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DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS 3430 COURT HOUSE DRIVE ELICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1610 AUTOMATED INFORMATION (410) 313-3800	HOWARD COUNTY PERMIT APPLICATION	PERMIT NUMBER B00142992
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Building Address <u>6594 Guilford Rd</u> <u>Clarksville, MD 21029.</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>605501</u> Subdivision <u>Fox Police</u> Section _____ Area _____ Lot <u>9.</u> Tax Map <u>35</u> Parcel <u>368</u> Grid <u>19</u> Zoning <u>RRD10</u> Map Coordinates <u>196.11</u> Lot size _____	Property Owner's Name <u>Daniel &amp; Margaret Delleuillon</u> Address <u>6594 Guilford Rd</u> City <u>Clarksville</u> State <u>MD</u> Zip Code <u>21029</u> Home Phone <u>301.854.9710</u> Work Phone <u>301.405.6565</u> Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____
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Existing Use <u>Residential - SFD</u> Proposed Use <u>Residential - SFD &amp; addition</u> Estimated Construction Cost \$ <u>150,000</u> Description of Work <u>Family room / Entrance</u> <u>addition - Two story.</u> <u>unfinished basement &amp; rough in.</u>	Contractor Company <u>To Be Decided</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ License No. _____ Phone _____ Fax _____
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Occupant or Tenant <u>Margaret &amp; Daniel Delleuillon</u> Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____	Engineer or Architect Company <u>Kevin McKenna</u> Contact Person _____ Address <u>PO Box 722</u> City <u>Columbia</u> State <u>MD</u> Zip Code <u>21045</u> Phone <u>410.381.5812</u> Fax <u>410.381.0979</u>
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BUILDING DESCRIPTION - <u>COMMERCIAL</u>	BUILDING DESCRIPTION - <u>RESIDENTIAL</u>
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Building Characteristics	Utilities	Building Characteristics	Utilities
Height: <u>25'</u> No. of stories: <u>2</u> Gross area, sq. ft. per floor: _____ Use group: _____ Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input checked="" type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____	SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1st floor: _____ 2nd floor: _____ 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 <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	Water Supply: <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: <u>N/A</u> <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> 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.

<u>Margaret Delleuillon</u> Applicant's Signature <u>owner</u>	<u>Margaret Marie Delleuillon</u> Print Name <u>7.11.03</u> Date
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Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
**\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\***  
**- FOR OFFICE USE ONLY -**

<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>AGENCY</th> <th>DATE</th> <th>SIGNATURE APPROVAL</th> </tr> </thead> <tbody> <tr><td>Land Development, DPZ</td><td>_____</td><td>_____</td></tr> <tr><td>State Highways</td><td>_____</td><td>_____</td></tr> <tr><td>Building Official</td><td>_____</td><td>_____</td></tr> <tr><td>Dev. Engineering, DPZ</td><td>_____</td><td>_____</td></tr> <tr><td>Health</td><td>_____</td><td>_____</td></tr> <tr><td>Fire Protection</td><td>_____</td><td>_____</td></tr> </tbody> </table> <p>Is Sediment Control approval required prior to issuance?          YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>CONTINGENCY CONSTRUCTION START: <input type="checkbox"/></p> <p>ONE STOP SHOP: <input type="checkbox"/></p>	AGENCY	DATE	SIGNATURE APPROVAL	Land Development, DPZ	_____	_____	State Highways	_____	_____	Building Official	_____	_____	Dev. Engineering, DPZ	_____	_____	Health	_____	_____	Fire Protection	_____	_____	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>DPZ SETBACK INFORMATION</th> </tr> </thead> <tbody> <tr><td>Front: <u>100'</u></td></tr> <tr><td>Rear: <u>60'</u></td></tr> <tr><td>Side: <u>30'</u></td></tr> <tr><td>Side St.: <u>NA</u></td></tr> <tr><td>All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/></td></tr> <tr><td>Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/></td></tr> <tr><td>Historic District? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/></td></tr> <tr><td>Lot Coverage for NewTown Zone _____</td></tr> <tr><td>SDP/Red-line approval date _____</td></tr> </tbody> </table>	DPZ SETBACK INFORMATION	Front: <u>100'</u>	Rear: <u>60'</u>	Side: <u>30'</u>	Side St.: <u>NA</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Historic District? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Lot Coverage for NewTown Zone _____	SDP/Red-line approval date _____	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>PROPERTY ID#: <u>23134</u></th> </tr> </thead> <tbody> <tr><td>Filing fee \$ <u>25.00</u></td></tr> <tr><td>Permit fee \$ _____</td></tr> <tr><td>Excise tax \$ _____</td></tr> <tr><td>Add'l per. fee \$ _____</td></tr> <tr><td>TOTAL FEES \$ _____</td></tr> <tr><td>Sub-total paid \$ _____</td></tr> <tr><td>Balance due \$ _____</td></tr> <tr><td>Check # <u>3001</u></td></tr> <tr><td>Validation # <u>85271</u></td></tr> </tbody> </table> <p style="text-align: right;">Accepted by <u>(Signature)</u></p>	PROPERTY ID#: <u>23134</u>	Filing fee \$ <u>25.00</u>	Permit fee \$ _____	Excise tax \$ _____	Add'l per. fee \$ _____	TOTAL FEES \$ _____	Sub-total paid \$ _____	Balance due \$ _____	Check # <u>3001</u>	Validation # <u>85271</u>
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