

SOK

Building Address 5425 Trutter Rd.
Clarksville Md. 21029

Suite/Apt. # 1 SDP/WP/Petition #: _____

Census Tract W05502 Subdivision Crosswood Manor

Section 4 Area _____ Lot 11

Tax Map 29 Parcel 88 Grid 20

Zoning R-2M Map Coordinates 14H5 Lot size _____

Property Owner's Name Donald Sekira

Address same

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

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

Phone _____ Fax _____

Existing Use SFD

Proposed Use SFD W-ADD

Estimated Construction Cost \$ 70,000

Contractor Company Clarksville Builders Inc.

Contact Person Susan Spoor

Description of Work 20x15' Family room,
14'x14' bedroom addition
20'x30' garage addition attached
to house

Address 18111 Monk Hollow Rd.

City Highland State Md. Zip Code 20777

License No. 76523

Phone 301-570-2529 Fax 301-570-2529

Occupant or Tenant owner

Engineer or Architect Company _____

Contact Name Donald Sekira

Contact Person _____

Address same

Address _____

City _____ State _____ Zip Code _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

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"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame	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"/>
<input type="checkbox"/> State Certified Modular	Sprinkler system: N/A <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 checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
1st floor: _____ Depth _____ Width _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Heating System: <input checked="" type="checkbox"/> Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Crawl space <input checked="" type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
No. of Bedrooms <u>3</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: _____	
<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.

Susan Spoor
Applicant's Signature
vice president Clarksville Bldrs. Inc.
Title/Company

Susan Spoor
Print Name
4-17-02
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
**** PLEASE WRITE NEATLY AND LEGIBLY. ****

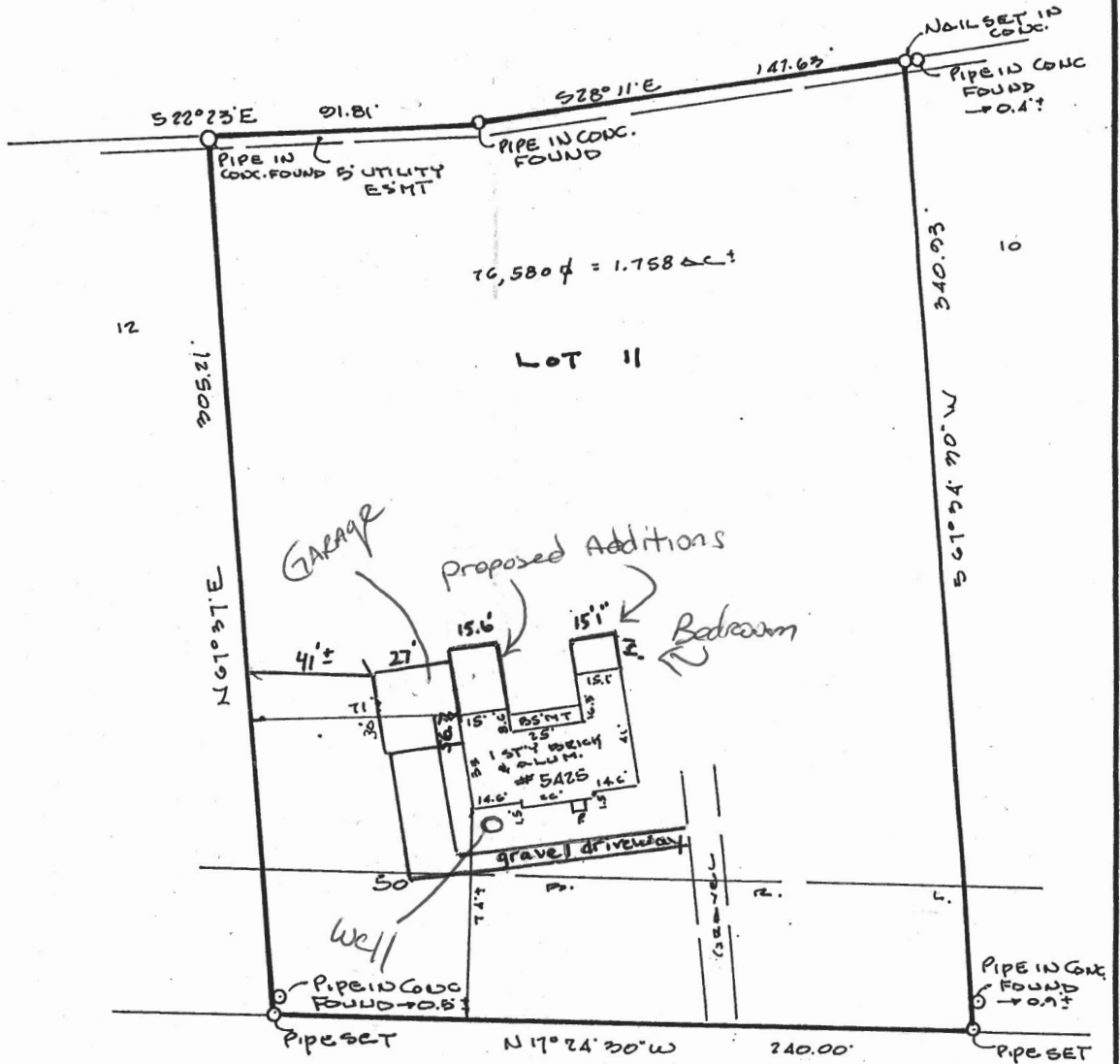
- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#: <u>54333</u>
<input checked="" type="checkbox"/> Land Development, DPZ			Front: _____	Filing fee \$ <u>25</u>
<input type="checkbox"/> State Highways			Rear: _____	Permit fee \$ _____
<input checked="" type="checkbox"/> Building Official			Side: _____	Excise tax \$ _____
<input checked="" type="checkbox"/> Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
<input checked="" type="checkbox"/> Health	<u>5/17/02</u>	<u>Steven R. Kuey</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
<input type="checkbox"/> Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	Check # <u>750</u>
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # <u>47692</u>

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

Accepted by [Signature]


Property known as: **LOT 11**
 REVISED PLAT OF LOTS 8, 9, 10, 11 & 12
 "CRISWOLD MANOR" SECTION FOUR
 PLATBOOK 1 F. 27
 5TH ELECTION DISTRICT
 HOWARD COUNTY, MD



5/17/02 -
 proposed
 additions
 OKSRN

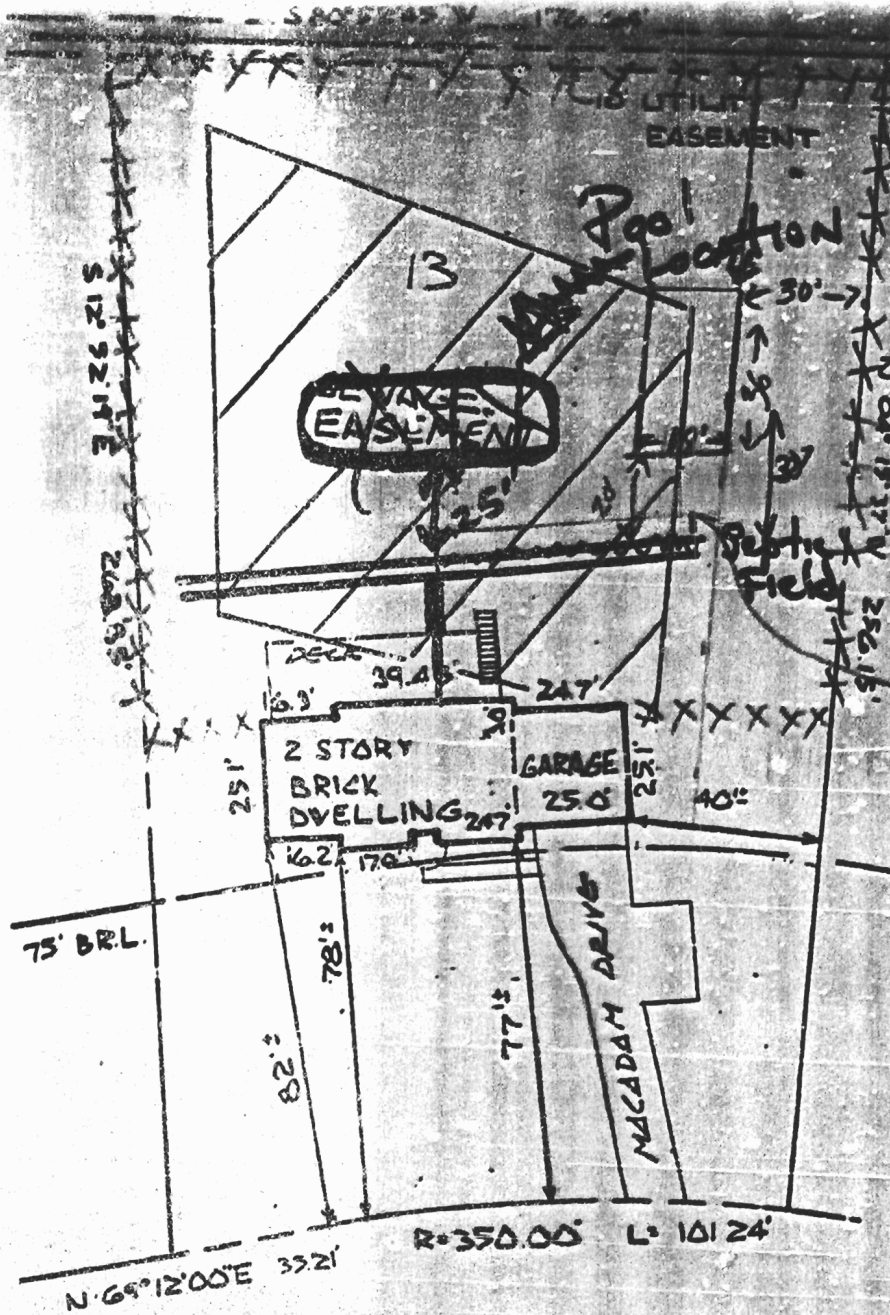
TROTTER ROAD
 60' R/W

SURVEY PLAT
 SUBJECT PROPERTY NOT LOCATED IN A FLOOD PLAIN AREA UNLESS OTHERWISE NOTED

CERTIFICATION	SEAL	SCALE 1" = 50' DATE 1-20-1995
This is to certify that I have surveyed the property known as: <u>5425 TROTTER ROAD</u> for the purpose of locating the improvements thereon, and the improvements are located as shown.	 Walter Park	LAND DESIGN ENGINEERING, INC. 8835 Columbia 100 Parkway Unit N Columbia, MD 21045 (410) 715-1070 (301) 596-3424 (410) 715-0681 (Fax)

ADJ LOTS

12



6/29/87
OK'd sets
with adjustment
to 30' from
existing fence
BP

SCALED OUT
THIS IS
APPROX
TRENCH
LOCATION

BP 12478

NOTE:
SEWAGE EASEMENT
SCALED FROM PLAT

KONDRUP DRIVE

R.C. KASSON
12398 Kondrup Dr.
Fulton, MD 20759
301-953-9145



** AREA TWO
NO TITLE REPORT FURNISHED

CERTIFICATION: THIS IS TO CERTIFY THAT THE IMPROVEMENTS INDICATED HEREON ARE LOCATED AS SHOWN. THIS IS NOT A PROPERTY LINE SURVEY AND SHOULD NOT BE USED AS SUCH.

Graden A Rogers
GRADEN A ROGERS

12398 KONDRUP DRIVE

LIBER _____ FOLIO _____ PROPT. L.S. NO. 119

LOT 13 BLOCK B SECT 4

PLAT ENTITLED BEAUFORT PARK