

**HOWARD COUNTY
PERMIT APPLICATION**

**B110000610
PERMIT NUMBER**

Building Address 3055 Hobbs Road
Glenwood MD 21738

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

Census Tract: _____ Subdivision 01000000

Section _____ Area _____ Lot 2

Tax Map 0014 Parcel 0071 Grid 0023

Zoning _____ Map Coordinates _____ Lot Size 10.41A

Property Owner's Name FRANCIS DANCYAN
Address 3055 HOBBS RD
City GLENWOOD State MD Zip Code 21738
Home Phone _____ Work Phone _____
Applicant's Name & Mailing Address, (if other than stated herein): _____

Existing Use 440
Proposed Use SEWAGE TREATMENT
Estimated Construction Cost \$ 35,000.00

Description of Work INSTALL ONE 500 GALLON
UNDERGROUND TANK

Occupant or Tenant _____

Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Contractor Company TRAVIS PROPANE
Contact Person SCOTT ANTONOWIAK
Address 1618 N. MAIN ST
City HAMPSTEAD State MD Zip Code 21074
License No. _____
Phone _____ Fax 410 274-2425

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

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
Height: _____	Water Supply: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ 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: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/>	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
Depth _____ Width _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
1 st floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
2 nd floor: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
No. of Bedrooms _____	
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 _____	

ROADSIDE TRACT PROTECT: NO

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.

Applicant's Signature TRAVIS PROPANE
Title/Company _____

Print Name SCOTT ANTONOWIAK
Date 3/11/11

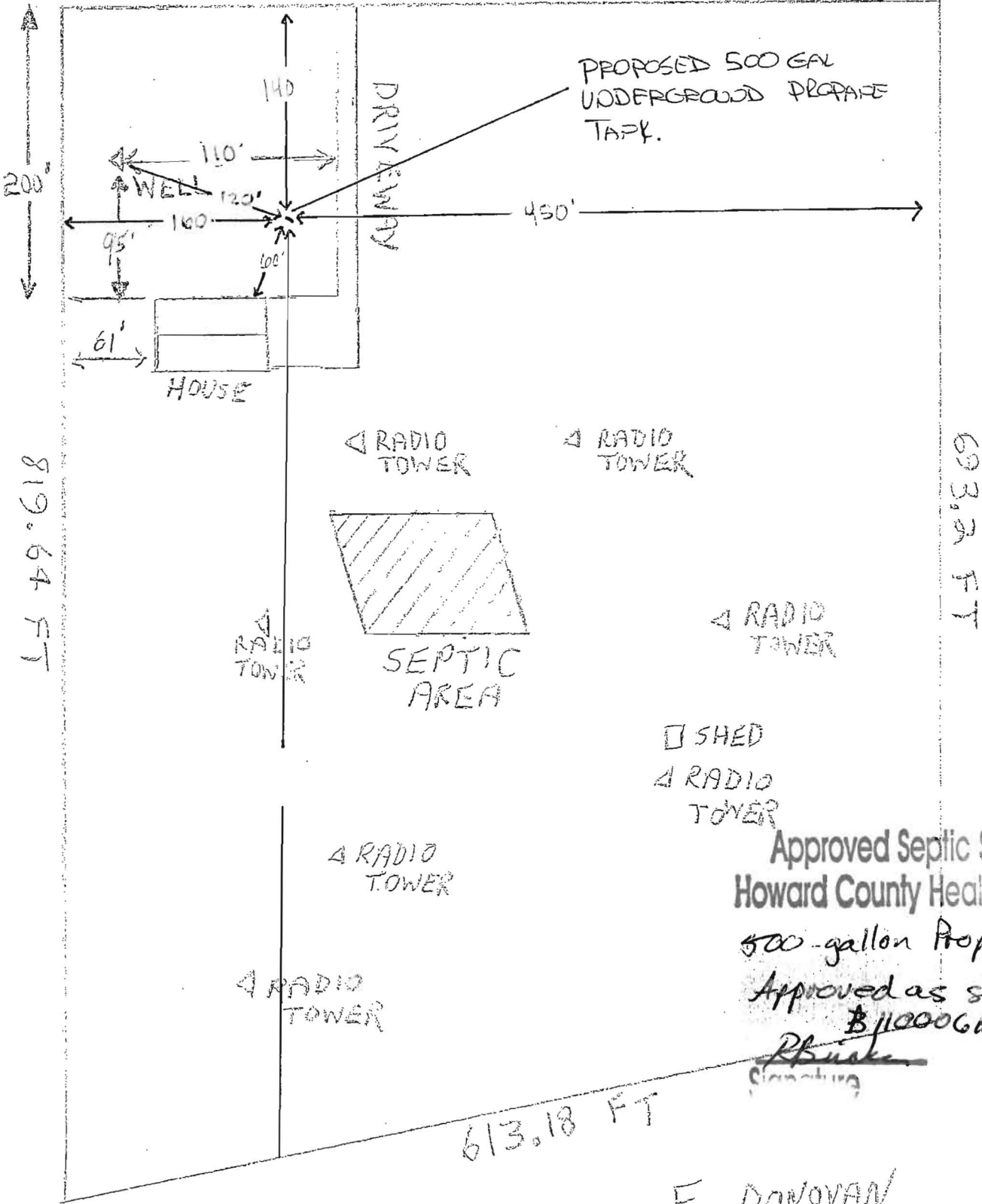
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
PLEASE WRITE NEATLY AND LEGIBLY.

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID #
Land Development, DPZ			Front: _____	Filing fee \$ _____
State Highways			Rear: _____	Permit fee \$ _____
Building Officials			Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ			Side St.: _____	Add'l per fee \$ _____
Health <u>3/10/2011</u> <u>Travis Propane</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? YES <input type="checkbox"/> NO <input type="checkbox"/>			Is Entrance Permit Required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due \$ _____
			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
			Lot Coverage for New Town Zone _____	Validation # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			SDP/Red-line approval date _____	Accepted by _____
ONE STOP SHOP: <input type="checkbox"/>				

HOBBS ROAD RIGHT OF WAY

NORTH

600 FT



Approved Septic System Plan
Howard County Health Department

500-gallon Propane Tank

Approved as shown

B110000610

Phuske
Signature

3/18/2011
Date

F. DONOVAN
3055 HOBBS RD
GLENWOOD MD 21735
410-483-9822

ONE INCH = 100 FT

HOBBS ROAD RIGHT OF WAY

NORTH

600 FT

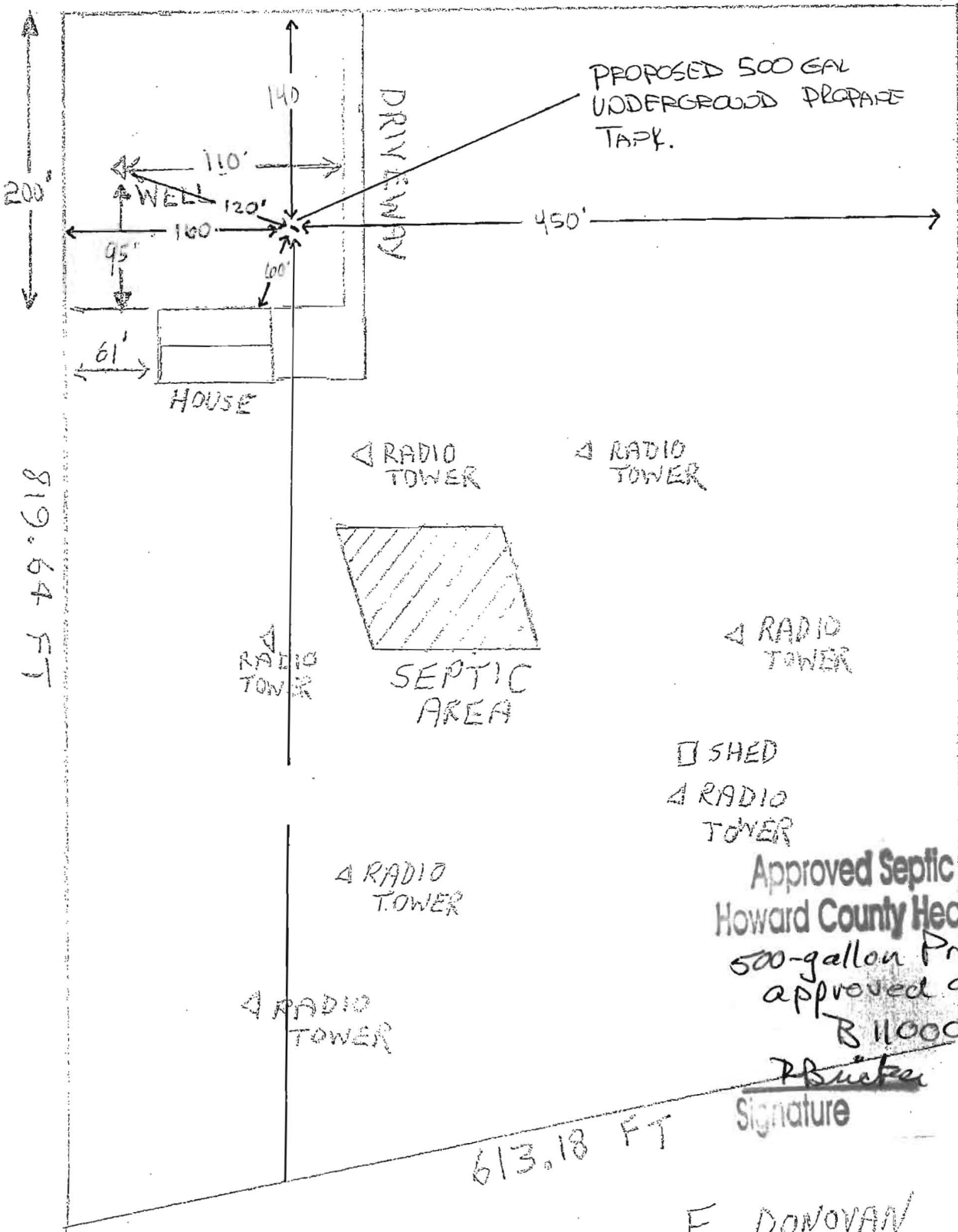
200'

819.64 FT

693.2 FT

613.18 FT

ONE INCH = 100 FT



PROPOSED 500 GAL UNDERGROUND PROPANE TANK.

DRIVEWAY

HOUSE

△ RADIO TOWER

△ RADIO TOWER

△ RADIO TOWER

SEPTIC AREA

△ RADIO TOWER

□ SHED
△ RADIO TOWER

△ RADIO TOWER

△ RADIO TOWER

Approved Septic System Plan
Howard County Health Department
500-gallon Propane tank
approved as shown

B11000601

P. Buckner
Signature

3/18/2011
Date

F. DONOVAN
3055 HOBBS RD
GLENWOOD MD 21735
410-489-9824