u> Description of Work <u>REMOVE EXISTING DECK & PATIO</u> <u>& INSTALL A 34'X10' SUNROOM w/ PATIO</u> <u>BELOW & STEPS OFF IT SUNROOM</u>	Contractor Company <u>ROMAN EXTERIORS INC.</u> Contact Person <u>MARK T. ROMAN</u> Address <u>5936 TROTTER ROAD</u> City <u>CLARKVILLE</u> State <u>MD</u> Zip Code <u>21029</u> License No. <u>96473</u> Phone <u>301-881-7381</u> Fax _____
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Occupant or Tenant <u>OWNER</u> Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____
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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: _____ 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: _____ ☐ 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 THEREON; (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>Mark T. Roman</u> Applicant's Signature <u>Mark T. Roman</u> Title/Company	<u>Mark T. Roman</u> Print Name <u>7/14/99</u> Date
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Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

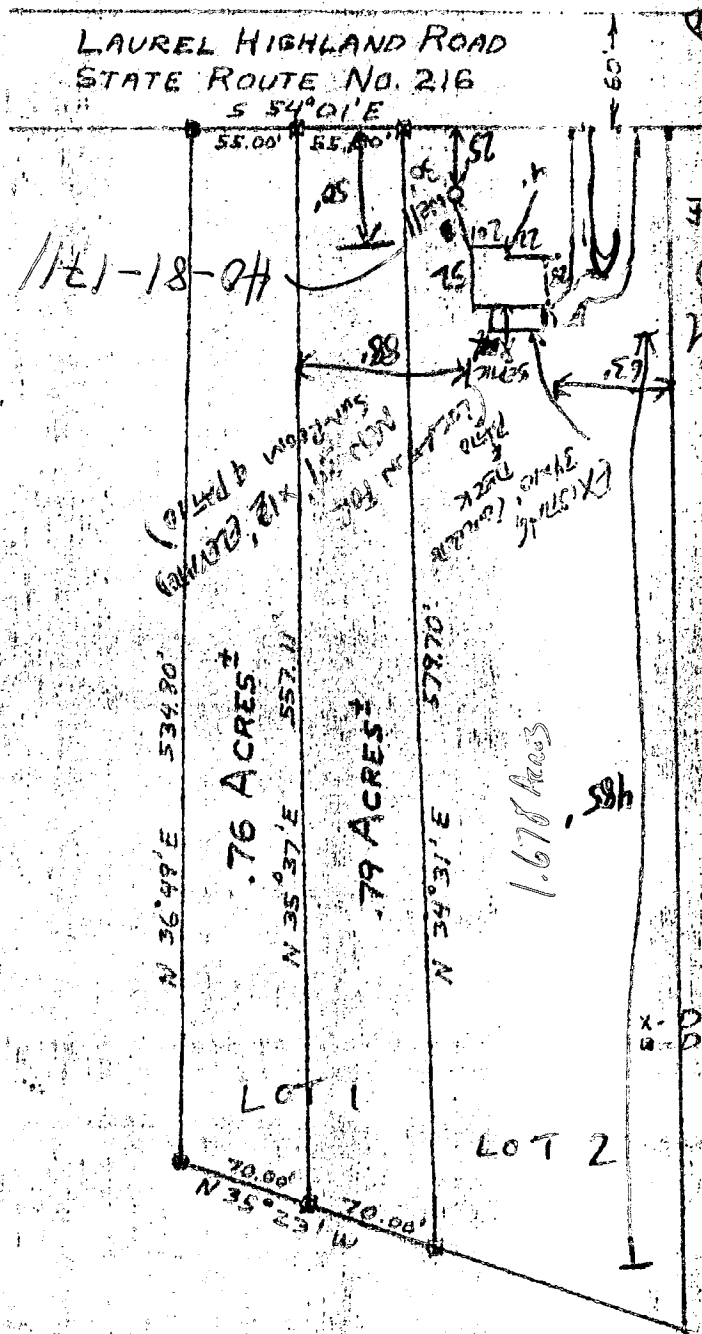
** PLEASE WRITE NEATLY AND LEGIBLY. **

FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: _____	4-2967
State Highways			Rear: _____	Filing fee \$ <u>21</u>
Building Official			Side: _____	Permit fee \$ <u>67</u>
Dev. Engineering DPZ			Side St: _____	Excise tax \$ <u>326</u>
Health	<u>7/22/99</u>	<u>Mark T. Roman</u>	All minimum setbacks met? YES ☐ NO ☐	Sub-total paid \$ _____
Fire Protection			Is Entrance Permit required? YES ☐ NO ☐	Add'l permit fee \$ _____
Is Sediment Control approval required prior to issuance? YES ☐ NO ☐			Historic District? YES ☐ NO ☐	TOTAL FEES \$ <u>413</u>
CONTINGENCY CONSTRUCTION START: ☐			Lot Coverage for New Town Zone _____	Balance due \$ _____
ONE STOP SHOP: ☐			SDP/Red-line approval date _____	Check # <u>24025</u>
			Accepted by <u>[Signature]</u>	Validation # <u>13370</u>

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA

Rev. 10/13/94



PLAT OF SURVEY
OF
DIVISION OF LOT NO. 142
MORRIS A. BROWN SUBDIVISION
FIFTH ELECTION DISTRICT OF HOWARD COUNTY
HIGHLAND, MARYLAND
SCALE: 1" = 100'

Claude M. Skinner Jr.
Claude M. Skinner Jr., Reg. Professional Engineer & Land

DECK/SUNROOM
7/22/99
(MR)

PROPOSAL
ACCEPTED AS
PRESENTED
OWNER
ADVISED
OF TANK
SEPARATION
STANDARDS &
BACKGROUND
IS REPLACE-
MENT OF EX.
DECK, W/ WONE
FOOT, WITH EXPANSION

PROPOSED
16' FROM
S.T. TO
EX. HOUSE
WALL
(24' TO
PROPOSED