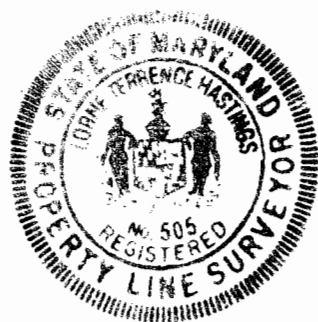


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|--|---|--|
| DEPT. OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800 | HOWARD COUNTY PERMIT APPLICATION | 308001648 PERMIT NUMBER |
| Building Address <u>4100 Sharp Rd</u> <u>Glenelg, MD 21737</u> | | Property Owner's Name <u>Steven Geibel</u> Address <u>4100 Sharp Rd</u> City <u>Glenelg</u> State <u>MD</u> Zip Code <u>21737</u> Phone <u>410-489-4138</u> Phone <u>443-676-3043</u> Applicant's Name & Mailing Address, (if other than stated herein): |
| Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision _____ Section _____ Area _____ Lot <u>55</u> Tax Map <u>21</u> Parcel <u>184</u> Grid <u>18</u> Zoning _____ Map Coordinates _____ Lot Size <u>1.01 acre</u> | | Phone _____ Fax _____ |
| Existing Use <u>residential</u> Proposed Use <u>residential</u> Estimated Construction Cost \$ <u>8000.00</u> Description of Work <u>replace + expand front porch</u> <u>42' x 8'</u> Occupant or Tenant <u>Steve + Chris Geibel</u> Contact Name <u>Steve + Chris Geibel</u> Address <u>4100 Sharp Rd</u> City <u>Glenelg</u> State <u>MD</u> Zip Code <u>21737</u> Phone <u>410-489-4138</u> Fax _____ | | Contractor Company <u>DONALD</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ License No. _____ Phone _____ Fax _____ Engineer or Architect Company _____ Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____ |
| BUILDING DESCRIPTION - COMMERCIAL | | BUILDING DESCRIPTION - RESIDENTIAL |
| Building Characteristics 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 | Utilities 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"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____ | Building Characteristics SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 st floor: <u>26'</u> x <u>44'</u> 2 nd floor: <u>26'</u> x <u>44'</u> Basement: <u>24'</u> x <u>44'</u> Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>4</u> 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 |
| 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. | | |
| <u>Chris Geibel</u> Applicant's Signature | | <u>Chris Geibel</u> Print Name |
| _____ Title/Company | | <u>May 29, 2008</u> Date |
| Checks payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY **PLEASE WRITE NEATLY AND LEGIBLY.** - FOR OFFICE USE ONLY - | | |
| AGENCY Land Development DPZ State Highways Building Officials Dev. Engineering DPZ Health Fire Protection Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/> CONTINGENCY CONSTRUCTION START <input type="checkbox"/> ONE STOP SHOP <input type="checkbox"/> | DPZ SETBACK INFORMATION Front: _____ Rear: _____ Side: _____ Side St: _____ All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> Lot Coverage for New Town Zone _____ SDP/Red-line approval date _____ Accepted by _____ | PROPERTY ID# Filing fee \$ _____ Permit fee \$ _____ Excise tax \$ _____ Add'l per fee \$ _____ TOTAL FEES \$ Sub-total paid \$ _____ Balance due \$ _____ Check # _____ Validation # _____ |
| Distribution of Copies - White: Building Officials Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA T: forms/buildingpermitapplication | | |

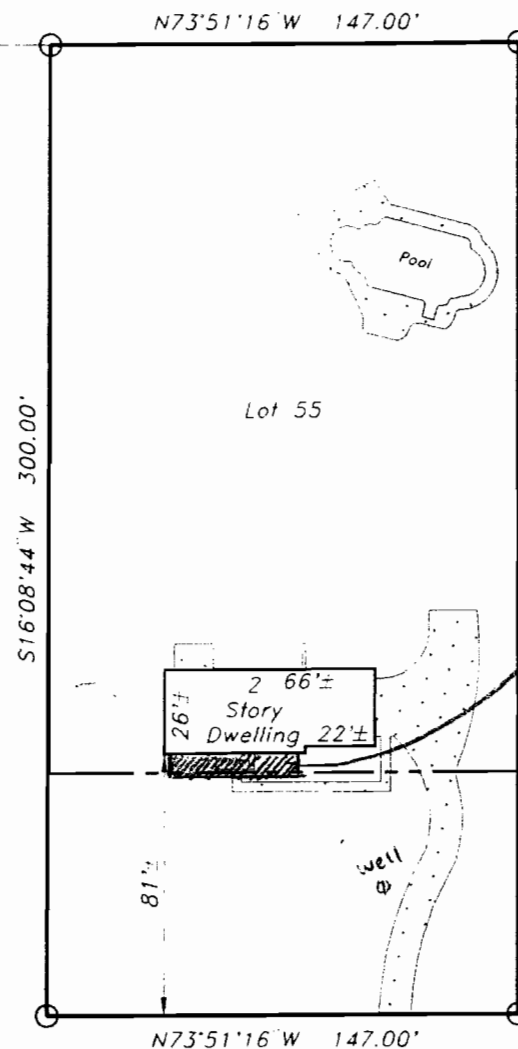
Lot Number : 55
Block/Section : -
Plat Reference : 3777
Title of Plat : The Heritage, Section 1, Area 2



APPROVED
WALK-THRU BUILDING PERMIT
BP# B08001648 A# 21887
APP. SAN HS DATE: 6-2-08
DESC. OF WORK: 42' x 8'
front porch (replacing existing)

Lot 56

Lot 54



I CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF THE DWELLING SHOWN ON THIS DRAWING ON THE PROPERTY KNOWN AS
4100 SHARP ROAD
HOWARD COUNTY, MARYLAND

LIES WITHIN THE LOT LINES SHOWN AS COMPILED FROM TITLE OR OTHER SOURCES. OTHER IMPROVEMENTS SHOWN ARE FOR PICTORIAL PURPOSES ONLY. THIS DRAWING IS NOT A BOUNDARY SURVEY AND HAS BEEN PREPARED EXCLUSIVELY FOR TITLE PURPOSES ONLY.

Lorne Hastings

3/23/94

RUXTON DESIGN CORPORATION
8422 BELLONA LANE
TOWSON, MARYLAND 21204
(410) 823-5000

SCALE: 1" = 60'

F-35108

SHARP ROAD

Property Lies in
Flood Zone C
FEMA #
240044 0020B
December 4, 198