

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

Building Address 6809 Koandah Gardens
Highland MD 20777
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision Koandah Gardens
 Section _____ Area _____ Lot 18
 Tax Map 34 Parcel 0078 Grid 0022
 Zoning _____ Map Coordinates _____ Lot size 1.03 AC

Property Owner's Name Sasho Cirovski
 Address 6809 Koandah Gardens
 City Highland State MD Zip Code 20777
 Home Phone 410 591-2403 Work Phone 240-417-9484
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use SFD.
 Proposed Use SFD w/ Pavilion and Pergola
 Estimated Construction Cost \$ 30,000
 Description of Work 23 x 18 Pav Pavilion
with gas fireplace and a 14 x 18
Pergola with a built-in gas
grill.

Contractor Company Robson's Remodeling LLC
 Contact Person Craig Robson
 Address P.O. Box 63
 City Highland State MD Zip Code 20777
 License No. 42108
 Phone 301 854 0521 Fax 301 854 0542

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

Engineer or Architect Company David Wallace
 Contact Person David Wallace
 Address P.O. Box 4279
 City Annapolis State MD Zip Code 21403
 Phone 410 544-1225 Fax 410 216 7032

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

Building Characteristics	Utilities
SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ _____ Public <input checked="" type="checkbox"/> Private
1st floor: _____	Sewage Disposal: _____ _____ Public <input checked="" 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 checked="" type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input checked="" 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 checked="" type="checkbox"/> _____ NFPA #13D _____ NFPA #13R Other: _____
Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	
Other Structure: <u>Pavilion Pergola</u> Dimensions: <u>23 x 18 / 14 x 18</u> Footings: <u>Poured pier + post</u> Roof Height: _____	
_____ State Certified Modular _____ 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 ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature J. Craig Robson
 Title/Company Owner/Robson's Remodeling

Print Name J. Craig Robson
 Date 4/10/2013

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**

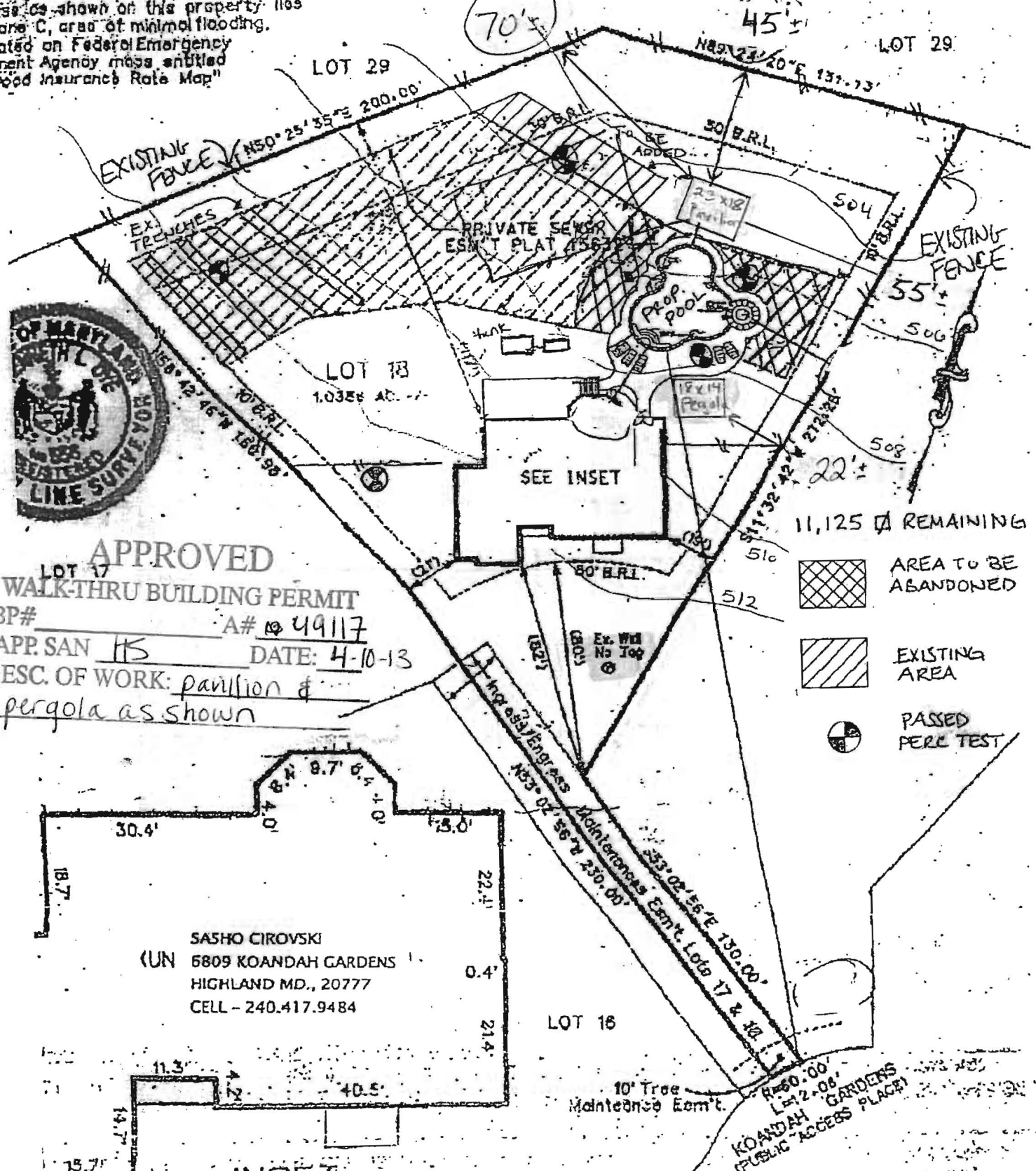
** PLEASE WRITE NEATLY AND LEGIBLY. **
- FOR OFFICE USE ONLY -

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 \$ _____
Dev. Engineering, DPZ			Side St: _____	Add'l per. fee \$ _____
Health	<u>4/10/13</u>	<u>Heidi Scott</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 # _____
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	Lot Coverage for NewTown Zone _____	
T:Normal/PERMIT.FRM			SDP/Red-line approval date _____	Accepted by _____
			Yellow: DED, DPZ	Gold: SHA
			Pink: Health	

FLOOD CERTIFICATION

is as shown on this property lies
 are C, area of minimal flooding.
 ated on Federal Emergency
 ment Agency maps entitled
 Flood Insurance Rate Map"

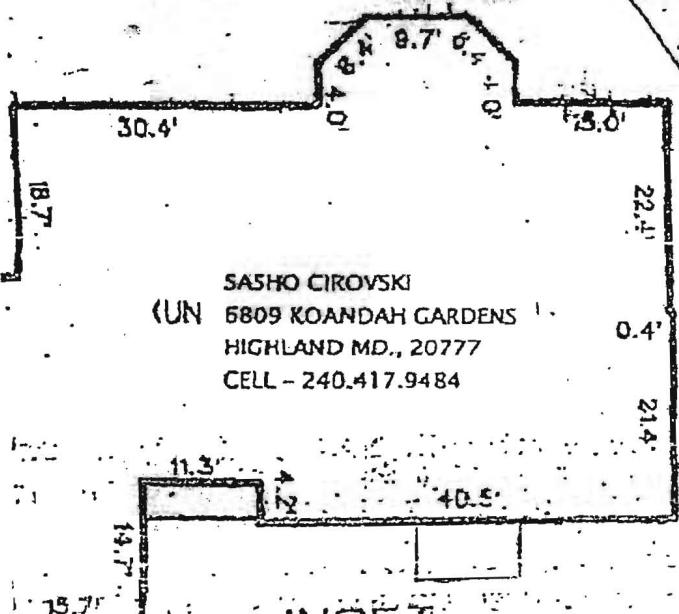
KOANDAH GARDENS ESTATES



APPROVED

WALK-THRU BUILDING PERMIT
 BP# _____ A# 49117
 APP. SAN HS DATE: 4-10-13
 DESC. OF WORK: pavilion &
 pergola as shown

- 11,125 sq REMAINING
- AREA TO BE ABANDONED
- EXISTING AREA
- PASSED PERC TEST



INSET
 1" = 20'

SASHO CIROVSKI
 (UN) 6809 KOANDAH GARDENS
 HIGHLAND MD., 20777
 CELL - 240.417.9484

Front: PER FLAT
 Side: 10'
 Rear: 30'

00147884

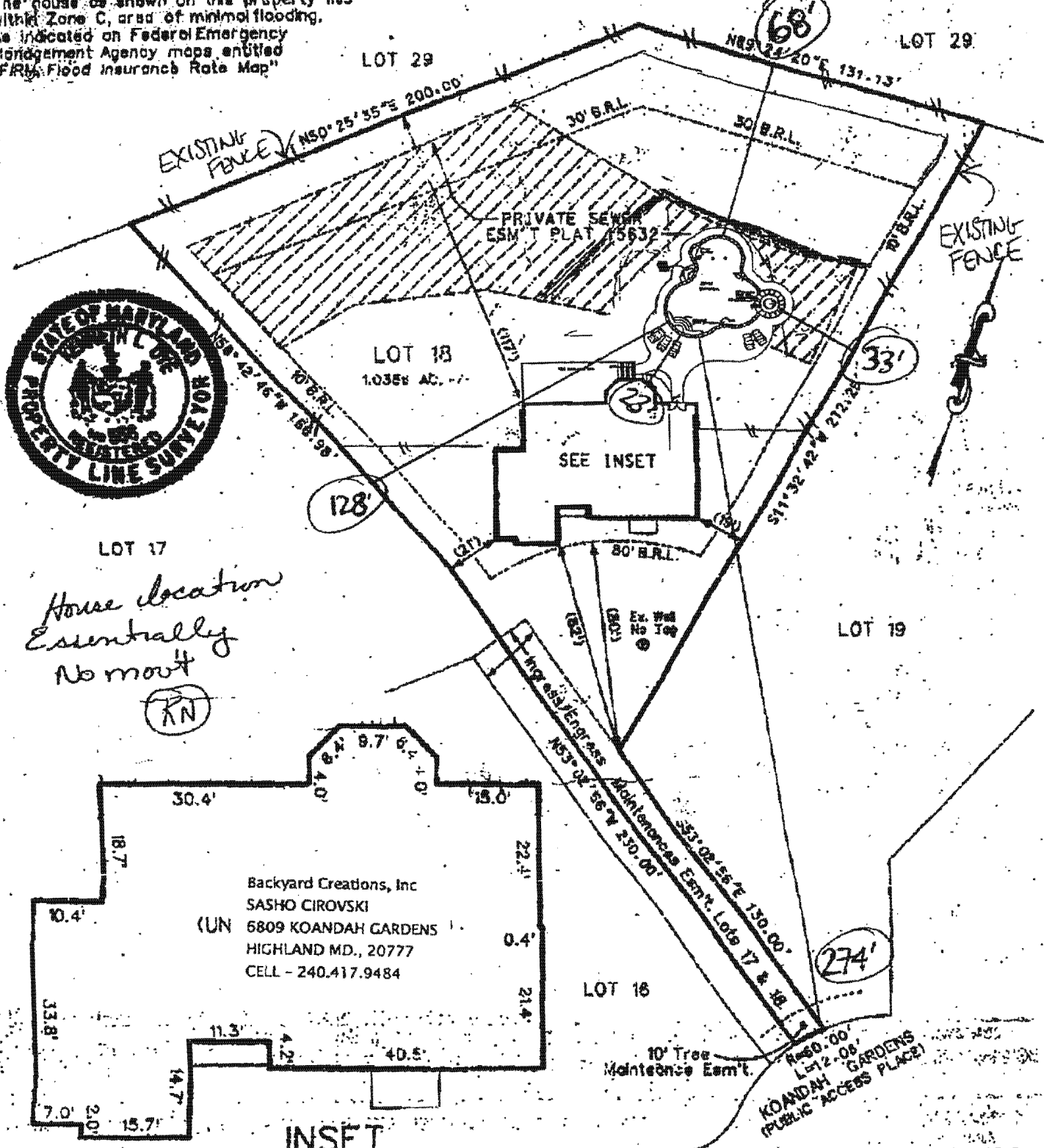
OWN WITHIN (10') ARE COMPUTED TO AN ACCURACY OF PLUS OR MINUS ONE FOOT.
 RT WAS FURNISHED. THIS PROPERTY IS SUBJECT TO ALL APPLICABLE EASEMENTS, RIGHTS-OF-WAY,
 & THOSE DOCUMENTS WHICH THE UNDERSIGNED HAS NOT BEEN PROVIDED.

Job No. 711-08-50
 Scale 1" = 50'

FLOOD CERTIFICATION

The house as shown on this property lies within Zone C, area of minimal flooding, as indicated on Federal Emergency Management Agency maps entitled "FIRM Flood Insurance Rate Map"

KOANDAH GARDENS ESTATES



*House location
Essentially
No movt*

(KN)

Front: PER PLAT
Side: 10'
Rear: 30'

Job No. 711-08-50

Scale: 1" = 50'

WALL CHECK DRAWING

PLEASE NOTE:

1) DIMENSIONS SHOWN WITHIN "()" ARE COMPUTED TO AN ACCURACY OF PLUS OR MINUS ONE FOOT.

2) NO TITLE REPORT WAS FURNISHED. THIS PROPERTY IS SUBJECT TO ALL APPLICABLE EASEMENTS, RIGHTS-OF-WAY, COVENANTS AND THOSE DOCUMENTS WHICH THE UNDERSIGNED HAS NOT BEEN PROVIDED.

3) THIS PLAT IS A BENEFIT TO A CONSUMER ONLY INsofar as it is required by a LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENTS IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING.

4) THIS PLAT IS NOT TO BE RELIED UPON FOR THE CONSTRUCTION OF THE PROPERTY.