

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

806001314

Building Address 15012 Scottwood Ct
Woodbine Md 21797

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract 1040.02 Subdivision Country Springs

Section _____ Area _____ Lot 11

Tax Map 14 Parcel 240 Grid 3

Zoning RC Map Coordinates _____ Lot size 3 AC

Existing Use 2FD

Proposed Use garage

Estimated Construction Cost \$ 25,000

Description of Work Construct 32' x 24'
3 car Detached Garage

Occupant or Tenant Dan & Kristen Whitman

Contact Name Dan

Address 15012 Scottwood Ct

City Woodbine State Md Zip Code 21797

Phone 410 489-3621 Fax _____

Property Owner's Name Dan + Kristen Whitman

Address 15012 Scottwood Ct

City Woodbine State MD Zip Code 21797

Home Phone 410 489 3621 Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon):

Steven Leaf
15084 Bushy Park Rd Woodbine MD
21797
Phone 410 489 6145 Fax 410 489 6015

Contractor Company Tradition Home Bldgs, Inc

Contact Person Steven Leaf

Address 15084 Bushy Park Rd

City Woodbine State MD Zip Code 21797

License No. 13209572 and 88568

Phone 410 489 6145 Fax 410 489 6015

Engineer or Architect Company _____

Contact Person N/A

Address Steven Leaf
410 489 6145

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

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 DESCRIPTION - RESIDENTIAL

Building Characteristics

SF Dwelling ☐ SF Townhouse ☐
Depth Width
1st floor: _____
2nd floor: _____
Basement: _____
Finished Basement ☐ Unfinished Basement ☐
Crawl space ☐ Slab on Grade ☐
No. of Bedrooms _____
Height: _____
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: _____
☐ 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 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

Tradition Home Bldgs, Inc

Title/Company

Print Name

Steven Leaf

Date

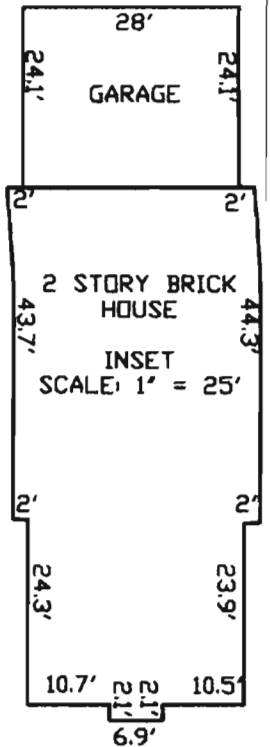
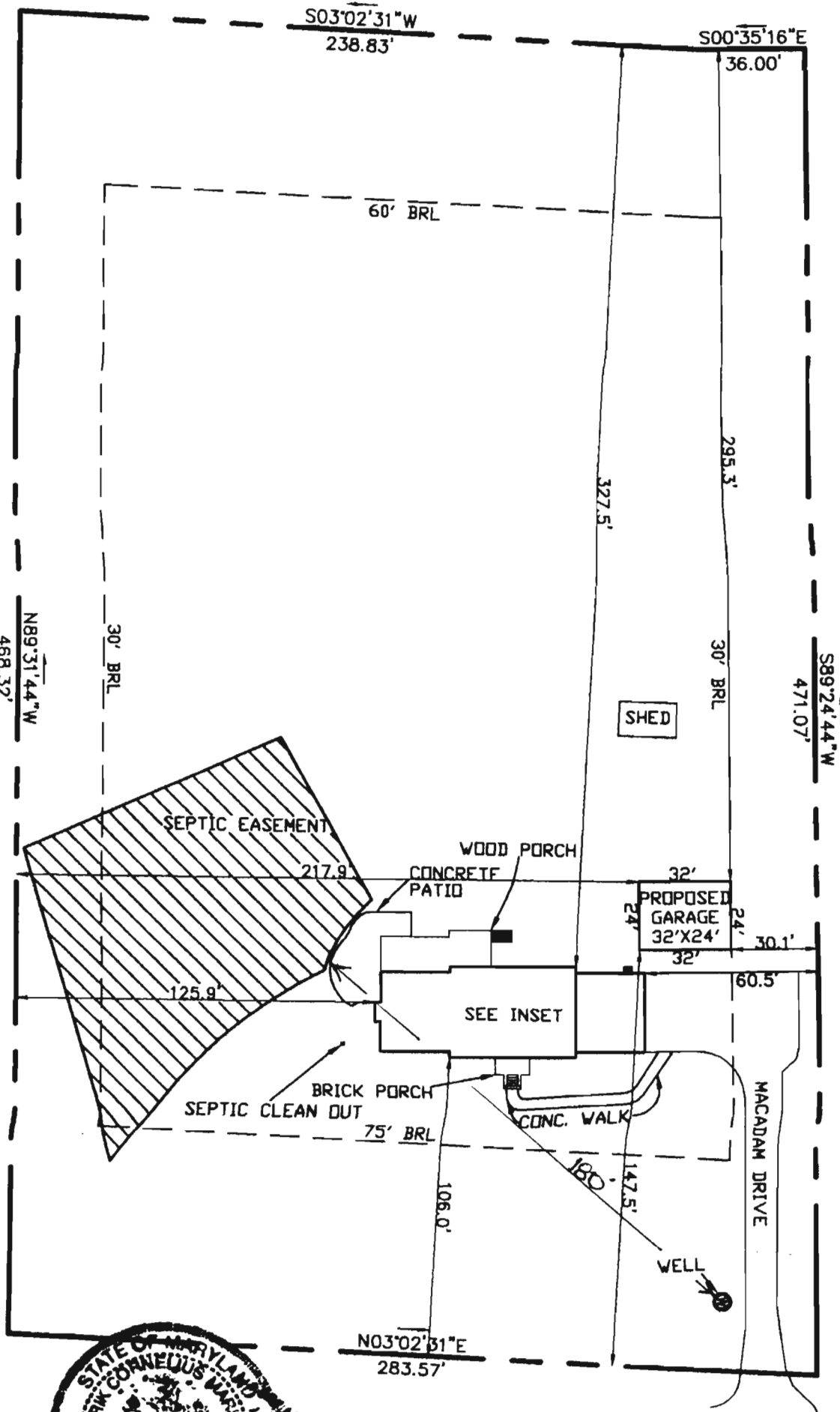
7/11/06

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: _____	Filing fee \$ <u>2.00</u>
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St: _____	Add'l per. fee \$ _____
Health	<u>7/20/06</u>	<u>Steffal</u>	All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES ☐ NO ☐	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$ _____
YES ☐ NO ☐			YES ☐ NO ☐	Check # <u>2541</u>
CONTINGENCY CONSTRUCTION START: ☐			Historic District?	Validation # _____
ONE STOP SHOP: ☐			YES ☐ NO ☐	
Distribution of Copies			Lot Coverage for NewTown Zone _____	
White: Building Official			SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ			Yellow: DED, DPZ	
T:\forms\PERMIT.FRM			Pink: Health	Gold: SHA

PLAT



*garage location ok
7/20/06
sf*

SCOTTS WOOD COURT



RECORD REFERENCES	LOCATION SURVEY	MARKS & ASSOCIATES L.L.C. SURVEYORS-LAND PLANNING CONSULTANTS
LIBER/FOLIO	15012 SCOTTSWOOD COURT	4531 COLLEGE AVENUE ELLICOTT CITY, MARYLAND TELEPHONE (410)747-8738 FAX (410)747-8547
PLAT BOOK/FOLIO	LOT 11	I HEREBY CERTIFY THAT THE IMPROVEMENTS ARE LOCATED AS SHOWN HEREON AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.
PLAT CMP. No. 9648	HOWARD COUNTY, MARYLAND	<i>Erik C. Marks</i> ERIK C. MARKS R.P.L.S. NO. 607
SCALE: 1"=50'		
DATE: JUNE 29, 2006		