

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER
B07001503

Building Address 13287 Hunt Ridge
Ellicott City MD 21042
 Suite/Apt. #: _____ SDP/W/P/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot _____
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Jane & Kelly Biallowy
 Address 13287 Hunt Ridge
 City Ellicott City State MD Zip Code 21042
 Home Phone (410) 531-5922 Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon): _____
 Phone _____ Fax _____

Existing Use Pool Deck
 Proposed Use New Deck
 Estimated Construction Cost \$17,000
 Description of Work New 1150 sq ft
Wood Deck 57 x 10 x 3 on 9+
10 x 14 1/2 on 9+

Contractor Company Cedarbrook Decks, Patos, Inc
 Contact Person Neil Fortman
 Address 10232 Fountain School Rd
 City Jacob Bridge State MD Zip Code 21791
 License No. 97100
 Phone (410) 775-1114 Fax (410) 775-0030

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 DESCRIPTION - RESIDENTIAL

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

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> 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"/> No. of Bedrooms _____ Height: _____	Sprinkler system: <u>N/A</u> <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	_____ State Certified Modular _____ Manufactured Home
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____	

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.

[Signature]
 Applicant's Signature
President Cedarbrook Decks, Patos, Inc
 Title/Company

Neil Fortman
 Print Name
4/26/07
 Date

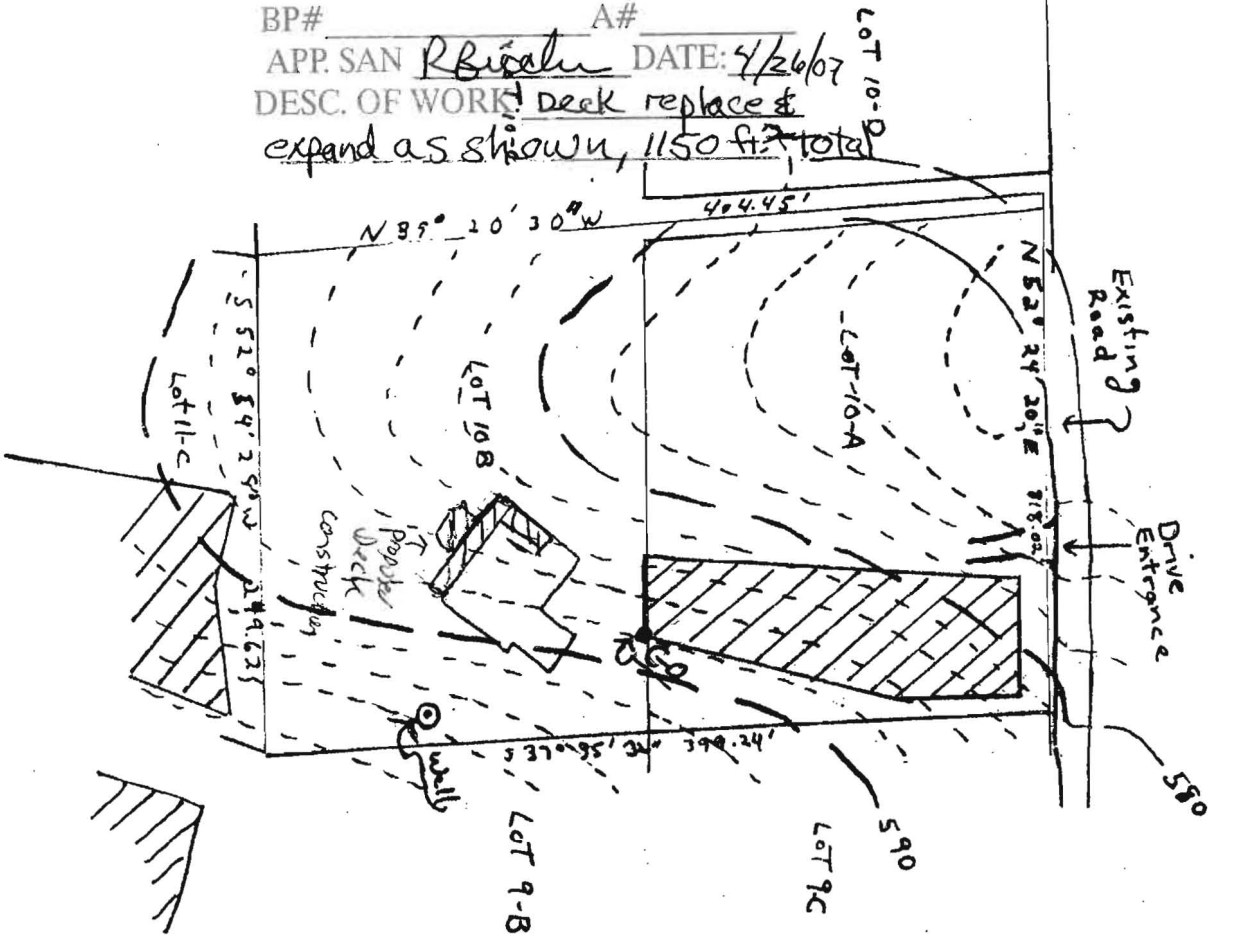
Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
 ** PLEASE WRITE NEATLY AND LEGIBLY. **
 - FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL	DPZ SETBACK INFORMATION	PROPERTY ID#:
✓ Land Development, DPZ			Front: _____ Filing fee \$ _____	
State Highways			Rear: _____ Permit fee \$ _____	
✓ Building Official			Side: _____ Excise tax \$ _____	
✓ Div. Engineering, DPZ			Side St.: _____ Add'l per. fee \$ _____	
Health <u>4/26/2007</u> <u>[Signature]</u>			All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Accepted by _____
Distribution of Copies - White: Building Official				
Green: LDD, DPZ				
Yellow: DED, DPZ				
Pink: Health				
Gold: SHA				

APPROVED

WALK-THRU BUILDING PERMIT

BP# _____ A# _____
 APP. SAN R. Biscala DATE: 4/26/07
 DESC. OF WORK: Deck replace & expand as shown, 1150 ft² total



1" = 100'
 Contour Interval = 2'

Distances to boundary lines

- 35' to Lot 9-B
- 100' to Lot 11-C
- 130' to Lot 10-C
- 250' to Road and NW boundary of Lot 10-A

Triadelphia Farm II, Lot 10A808
 13287 Hunt Ridge
 Ellersett City, MD 21043
 John W. & Kathleen B. Bradbury

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Section _____ Area _____ Lot _____
Tax Map _____ Parcel _____ Grid _____
Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name John + Kathy Bradbury
Address 13287 Hunt Ridge
City Ellicott City State MD Zip Code 21042
Home Phone (410) 531-5922 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon): _____
Phone _____ Fax _____

Existing Use Existing Deck removed
Proposed Use New Deck installed
Estimated Construction Cost \$ 32,680.00
Description of Work New pressure treated pine
Deck on side and rear of existing dwelling
(Approx. 1150 Sq Ft)

Contractor Company Cedarbrook Decks & Patio, Inc
Contact Person Neil Forthman cell # 410 984 5367
Address 10232 Fountain School Rd
City Union Bridge State MD Zip Code 21791
License No. 92150
Phone (410) 775-1444 Fax (410) 775-0030

Occupant or Tenant _____
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company _____
Contact Person _____
Address _____
City _____ State _____ Zip Code _____
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Neil Forthman
Applicant's Signature
President Cedarbrook Decks & Patio, Inc
Title/Company

Neil Forthman
Print Name
4/26/07
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**
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Dev. Engineering, DPZ			
Health	<u>4/26/07</u>	<u>RBucher</u>	
Fire Protection			
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			
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Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
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 # _____
SDP/Red-line approval date _____	Validation # _____
Accepted by _____	

