

Building Address 685 Gaithers RD  
Sykesville MD 21784

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

Census Tract \_\_\_\_\_ Subdivision \_\_\_\_\_

Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_

Tax Map \_\_\_\_\_ Parcel \_\_\_\_\_ Grid \_\_\_\_\_

Zoning \_\_\_\_\_ Map Coordinates \_\_\_\_\_ Lot size \_\_\_\_\_

Property Owner's Name Arnita Wilcox

Address 685 Gaithers RD

City Sykesville State MD Zip Code 21784

Phone 410 442 5612 Phone \_\_\_\_\_

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

Phone 410-313-3547 Fax \_\_\_\_\_

Existing Use NONE

Proposed Use \_\_\_\_\_

Estimated Construction Cost \$ 5,000

Description of Work open deck  
16 x 12 + 12 x 2 octagon  
w/steps

Contractor Company Stk Roofing Siding Windows  
 Call 242-848

Contact Person Daniel A. Rupert 6537

Address 5399 Enterprise St

City Elkarsburg State MD Zip Code 21784

License No. 210910

Phone 866-836-Roof Fax 443-516-2127

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 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: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <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	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____
<input type="checkbox"/> State Certified Modular	

**BUILDING DESCRIPTION - RESIDENTIAL**

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: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="text-align: center;">Depth</td><td style="text-align: center;">Width</td></tr><tr><td style="text-align: center;">25</td><td style="text-align: center;">55</td></tr></table>	Depth	Width	25	55	Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private
Depth	Width				
25	55				
2nd floor: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="text-align: center;">Depth</td><td style="text-align: center;">Width</td></tr><tr><td style="text-align: center;">20</td><td style="text-align: center;">50</td></tr></table>	Depth	Width	20	50	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Depth	Width				
20	50				
Basement: <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="text-align: center;">Depth</td><td style="text-align: center;">Width</td></tr><tr><td style="text-align: center;">20</td><td style="text-align: center;">50</td></tr></table>	Depth	Width	20	50	Heating System: Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Depth	Width				
20	50				
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/>	Sprinkler system: N/A <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other:				
Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>					
No. of Bedrooms <u>3</u>					
Height: <u>21-13'</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 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 ON THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Daniel A. Rupert  
 Applicant's Signature  
Stk Roofing Siding Windows  
 Title/Company

Daniel A. Rupert  
 Print Name  
3/26/08  
 Date

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

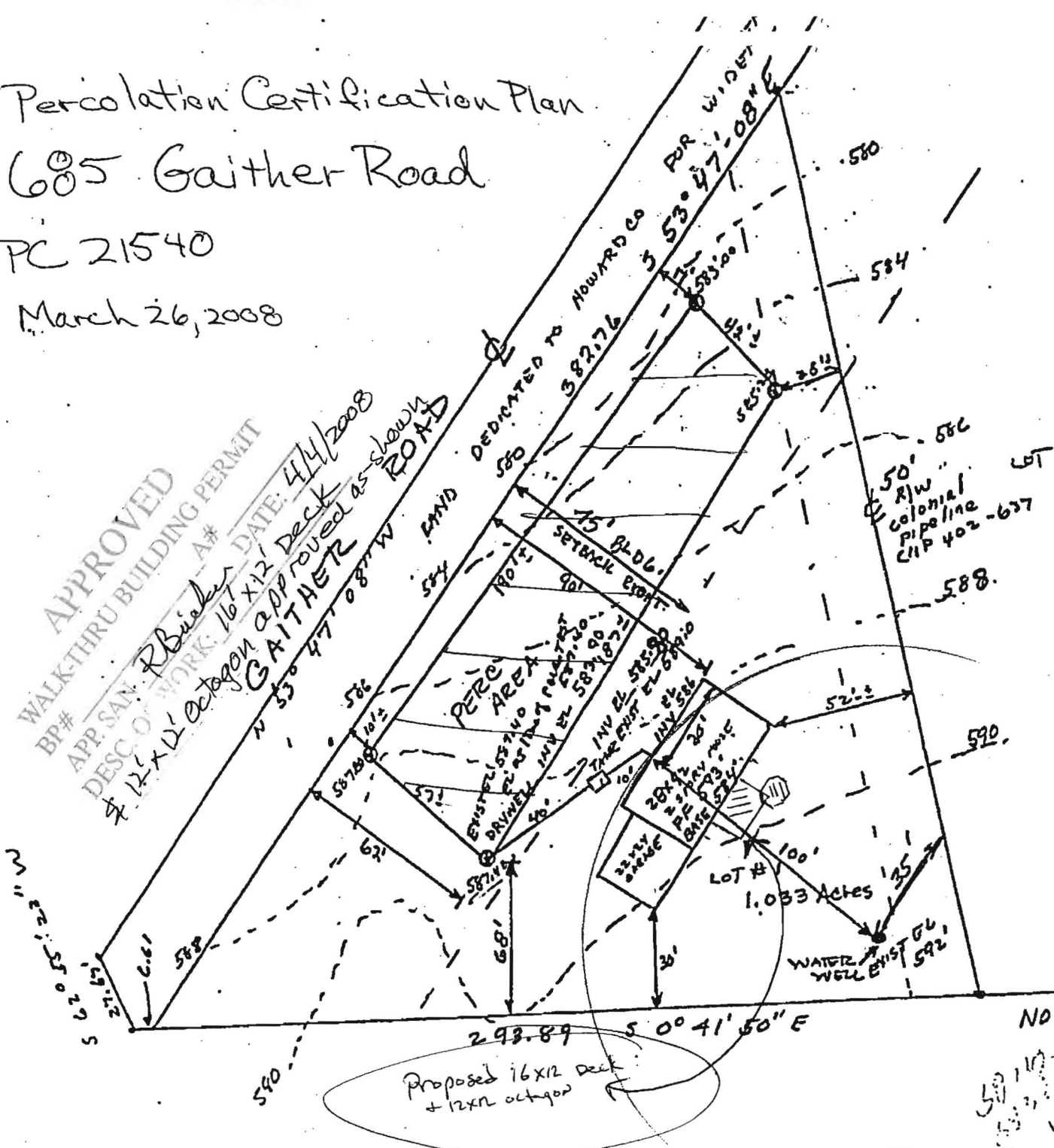
AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Official			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per. fee \$ _____
Health <u>4/4/2008</u>		<u>R. Bricker</u>	All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection			YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?			Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>CP3B</u>
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA			Lot Coverage for NewTown Zone _____	Accepted by _____
T:\forms\PERMIT.FRM			SDP/Red-line approval date _____	

# Percolation Certification Plan

## 605 Gaither Road

### PC 21540

March 26, 2008



I certify the above measurements are actual & correct for this property  
*Mark P. Chok*  
PLANS OK R14 11/14/77

LOT # 1 HEUBNER PROPERTY  
GAITHER ROAD 3RD ELECTION DIST.  
HOWARD COUNTY, SYKESVILLE, M.D.  
FINAL PLAT # F-76-07  
LIBERTY 722 FOLIO 607  
SCALE 1" = 50'