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 B00135825

Building Address: 5493 TEN OAKS RD
CLARKSVILLE MD 21029

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

Census Tract: 6051.01 Subdivision: NA

Section: N/A Area: NA Lot: N/A

Tax Map: 28 Parcel: 113 Grid: 23

Zoning: RRDEO Map Coordinates: 14A5 Lot size:

Property Owner's Name: JAMES KELLY
Address: 5493 TEN OAKS RD
City: CLARKSVILLE State: MD Zip Code: 21029
Home Phone: 443-535-0387 Work Phone: 301 840-1597
Applicant's Name & Mailing Address, (if other than stated hereon):

Phone Fax

Existing Use: ~~POOL HEATER~~ SFD
Proposed Use: Same with tank
Estimated Construction Cost $ 1500.00
Description of Work: INSTALL 330 GALLON UNDERGROUND PROPANE(LP) TANK

Contractor Company: POSITIVE MECHANICAL
Contact Person: CHRIS KOLB / LEON KUCHARSKI
Address: 104 TENNYSON CT
City: ABINGDON State: MD Zip Code: 21009
License No. 15627
Phone: 443-463-7009 OR 443-677-3656

Occupant or Tenant: James Kelly
Contact Name:
Address: 5493 Ten Oaks Rd
City: Clarksville State: MD Zip Code: 21029
Phone Fax

Engineer or Architect Company:
Contact Person:
Address:
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 ____
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 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 [signature] *Print Name* CHRIS KOLB

Title/Company POSTIVE MECHANICAL *Date* 4-25-02

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	5/2/02	[signature]
Fire Protection		

Is Sediment Control approval required prior to issuance? YES ☐ NO ☐

CONTINGENCY CONSTRUCTION START ☐
ONE STOP SHOP ☐

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? YES ☐ NO ☐
Is Entrance Permit required? YES ☐ NO ☐
Historic District? YES ☐ NO ☐
Lot Coverage for NewTown Zone
SDP/Red-line approval date

PROPERTY ID# 34383
Filing fee $ 100
Permit fee $
Excise tax $
Add'l per. fee $
TOTAL FEES $ 100
Sub-total paid $
Balance due $
Check # 2533
Validation # 4553
Accepted by

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

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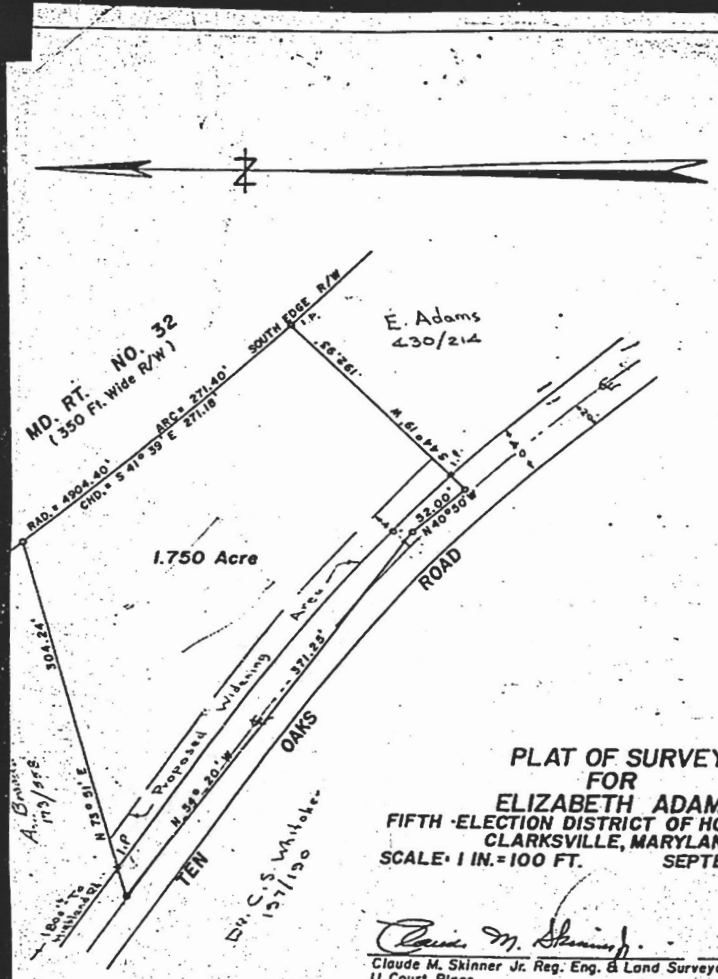
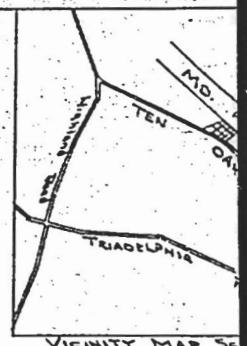


Location Tax Map No. 28

PLAT OF SURVEY
FOR
ELIZABETH ADAMS

FIFTH ELECTION DISTRICT OF HOWARD COUNTY
CLARKSVILLE, MARYLAND
SCALE: 1 IN. = 100 FT. SEPTEMBER 21, 1965

Claude M. Skinner Jr. Reg. Eng. & Land Surveyor No. 2237
11 Court Place
Ellicott City, Maryland



Facilities : Private Water & Sew
Approved Type of Facilities abo

Dr. Theodore R. Shrop
Howard County Health Officer

Thomas G. Harris Jr.
Howard County Planning Commission

Contract Purchaser: Charles Russell
Owen Brown Rd.
Ellicott City, Md.

Owners Reservation:
I the undersigned owner of the p
our heirs or assigns do hereby reserve
Commission the widening area shown h
widening of Ten Oaks Road, for a perio

Elizabeth Adams

A-1321