DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
3430 COURT HOUSE DRIVE
ELLICOTT CITY, MD 21003
PERMITS (410) 313-2455 NSPECTIONS (410) 313-1810

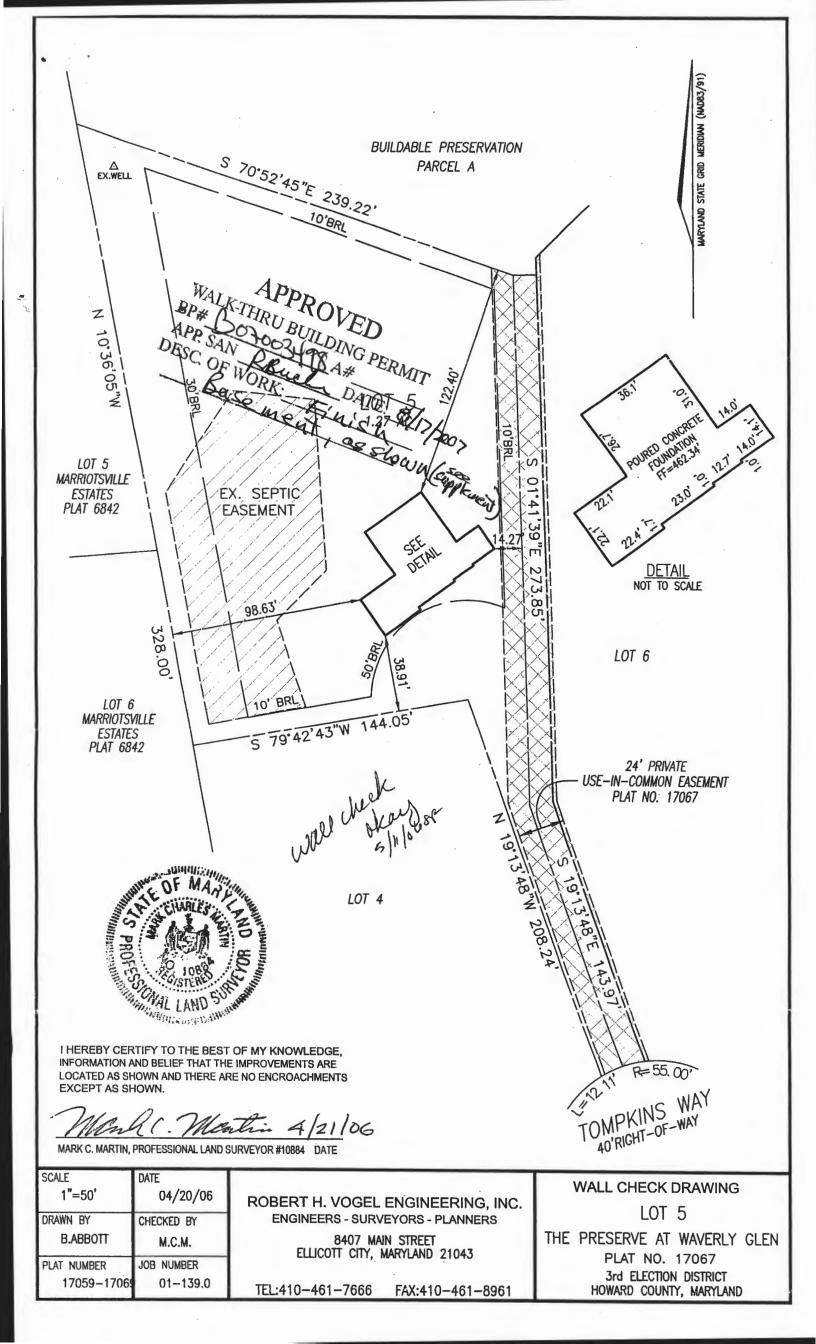
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## HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

Rev. 11/4//04

1.00/-	PERMIT AP	PLICATION B0700	51.0
Building Address 109 45 TO	MARKINSWAY	Property Owner's Name TRAITY (	DUALTY HOMES
WOODSTOCK, MD 21163		Address 3675 PARK AVE #361	
Suite/Apt. #: SDP/WP/Petition #: 06-03		JUS TAPIC AUG 201	
Suite/Apt. #: SDP/WP/Petition #: 06-03  Census Tract 603 000 Subdivision WAVERLY GUEN		City ELECTT CITY State MDZip Code 24043	
SectionAreaLot_5		Home Phone Work Phone 410-313-872 Applicant's Name & Mailing Address, (if other than stated hereon):	
Tax Map / Parcel	Grid 10-23	Applicant's Name & Mailing Address, (If other than stated hereon).  410-313-893/	
RC-DEO Map Coordinates 6813	Lot size	Phone 410 400 500 3	
Existing Use SFD		Contractor Company TRAITY QUALITY HOME	
Proposed Use SF Estimated Construction Cost \$ 12,0	<u> </u>	Contact Person SALLY HODGE	
Description of Work FILISA PSMT.			
W/FB		Address 3675 PARK RUE #301	
		City EUCOTT CTYState MD Zip Code 21043	
		Phone 10-213-8731  Engineer of Architect Company	
Occupant or Tenant N/A		Engineer or Architect Company 410-313-8731	
Contact Name		Contact Person	
Address		Address	
City State Zip Code		Address	
		City State Zip Code	
Phone Fax		Phone Fax	
BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	<u>Utilities</u>	Building Characteristics	<u>Utilities</u>
Height:	Water Supply: Public	SF Dwelling SF Townhouse Depth Width	Water Supply: Public
No. of stories:	Private Sewage Disposal:	1st floor:	Private Sewage Disposal:
Gross area, sq. ft. per floor:	Public Private	Basement:	Public Private
oroso aroa, eq. ta por nosi:	Electric Yes  No	Finished Basement Unfinished Basement Crawl space  Stab on Grade	Electric Yes No
Use group:	Gas Yes□ No□	No. of Bedrooms Height: Multi-family dwellings:	Gas Yes No □
Construction type:	Heating System:	No. of efficiency units:	Heating System:
	Natural Gas □	No. of 2 BR units: No. of 3 BR units:	Natural Gas Propane Gas
Reinforced Concrete			
Structural Steel Masonry	Propane Gas □	Other Structure:	Sprinkler system: N/A
Structural Steel	Propane Gas   Sprinkler system: N/A   Full	Other Structure: Dimensions: Footings: Roof Height:	Sprinkler system: N/A NFPA #13D NFPA #13R
Structural Steel Masonry	Propane Gas   Sprinkler system: N/A   Full Partial Other Suppression	Dimensions: Footings:	Sprinkler system: N/A NFPA #13D
Structural Steel Masonry Wood Frame State Certified Modular	Propane Gas  Sprinkler system: N/A  Full Partial Other Suppression # of Heads	Dimensions: Footings: Roof Height:	Sprinkler system: N/A NFPA #13D NFPA #13R Other:
Structural Steel Masonry Wood Frame State Certified Modular The UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS:	Propane Gas   Sprinkler system: N/A  Full Partial Other Suppression # of Heads  That He/she is authorized to make this AP	Dimensions: Footings: Roof Height: State Certified Modular Manufactured Home PLICATION; (2)THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE BRENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICAT NOTICES.	Sprinkler system: N/A NFPA #13D NFPA #13R Other:  will comply with all regulations of ion; (5) that he/she grants county official
Structural Steel Masonry Wood Frame  State Certified Modular  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 Sally Lawry	Propane Gas   Sprinkler system: N/A  Full Partial Other Suppression # of Heads  (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APISHE WILL PERFORM NO WORK ON THE ABOVE REFINISPECTING THE WORK PERMITTED AND POSTING	Dimensions: Footings: Roof Height:  State Certified Modular Manufactured Home PLICATION, (2)THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE ERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICAT NOTICES.  SALLY HOT	Sprinkler system: N/A NFPA #13D NFPA #13R Other:
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LOTS: THE P. ENHIDI) A FINISHED BASEMENT PLAN SLIDER CCORIAN TOP 34' 0 0 0 RECREATION ROOM 図 Rotatial Bedroom #6 \*\* 4'4" (W.7) @ HVAC WIH. MI (P) 25,26 BATH 407 28 (B) LIPC, FIBER GLASS SHOWER (F) ge lof 2 26 EXERCISE ROOM. Home ) WE NOTE CARPENTER! WS THEATRE CASING. M WS M Supplement To building Permit Approved @17/2007 WS M

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WS