

Record Detail * (This section is required.)

Permit Type	Permit Number	Opened Date
Building/Residential/Misc/Deck	B25000604	02/15/2025
Description of Work		
SFD/CONSTRUCT 20'8" X 17'8" DECK WITH STAIRS TO GRADE. REPLACE EXISTING		

Online BP.

2/19/25

[check spelling](#)

Address * (This section is required.)

Search Reset Clear Get Parcel & Owner

Street #	Street Name	Street Type	
13136	ISLE OF MANN	WAY	
Unit Type	Unit #	X Coordinate	Y Coordinate
-Select-		-76.96141	39.18692
City	State	Zip Code	Primary
HIGHLAND	MD	20777	Yes

Parcel * (This section is required.)

Search Reset Clear Get Address & Owner

GIS ID *	Parcel	Parcel Area	Land Value	Improved Value	Exemption Value	Plan Area
853512	373	2.13	276300	634000	357700	RURAL
Legal Description						
LOT61 2.130AR S 2 []13136 ISLE OF MANN []HIGHLAND LAKE						

[check spelling](#)

Block	Lot	Census Tract	Council Dist	Inspection Dist	Supervisor Dist	Map #	DAP Zone
	61	605101	5				
Plan Area	State Tax Id		Subdivision Name				
	1405383447		HIGHLAND LAKE				
Section	Area		Tax Map				
			34				
Grid	Zoning District		ADC Map				
34-22	RR-DEO		5051-G1				
SDP No.	Final Plan No.		WP File No.				
Record Plat No.	WS Contract No.		FDP No.		Primary		
3875					Yes		
Owner Occupied	Year Built		Historic District				
<input type="radio"/> Yes <input type="radio"/> No	1987		<input type="radio"/> Yes <input checked="" type="radio"/> No				
Historic District Registry No.	Stat Area		Flood Plain				
	5-04A		<input type="radio"/> Yes <input checked="" type="radio"/> No				
Building No							

Owner * (This section is required.)

Search Reset Clear

Name *
KEFFE
Address Line 1
13136 ISLE OF MANN
Address Line 2
Address Line 3

Approved Septic System Plan
Howard County Health Department

D. Bernard 2-19-25
Signature Date

Any future permits will require percolation testing

Mail City
HIGHLAND
Mail State
MD
Mail Zip Code
20777
Phone
410-977-5705
Primary
Yes
E-mail
jim@allanhomes.com
Cell Number Fax Number

Professionals (This section is not required.)

License # * Business Name
08010077138 ALLAN HOMES UNLIMITED INC
License Type * First Name Middle Name Last Name
MHIC Ind JIM BRUMSTEAD
Primary Address Line 1
Yes 10260 OLD COLUMBIA ROAD
Address Line 2

City State ZIP Code
COLUMBIA MD 21046-0000
Phone 1 Phone 2 Fax
4109775705
E-mail
JIM@ALLANHOMES.COM

Applicant (This section is not required.)

Search As Owner As Lic. Prof As Contact

Type * First Name MI Last Name
Applicant JIM BRUMSTEAD
Relationship Full Name
--Select--
Primary Organization Name
Yes ALLAN HOMES UNLIMITED INC
Street Address
10260 OLD COLUMBIA ROAD
Address Line 2

City State Zip Code
COLUMBIA MD 21046-0000
Phone Cell Fax
4109775705
E-mail *
JIM@ALLANHOMES.COM

Addtl Info

Est Construction Cost * Housing Units * Number of Buildings * Public Owned
12000 0 0 No
Construction Type
--Select--

MISC PERMIT INFO

MISCELLANEOUS PERMIT INFORMATION

Capital Project-No Fee * Capital Project Number Fee Exempt * Roadside Tree Project Permit * Roadside Tree Project Permit #
 Yes No (Text) Yes No Yes No (Text)
Existing Use * Water Sewage Expiration Date
SFD Private Private 8/18/2025

Submit

Cancel