

Building Address 5740 Trotter Road
Clarksville, MD 21029

Property Owner's Name Anne E. Hoke
Address 5740 Trotter Road
City Clarksville State MD Zip Code 21029

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

Census Tract 105511 Subdivision Forrest Hills

Home Phone 301 854-2947 Work Phone 410 539-1200
Applicant's Name & Mailing Address, (if other than stated hereon):
X 5312

Section _____ Area _____ Lot 16

Tax Map 35 Parcel 7 Grid 2

Phone _____ Fax 410 531-2376

Zoning R20 Map Coordinates 11116 Lot size _____

Existing Use Single Family Dwelling
Proposed Use same

Contractor Company Zepp Plumbing & Heating
Contact Person Ed Zepp

Estimated Construction Cost \$ \$10,000

Address 12447 Route 108
City Clarksville State MD Zip Code 21029

Description of Work Create a new bath in the finished basement

License No. 1782
Phone 410 531-6712 Fax 531-5812

Occupant or Tenant same

Engineer or Architect Company None

Contact Name _____

Contact Person _____

Address _____

Address _____

City _____ State _____ Zip Code _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Utilities

Building Characteristics

Utilities

Height: _____
No. of stories: _____
Gross area, sq. ft. per floor: _____
Use group: _____
Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

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 _____

SF Dwelling SF Townhouse
Depth _____ Width _____
1st floor: _____
2nd floor: _____
Basement: _____
Finished Basement Unfinished Basement
Crawl space Slab on Grade
No. of Bedrooms 5
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

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 ON TO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Anne E. Hoke
Applicant's Signature

Anne E. Hoke
Print Name

Title/Company

Date

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

FOR OFFICE USE ONLY

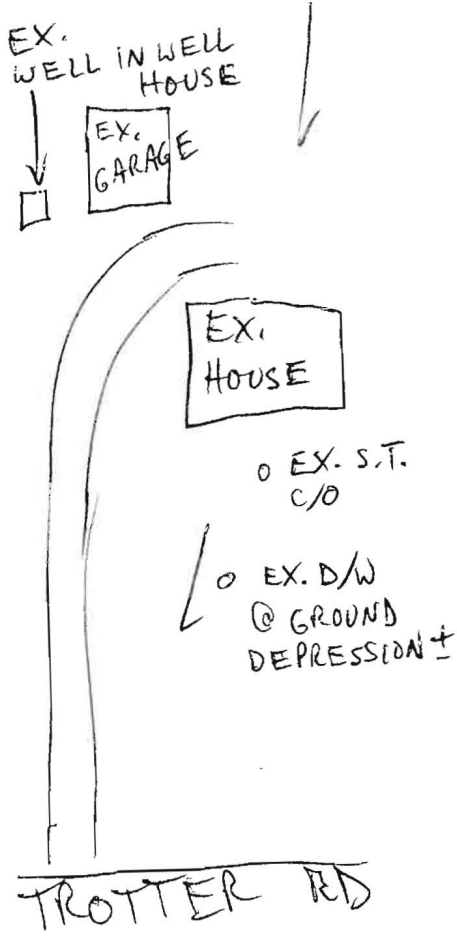
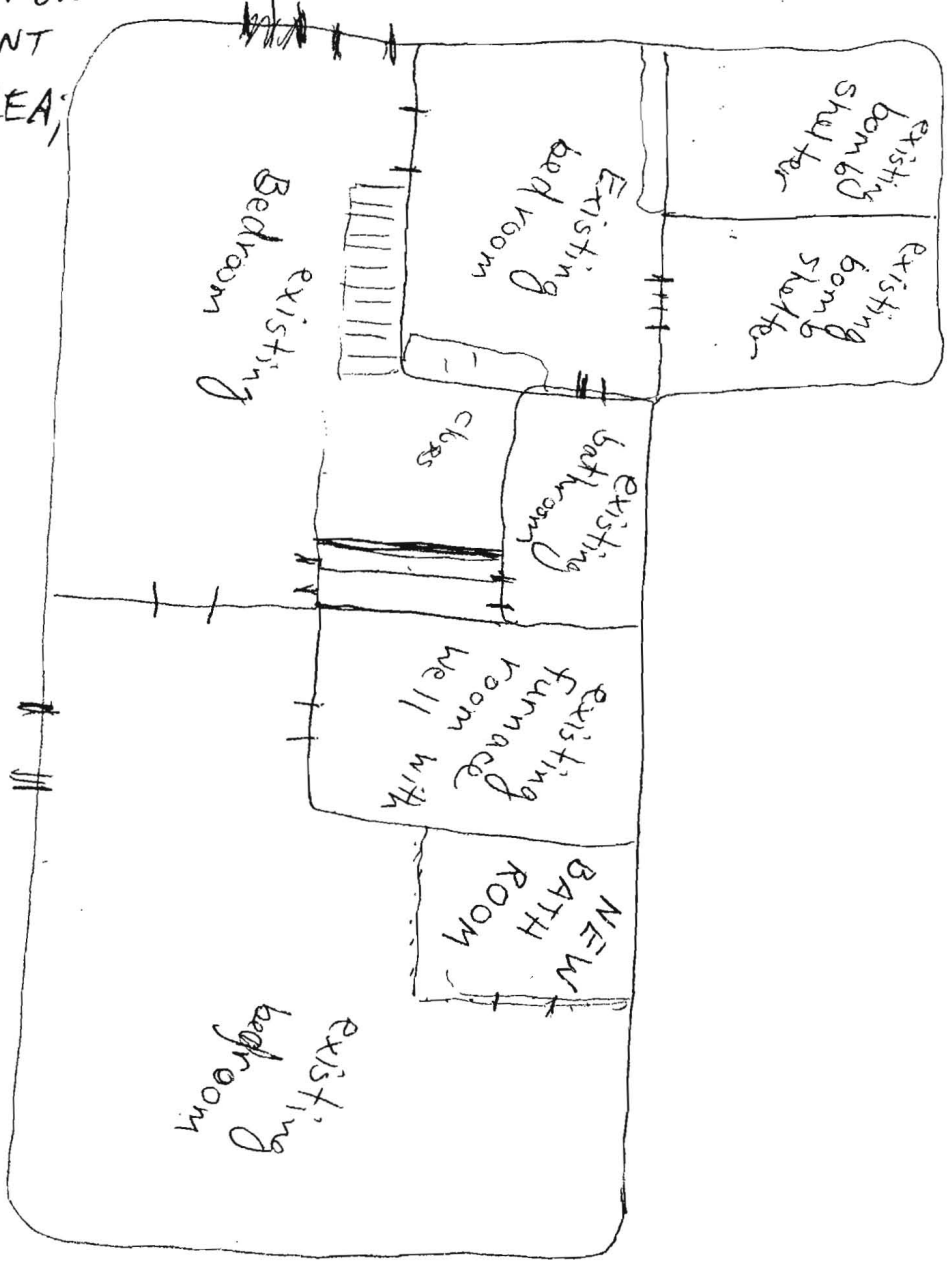
AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development DPZ			Front: _____	57177
State Highways			Rear: _____	Filing fee \$ _____
Building Official			Side: _____	Permit fee \$ _____
Dev Engineering DPZ			Side St: _____	Excise tax \$ _____
Health			All minimum setbacks met?	Add'l per. fee \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Sub-total paid \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Check # <u>2796</u>
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Validation # <u>11366</u>
			Lot Coverage for New Town Zone _____	Accepted by <u>[Signature]</u>
			SDP/Red-line approval date _____	

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

BP# B00139871 NEVER ISSUED
Sent back to DWP 9/24/03

1/30/03 **MR** PROPOSED ALTERATION OF EX. BSMT FOR NEW BATH.
SITE INSP REVEALS NO S.S. ~~PRO~~ DISCHARGE; BP OK
CONTINGENT UPON VERIFICATION OF SOILS @ EX. SYSTEM
& ESTABLISHMENT OF REPAIR AREA;

DISCUSSION W/OWNER
VIA T/C RE: SAME



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	Maryland Department of Assessments and Taxation HOWARD COUNTY Real Property Data Search	Go Back View Map New Search
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Account Identifier: District - 05 Account Number - 345057

Owner Information

Owner Name:	HOKE ANNE E	Use:	RESIDENTIAL
		Principal Residence:	YES
Mailing Address:	5740 TROTTER RD CLARKSVILLE MD 21029-1218	Deed Reference:	1) / 4887/ 21 2)

Location & Structure Information

Premises Address	Zoning	Legal Description
5740 TROTTER RD CLARKSVILLE 21029	R20	LOT 16 17 5740 TROTTER RD FORREST HILLS

Map	Grid	Parcel	Sub District	Subdivision	Section	Block	Lot	Group	Plat No:	Plat Ref:
35	2	7					16 17	81		

Special Tax Areas	Town Ad Valorem Tax Class	NO A/V, NO M/P, METRO FIRE TAX
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Primary Structure Built	Enclosed Area	Property Land Area	County Use
1958	1,690 SF	4.85 AC	
Stories	Basement	Type	Exterior
1	YES	STANDARD UNIT	BRICK

Value Information

	Base Value	Phase-in Assessments		
		Value As Of 01/01/2002	As Of 07/01/2002	As Of 07/01/2003
Land:	133,870	160,500		
Improvements:	139,680	160,460		
Total:	273,550	320,960	289,353	305,156
Preferential Land:	0	0	0	0

Transfer Information

Seller: BOOSTROM IRENE JILLSON	Date: 09/21/1999	Price: \$285,000
Type: IMPROVED ARMS-LENGTH	Deed1: / 4887/ 21	Deed2:
Seller: BUSH GEORGE B AND WF	Date: 10/08/1985	Price: \$17,500
Type: IMPROVED ARMS-LENGTH	Deed1: / 1392/ 674	Deed2:
Seller:	Date:	Price:
Type:	Deed1:	Deed2:

Exemption Information

Partial Exempt Assessments	Class	07/01/2002	07/01/2003
County	000	0	0
State	000	0	0
Municipal	000	0	0

Tax Exempt: NO **Special Tax Recapture:**
Exempt Class: * NONE *