

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
BO6001202

Building Address <u>2710 Woodridge Ct.</u> Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract _____ Subdivision <u>WYNFIELD</u> Section _____ Area _____ Lot <u>7</u> Tax Map _____ Parcel _____ Grid _____ Zoning _____ Map Coordinates _____ Lot size _____	Property Owner's Name <u>Rick & Amy Federchak</u> Address <u>2710 Woodridge Ct</u> City <u>West Friendship</u> State <u>MD</u> Zip Code <u>21794</u> Home Phone <u>410 489 4953</u> Work Phone <u>301 224 4316</u> Applicant's Name & Mailing Address, (if other than stated hereon): <u>614-7009</u> Phone _____ Fax _____
Existing Use <u>PRIMARY RESIDENCE</u> Proposed Use <u>PRIMARY RESIDENCE</u> Estimated Construction Cost \$ _____ Description of Work <u>New family room and kitchen</u> <u>2 story addition w/entrance</u> <u>to kitchen & white cabinets +</u>	Contractor Company <u>Morgan Run</u> Contact Person <u>John Kitchen</u> Address <u>4250 Poole Rd</u> City <u>Finksburg</u> State <u>MD</u> Zip Code <u>21048</u> License No. <u>MH10244220 MH1024 0416</u> Phone <u>410 715 7945</u> Fax _____
Occupant or Tenant _____ Contact Name <u>Rick & Amy Federchak</u> Address <u>2710 Woodridge Ct</u> City <u>West Friendship</u> State <u>MD</u> Zip Code <u>21794</u> Phone <u>410 489 4953</u> Fax _____	Engineer or Architect Company _____ Contact Person <u>Susan Keeney</u> Address _____ City _____ State _____ Zip Code _____ Phone <u>410 833 1300</u> Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities	Building Characteristics	Utilities
Height: _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private	SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private	1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: <input type="checkbox"/> Public <input checked="" 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"/>	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: <u>TOTAL 5 BEAMS</u>	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"/>	Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ <u>Currently 3 beam - deleting</u>	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: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression # of Heads _____	Other Structure: <u>Adding 3</u> Dimensions: _____ Footings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Sprinkler system: N/A <input 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.

Applicant's Signature Amy L.K. Federchak Print Name Amy L.K. Federchak
 Title/Company _____ Date 7-7-06

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	<u>10/12/06</u>	<u>Brian Baker</u>		Side St.: _____	Add'l per. fee \$ _____
Health				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>1711</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:				Lot Coverage for NewTown Zone _____	
White: Building Official				SDP/Red-line approval date _____	Accepted by _____
Green: LDD, DPZ				Yellow: DED, DPZ	
Pink: Health				Pink: Health	
Gold: SHA				Gold: SHA	

WYNTRELL SECTION 3
3RD ELECTION DISTRICT
HOWARD COUNTY MD

SCALE

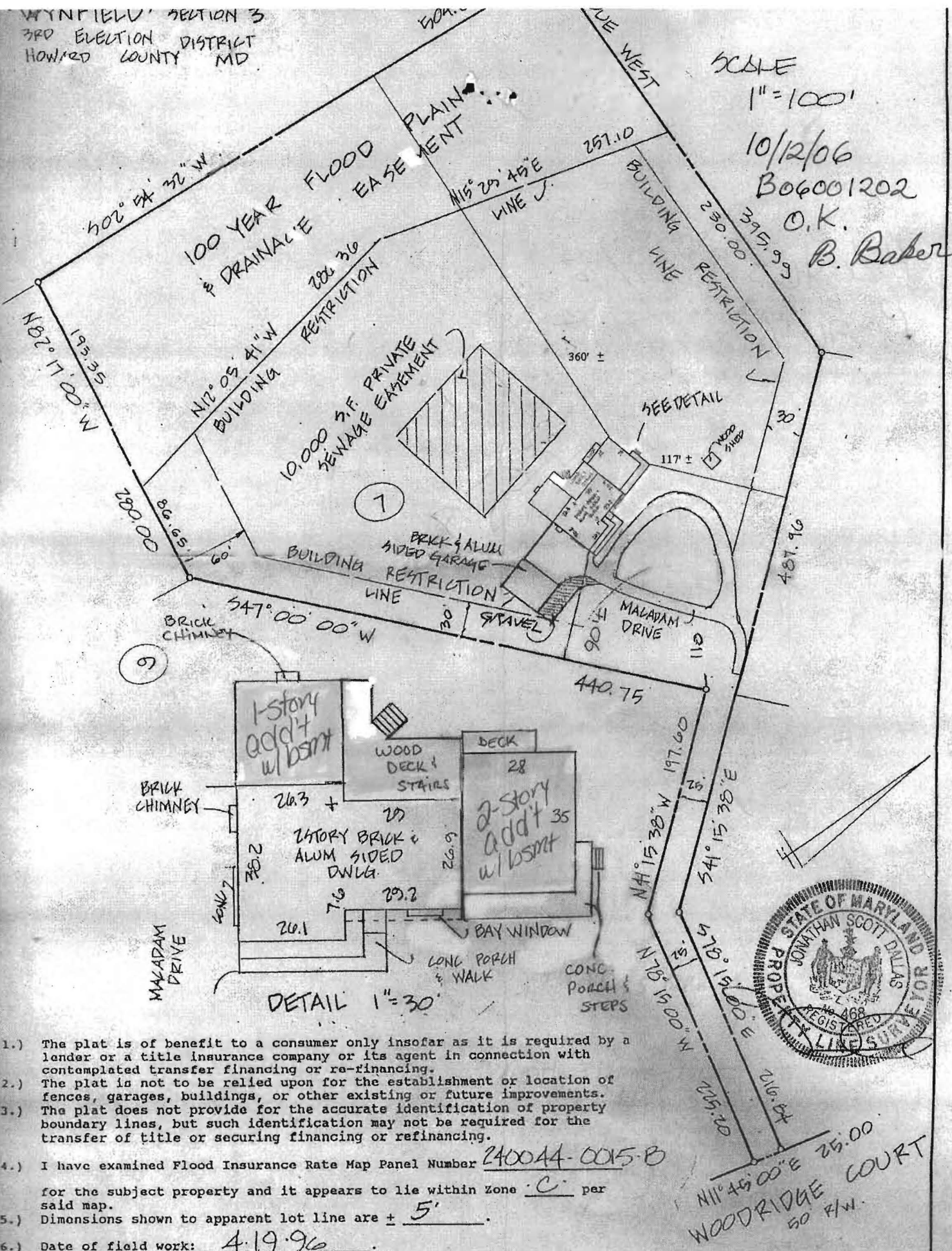
1" = 100'

10/12/06

B06001202

O.K.

B. Baker



9

7

DETAIL 1" = 30'



- 1.) The plat is of benefit to a consumer only insofar as it is required by a lender or a title insurance company or its agent in connection with contemplated transfer financing or re-financing.
- 2.) The plat is not to be relied upon for the establishment or location of fences, garages, buildings, or other existing or future improvements.
- 3.) The plat does not provide for the accurate identification of property boundary lines, but such identification may not be required for the transfer of title or securing financing or refinancing.
- 4.) I have examined Flood Insurance Rate Map Panel Number 240044-0015-B for the subject property and it appears to lie within Zone C per said map.
- 5.) Dimensions shown to apparent lot line are ± 5'.
- 6.) Date of field work: 4.19.96.

LOCATION DRAWING

WOODRIDGE COURT
50' R/W.
N11° 45' 00" E 25.00
S78° 15' 00" E 92.522
S54° 15' 38" E 117.60
N41° 15' 38" W 197.60
440.75
119
90'H
STAVEL
30
BRICK CHIMNEY
547° 00' 00" W
60'
86.65
280.00
N12° 05' 41" W
BUILDING RESTRICTION
288.36
115° 25' 45" E
LINE J.
257.10
BUILDING RESTRICTION
230.00
395.99
487.96
30
SEE DETAIL
117 ±
360' ±
195.35
N87° 17' 00" W
500.00
TUE WEST

In & Drawing