

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER

B 08 006403

Building Address 13741 Frederick Road
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract 603000 Subdivision West Friendship
 Section _____ Area _____ Lot 10
 Tax Map 15 Parcel 219 Grid 1
 Zoning RC Map Coordinates _____ Lot size 5

Property Owner's Name JOE FESTERING
 Address 13741 FREDERICK ROAD
 City WEST FRIENDSHIP State _____ Zip Code 21917
 Home Phone 410 489 7408 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use SINGLE FAMILY RESID
 Proposed Use POOL BARN
 Estimated Construction Cost \$ _____
 Description of Work POOL BARN 30X40 FT
5X5 TIMBER 8 FT APART
STEEL SIDING

Contractor Company NATIONAL BARN CO
 Contact Person ROY
 Address 316 JUNIPER LANE
 City HANDVIER State PA Zip Code 17331
 License No. _____
 Phone 866 942 2276 Fax _____

Occupant or Tenant _____
 Contact Name _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

Engineer or Architect Company _____
 Contact Person _____
 Address _____
 City _____ State _____ Zip Code _____
 Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
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	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Basement: <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
No. of Bedrooms _____	Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
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: _____	
<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.

Applicant's Signature Joachim Festering
 Title/Company _____

Print Name JOACHIM FESTERING
 Date 2/12/08

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
FOR OFFICE USE ONLY -

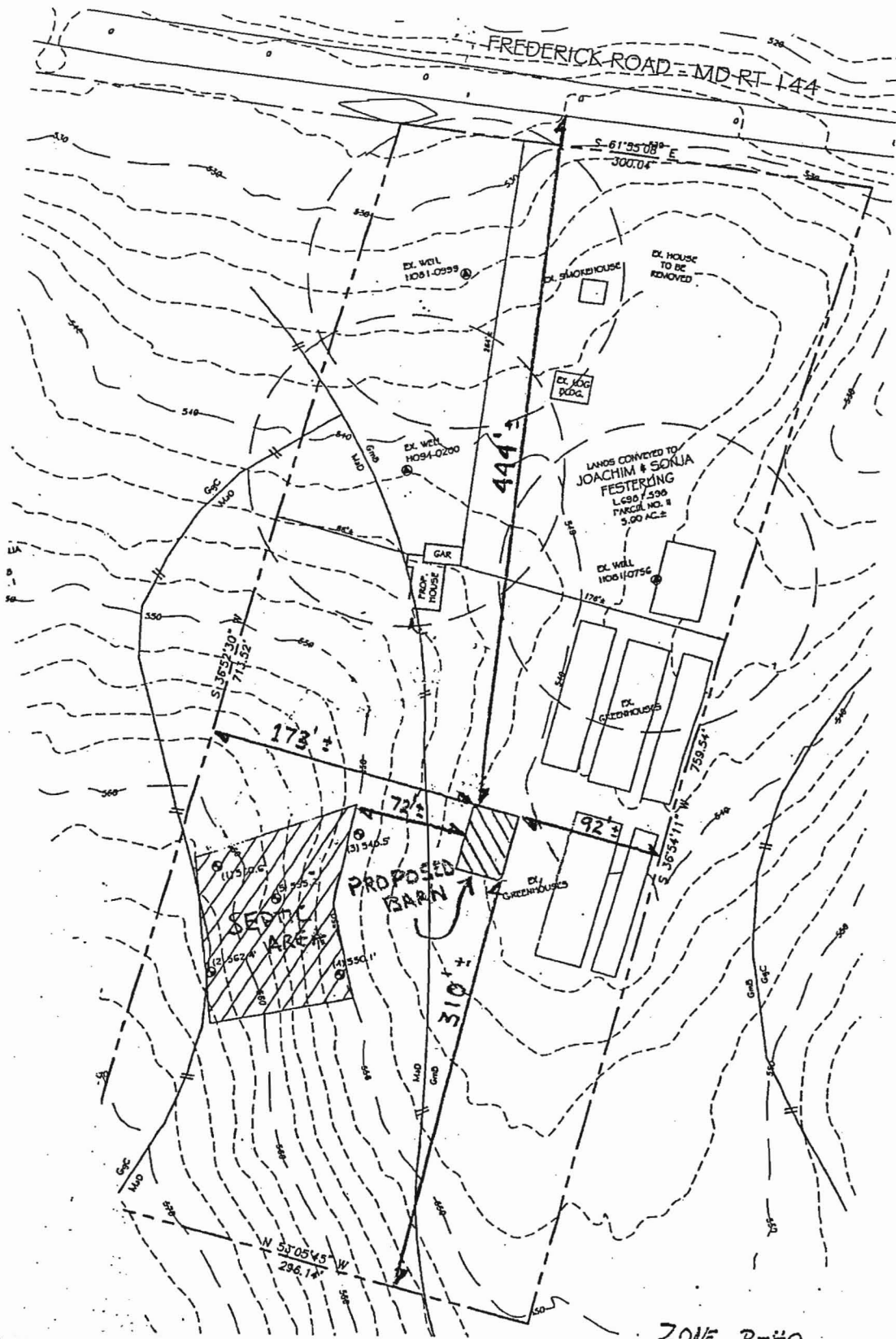
AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ	2-12-08	<u>[Signature]</u>
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	2-12-08	<u>[Signature]</u>
Fire Protection		

Is Sediment Control approval required prior to issuance?
 YES NO

CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:

DPZ SETBACK INFORMATION	PROPERTY ID#
Front: <u>444</u>	Filing fee \$ _____
Rear: <u>310</u> <u>10</u>	Permit fee \$ _____
Side: <u>173</u> <u>30</u>	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone _____	Check # _____
SDP/Red-line approval date _____	Validation # _____

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



APPROVED

WALK-THRU BUILDING PERMIT
 BP# B08000403 A# N/A
 APP. SAN HS DATE: 2-12-08
 DESC. OF WORK: 30' x 40' pole barn

ZONE R-40
 ZONE MAP # 15
 ELEC. DIST 3
 TAX MAP # 15
 JOACHIM FESTERLING
 13741 FREDERICK ROAD
 WEST-FRIENDSHIP MD 21794
 1" = 100'

~~Full Permit~~

✓ INVOICE # 146697 AKH
\$25.00 06/26/08 6/26/08

Dear
TO WHOM IT MAY CONCERN,

Scanned by AKH Date 6/27/08

WE HEREBY REQUEST A REVISION TO THE PLOT PLAN SUBMITTED FOR 13741 FREDERICK RD WEST FRIENDSHIP MD. THE ELEVATION HAS CHANGED FROM THE ORIGINAL PLOT PLAN SUBMITTED FROM 547.0 TOP OF FOUNDATION TO 544.55 TOP OF FOUNDATION, AS LOCATED IN NEW PLOT PLAN SUBMITTED WITH THIS REQUEST. IN ADDITION THE HOUSE WAS ROTATED AND THE NEW PLAN SHOWS THE CHANGES. REFERENCE BUILDING PERMIT # B07004356.

Bill Hauptman

BILL HAUPTMAN
HAUPTMAN BUILDERS
2945 LONESOME DOVE RD.
MT. AIRY MD 21771
O - 301 831 0711
C - 301 370 2878

REVIEWED FOR	
CODE CHANGE	
DEPARTMENT OF BUILDINGS, LICENSES AND PERMITS DIVISION HOWARD COUNTY	
DATE: <u>6/27/08</u>	DIVISION
<i>[Signature]</i>	
SUBJECT TO CALLING IN OF LEADER	
SUBJECT TO FIELD INSPECTION	
SUBJECT TO COMMENTS ON PLANS	
<input checked="" type="checkbox"/> AMENDMENT	<input type="checkbox"/> FINAL

Revised cc: Health Dept for approval 6/26/08

WALL CHECK DRAWING

FESTERLING PROPERTY

FREDERICK ROAD - MD RT 144



YANMAR ASSOCIATES, INC.
Engineers Surveyors Planners
300 South Main Street, P.O. Box 328 Mount Airy, Maryland 21771
(301) 522-2888 (301) 521-5015 (410) 549-2751

A527807
LIBER 698 FOLIO 598
13741 FREDERICK ROAD
ELECTION DISTRICT No. 3
HOWARD COUNTY, MARYLAND
SCALE: 1" = 50' MAY, 2008

REVISED

Date: 6/20/08

Comments: B700435L

EX. HOUSE TO BE REMOVED

EX. SMOKEHOUSE

EX. WELL HO11-06999

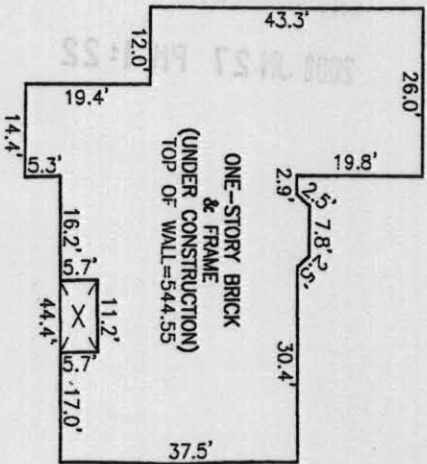
EX. LOG BLDG.

LANDS COVERED TO
JOACHIM & SONJA
FESTERLING
L. 698 F. 598
PARCEL NO. 5,00

EX. WELL HO11-07356

ONE-STY. BRICK & FRAME (UNDER CONSTR.) SEE DETAIL

HOUSE DETAIL
SCALE: 1" = 30'



Floor Elevations -
Top of Wall - 244.55
Top of Subfloor - 245.75

Zone - R-40
Zone Map - #15
Election District - 3
Tax Map #15

JOACHIM & SONJA
FESTERLING
L. 698 F. 598
PARCEL NO. 1

S 36°52'30" W
713.52'

405'±

N 53°05'45" W
296.14'

L. 698 F. 598

S 61°55'08" E
300.04'

S 36°54'11" W

759.54'



R. DIANNE

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER

307004356

Building Address 13741 FREDERICK ROAD
WEST FRIENDSHIP MD 21794

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

Census Tract 403000 Subdivision _____

Section _____ Area _____ Lot _____

Tax Map 15 Parcel 219 Grid 1

Zoning R-40 Map Coordinates _____ Lot size 5.00 ACRES

Property Owner's Name JUDITH & SCARLA FESTE

Address 13741 FREDERICK ROAD

City WEST FRIENDSHIP State MD Zip Code 21794

Home Phone 410 489 7468 Work Phone _____

Applicant's Name & Mailing Address, (if other than stated hereon):
BILL HAUDTMAN / HAUDTMAN BUILDERS
2945 LONESOME DVE RD. MT. AIRY MD. 21771

Phone 301 931 0711 Fax 301 829 3149

Existing Use SINGLE FAMILY HOME

Proposed Use SINGLE FAMILY HOME

Estimated Construction Cost \$ 285,000.00

Description of Work NEW 2800 SF SINGLE FAMILY
HOME WITH ATTACHED 2 CAR GARAGE

Contractor Company HAUDTMAN BUILDERS

Contact Person BILL HAUDTMAN

Address 2945 LONESOME DVE RD.

City MT. AIRY State MD Zip Code 21771

License No. MHR2 3149

Phone 301 931 0711 Fax 301 829 3149

Occupant or Tenant JUDITH FESTE

Contact Name BILL HAUDTMAN

Address 2945 LONESOME DVE ROAD

City MT. AIRY State MD Zip Code 21771

Phone 301 931 0711 Fax 301 829 3149

Engineer or Architect Company HAUDTMAN BUILDERS

Contact Person BILL HAUDTMAN

Address SAME AS ABOVE

City _____ State _____ Zip Code _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private _____
1st floor: _____	Sewage Disposal: _____ Public _____ Private _____
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/>
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Natural Gas <input type="checkbox"/>
No. of Bedrooms <u>3</u>	Propane Gas <input type="checkbox"/>
Height: <u>15'11 1/2"</u>	Sprinkler system: N/A <input checked="" type="checkbox"/>
Multi-family dwellings: _____	NFPA #13D _____
No. of efficiency units: _____	NFPA #13R _____
No. of 1 BR units: _____	Other: _____
No. of 2 BR units: _____	
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
Roof Height: _____	
State Certified Modular _____	
Manufactured Home _____	

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Bill Haudtman
Applicant's Signature
BILL HAUDTMAN BUILDERS
Title/Company

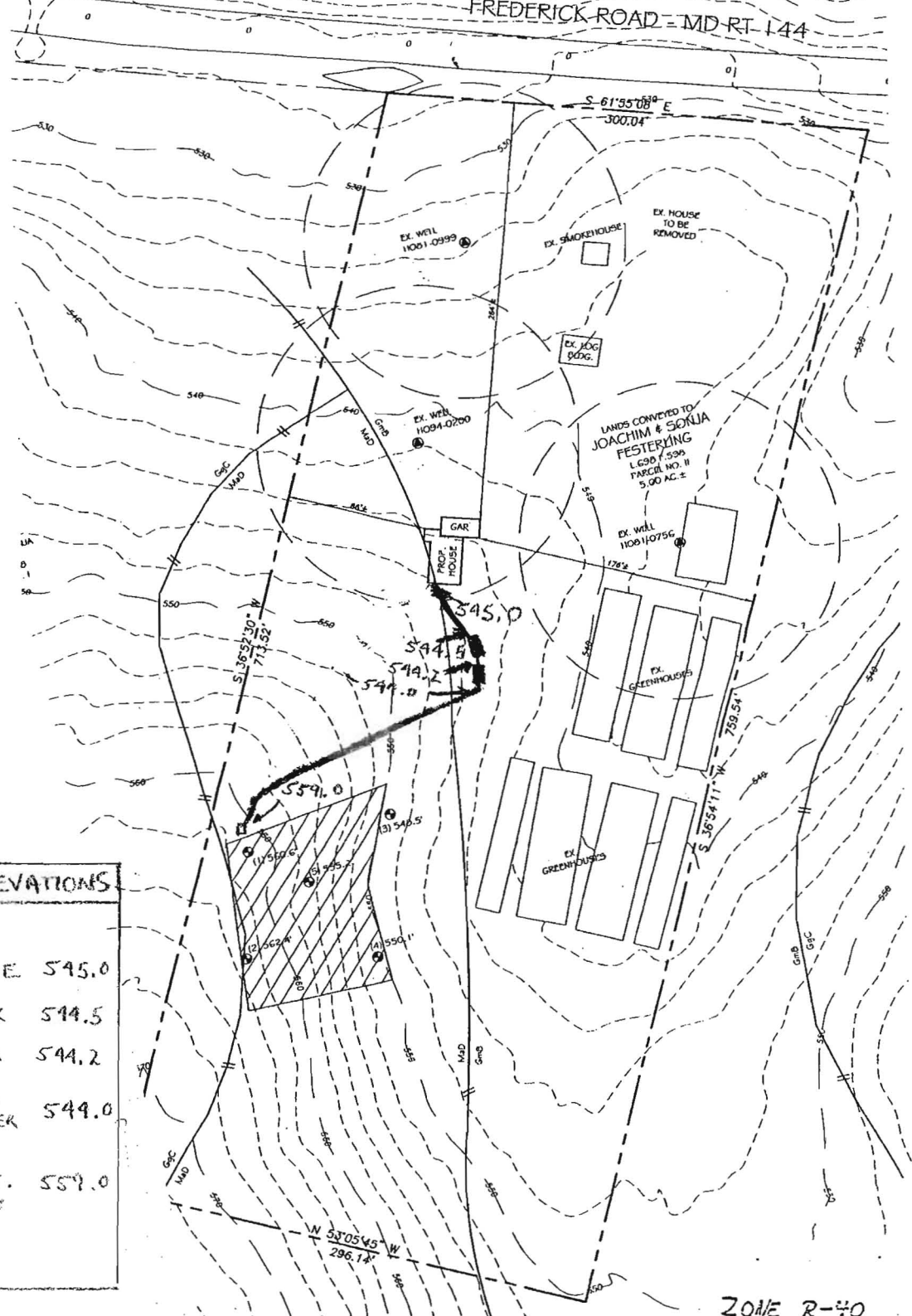
Bill Haudtman
Print Name
10/19/07
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>1/22/09</u>	<u>[Signature]</u>
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"/>		
Distribution of Copies- White: Building Official Green: LDD, DPZ		
T:\norm\PERMIT.FRM		

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ <u>120.00</u>
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
Lot Coverage for NewTown Zone _____	Check # <u>12-77</u>
SDP/Red-line approval date _____	Validation # _____
Accepted by <u>[Signature]</u>	

FREDERICK ROAD - MD RT 144



SEPTIC ELEVATIONS	
EXIT @ HOUSE	545.0
INVERT @ TANK	544.5
EXIT @ TANK	544.2
INVERT @ PUMP CHAMBER	544.0
INVERT @ DIST. BOX	554.0

ZONE R-40

ZONE MAP # 12

ELEC. DIST 3

TAX MAP # 15

JOACHIM FESTERLING
13741 FREDERICK ROAD
WEST-FRIENDSHIP MD 21744

1" = 100'

Approved Septic System Plan
Howard County Health Department

[Signature]
Signature Date 1/22/07