

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
1300155455

Building Address 6453 HAVILAND Mill RD
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision _____
Section _____ Area _____ Lot _____
Tax Map _____ Parcel 257 Grid _____
Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name THOMAS & MARIAN BOND
Address 6453 HAVILAND Mill RD
City CLARKSVILLE State MD Zip Code 21029
Home Phone 413-260-1712 Work Phone 413-604-1712
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone NA Fax _____

Existing Use RESIDENTIAL
Proposed Use SAME
Estimated Construction Cost \$ 20,000 open
Description of Work FRONT AND BACK PORCH
21x8 35x12
-RAISED PORCH ON CONTINUOUS FOOTING

Contractor Company HOME OWNER
Contact Person NA
Address NA
City NA State _____ Zip Code _____
License No. _____
Phone _____ Fax NA

Occupant or Tenant OWNER
Contact Name THOMAS BOND
Address SAME
City _____ State _____ Zip Code _____
Phone _____ Fax _____

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

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

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

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.

Thomas P. Bond
Applicant's Signature
Owner
Title/Company
6/5/04

THOMAS BOND
Print Name
3/11/05
Date

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

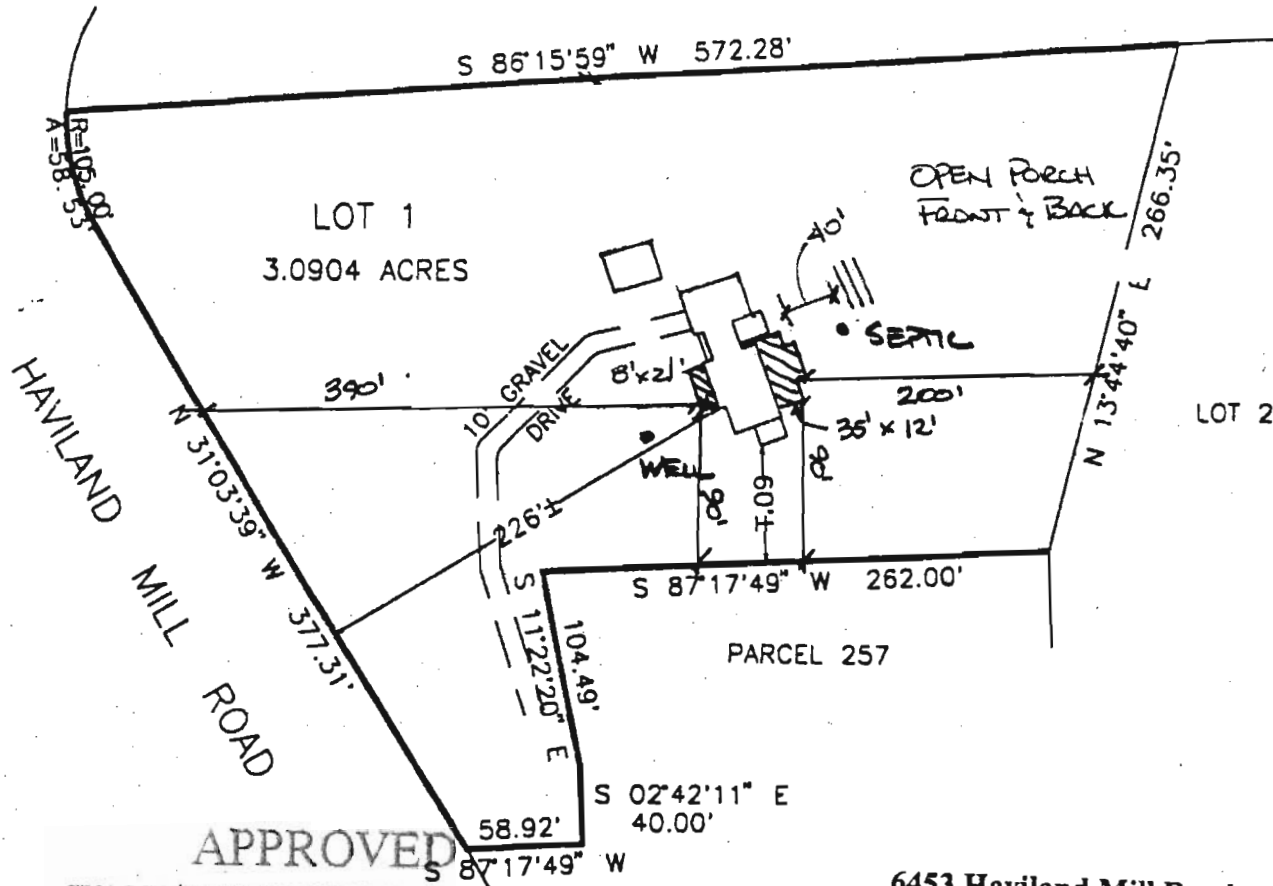
Sub Tax N/A

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official	<u>8/11/04</u>	<u>[Signature]</u>
Dev. Engineering, DPZ		
Health	<u>8/11/04</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"/>		

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ <u>108.00</u>
Side: _____	Excise tax \$ <u>N/A</u>
Side St.: _____	Add'l per. fee \$ <u>11.00</u>
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>CASH</u>
SDP/Red-line approval date _____	Validation # _____



K. B. CAIN
994/374



APPROVED

WALK-THRU BUILDING PERMIT

BP# B00155455 A# P25973

APP. SAN PAY DATE: 8/11/05

DESC. OF WORK: SEPTIC 21x8

Pool porch # 35x12 porch

6453 Haviland Mill Road
Clarksville, MD 21029

Thomas and Marian Bond

Jefferson D. Lawrence 12-17-96
Jefferson D. Lawrence
MD/Professional Land Surveyor #5218 Date

Offset dimensions shown thus NNE are generally within 1 (one) foot of the stated distance if 20 feet or less. Longer distances may exceed 1 foot margin proportionally. All offsets depend on site conditions and other factors including but not limited to; elevation changes, availability of property markers, availability and age of land record data, irregularly shaped and or large lots.

Property shown hereon is not in a flood plain per existing records unless otherwise noted

O'CONNELL & LAWRENCE, INC.
SURVEYORS, ENGINEERS & LAND PLANNERS
17904 Georgia Avenue, Suite 302, Olney, Maryland 20832
Tel: (301) 924-4570 • Fax: (301) 924-5872

HOUSE LOCATION DRAWING
HARRIS ESTATES
LOT 1
HOWARD COUNTY, MARYLAND

Plat Book: Plat: 12522 Liber: Folio:

SURVEYOR'S CERTIFICATION

I hereby certify to the best of my knowledge and belief that the property delineated hereon is in accordance with the Plat of Subdivision and/or deed of record, that the improvements were located by accepted field practices and include permanent visible structures and encroachments, if any. This drawing is not to be relied upon for the establishment or location of fences, garages, building or other existing or future improvements. This drawing does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing. Questions pertaining to relationships of the property corners or lines to real objects must be addressed by a Boundary Survey. This drawing is of benefit to a consumer only insofar as it is required by lender or title insurance company or its agent in connection with the purchase of real estate.

Job No. 136-015

Scale 1"=100'

Field Dates

Wall Check