

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER
 B08001102

Building Address 2633 TURF VALLEY RD.
ELLICOTT CITY MD
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot 5
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name ERIC + INGRID HOLZMAN
 Address 2633 TURF VALLEY RD
 City ELLICOTT CITY State MD Zip Code _____
 Phone 410-480-0714 Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone _____ Fax _____

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ 30,000.00
 Description of Work 24x10 ADDITION
ON REAR OF HOUSE, EXTENDING
MASTER BEDROOM & BATHROOM
MOVE CLOSETS

Contractor Company BETHRENS CONTRACTORS
 Contact Person DAVE BETHRENS
 Address 935 HOODSMILL RD.
 City WOODBRIDGE State MD Zip Code 21797
 License No. MHC 39781
 Phone 410 515 8255 Fax 410-549-2299

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

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

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics
 Height: 8'
 No. of stories: 1
 Gross area, sq. ft. per floor: _____
 Use group: 240 sqft
 Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities
 Water Supply:
 Public
 Private
 Sewage Disposal:
 Public
 Private
 Electric Yes No
 Gas Yes No
 Heating System:
 Electric Oil
 Natural Gas
 Propane Gas
 Sprinkler system: N/A
 Full
 Partial
 Other Suppression
 # of Heads

Building Characteristics
 SF Dwelling SF Townhouse
 Depth Width
 1st floor: _____
 2nd floor: _____
 Basement: _____
 Finished Basement Unfinished Basement
 Crawl space Slab on Grade
 No. of Bedrooms: _____
 Height: _____
 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 Height: _____
 State Certified Modular
 Manufactured Home

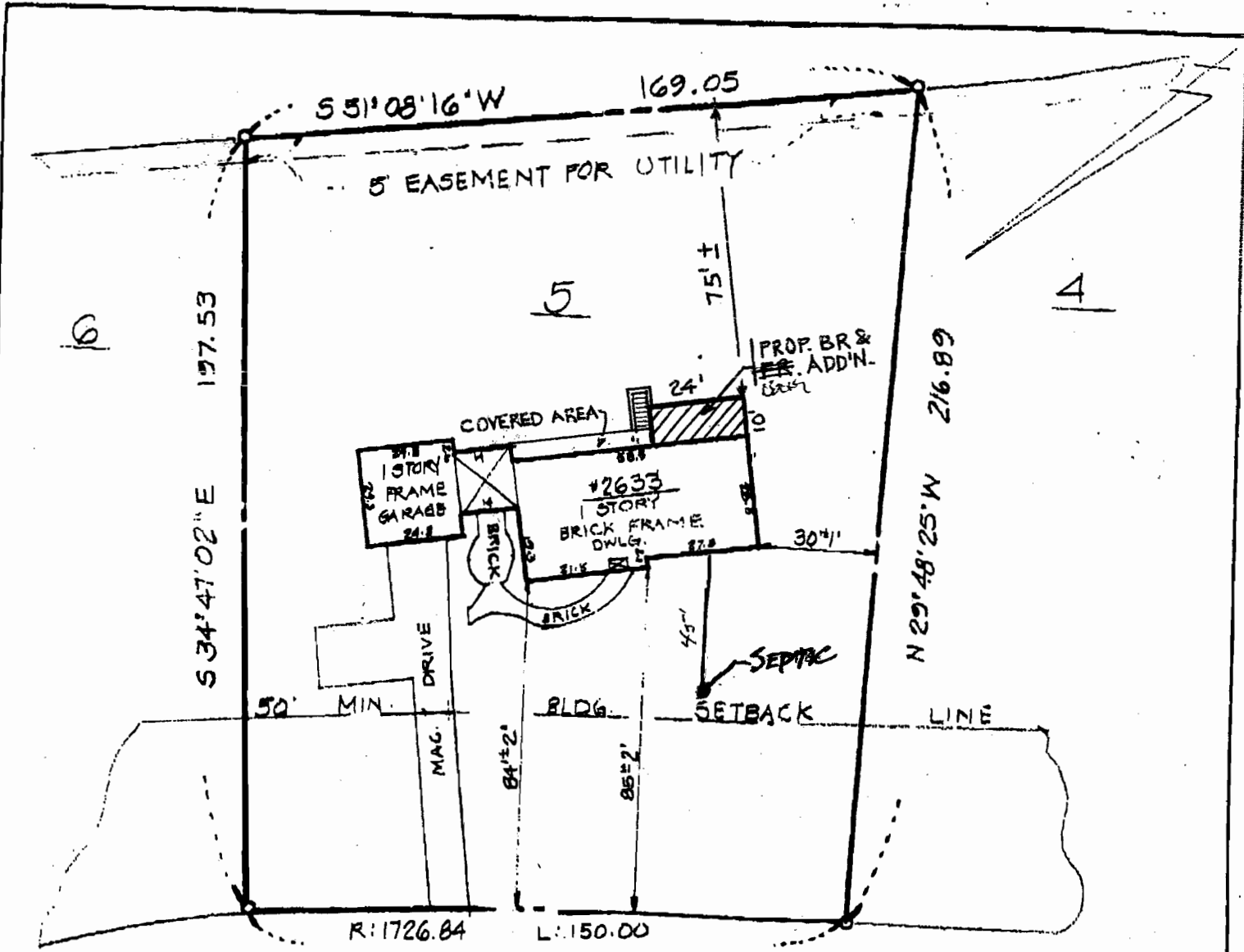
Utilities
 Water Supply:
 Public
 Private
 Sewage Disposal:
 Public
 Private
 Electric Yes No
 Gas Yes No
 Heating System:
 Electric Oil
 Natural Gas
 Propane Gas
 Sprinkler system: N/A
 NFPA #13D
 NFPA #13R
 Other:

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 TO THIS; (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 ON TO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature DAVID BETHRENS Print Name DAVID BETHRENS
OWNER BETHRENS CONTRACTORS Date 4/17/08
 Title/Company _____

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>4/17/08</u>	<u>[Signature]</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 Yellow: DED, DPZ Pink: Health Gold: SHA			Lot Coverage for Newtown Zone _____	
1 Normal PERMIT FRM			SDP/Red-line approval date _____	Accepted by _____



TURF VALLEY ROAD (60R/W)

NOTE: ALSO KNOWN AS LOT 5 BLOCK B AS SHOWN ON PLAT OF "TURF VALLEY" RECORDED IN HOWARD CO MD. IN PLATBOOK 9 FOLIO 4.

APPROVED
 WALKTHRU BUILDING PERMIT
 BP# B08001102 AM 506 206
 APP. S. V. [Signature] DATE: 4/17/08

SCALE: 1" = 40'

24' x 10' extending ~~to~~ ex. bathroom + master bedroom
 HOLSMAN RESIDENCE
 2633 - TURF VALLEY RD
 HOWARD COUNTY, MD. 21042 J.V.HART