

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER
B07001718

Building Address 13575 JULIA MANOR WAY
WEST FRIENDSHIP, MD 21794

Property Owner's Name ASIF MAHMUD
Address Same

Suite/Apt. #: _____ SDP/WP/Petition #: _____

Census Tract PLAT # 16835 Subdivision PADDOCKS EAST
Section _____ Area _____ Lot 6

City _____ State _____ Zip Code _____

Tax Map 22 Parcel 7 Grid _____

Home Phone 301-728-1148 Work Phone _____

Zoning _____ Map Coordinates _____ Lot size _____

Applicant's Name & Mailing Address, (if other than stated hereon):

Phone 301-728-1148 Fax _____

Existing Use _____
Proposed Use DECK 40X30

Contractor Company HOME OWNER

Estimated Construction Cost \$ 12000

Contact Person _____

Description of Work DECK W STEPS

Address _____

Occupant or Tenant OWNER OCCUPIED

City _____ State _____ Zip Code _____

Contact Name ASIF MAHMUD

License No. _____

Address SAME

Phone _____ Fax _____

City _____ State _____ Zip Code _____

Phone 301-728-1148 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: _____ Public _____ Private _____
No. of stories: _____	Sewage Disposal: _____ Public _____ Private _____
Gross area, sq. ft. per floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ Wood Frame _____ State Certified Modular _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
	Sprinkler system: N/A <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 _____ Private <input checked="" type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
2nd floor: _____	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Basement: _____	Gas Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Finished Basement <input checked="" type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input checked="" type="checkbox"/>	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/>
No. of Bedrooms <u>6</u>	Natural Gas <input checked="" type="checkbox"/>
Height: <u>10'</u>	Propane Gas <input type="checkbox"/>
Multi-family dwellings: _____	Sprinkler system: N/A <input type="checkbox"/>
No. of efficiency units: <u>n/a</u>	NFPA #13D _____
No. of 1 BR units: _____	NFPA #13R _____
No. of 2 BR units: _____	Other: _____
No. of 3 BR units: _____	
Other Structure: _____	
Dimensions: _____	
Footings: _____	
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 _____

Print Name ASIF MAHMUD

Title/Company _____

Date 5/8/07

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

** PLEASE WRITE NEATLY AND LEGIBLY. **

FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Dev. Engineering, DPZ		
Health	<u>5/9/2007</u>	<u>[Signature]</u>
Fire Protection		

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	Filing fee \$ _____
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St.: _____	Add'l per. fee \$ _____
All minimum setbacks met?	TOTAL FEES \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # <u>cash</u>
Historic District?	Validation # _____
YES <input type="checkbox"/> NO <input type="checkbox"/>	
Lot Coverage for NewTown Zone _____	
SDP/Red-line approval date _____	Accepted by _____

Is Sediment Control approval required prior to issuance?
YES NO

CONTINGENCY CONSTRUCTION START:

ONE STOP SHOP:

Distribution of Copies _____

White: Building Official

Green: LDD, DPZ

Yellow: DED, DPZ

Pink: Health

Gold: SHA

T:\forms\PERMIT.FRM

MARYLAND STATE GRID MERIDIAN (NAD83/91)

APPROVED

WALK-THRU BUILDING PERMIT

BP# B07001718 A# 515228-F

APP. SAN GAC DATE: 5/9/2007

DESC. OF WORK: 40x20 DECK
ON BACK OF HOUSE 3 sets of
steps to grade

JULIA MANOR WAY
50' RIGHT-OF-WAY (ACCESS STREET)

10' PUBLIC TREE MAINTENANCE
& UTILITY EASEMENT
PLAT NO. 16835

LOT 5

N 35°54'52"E 177.03'
10' BRL

SEPTIC EASEMENT

N 54°05'08"W 230.31'

R=340.00'

L=196.54'

50' BRL

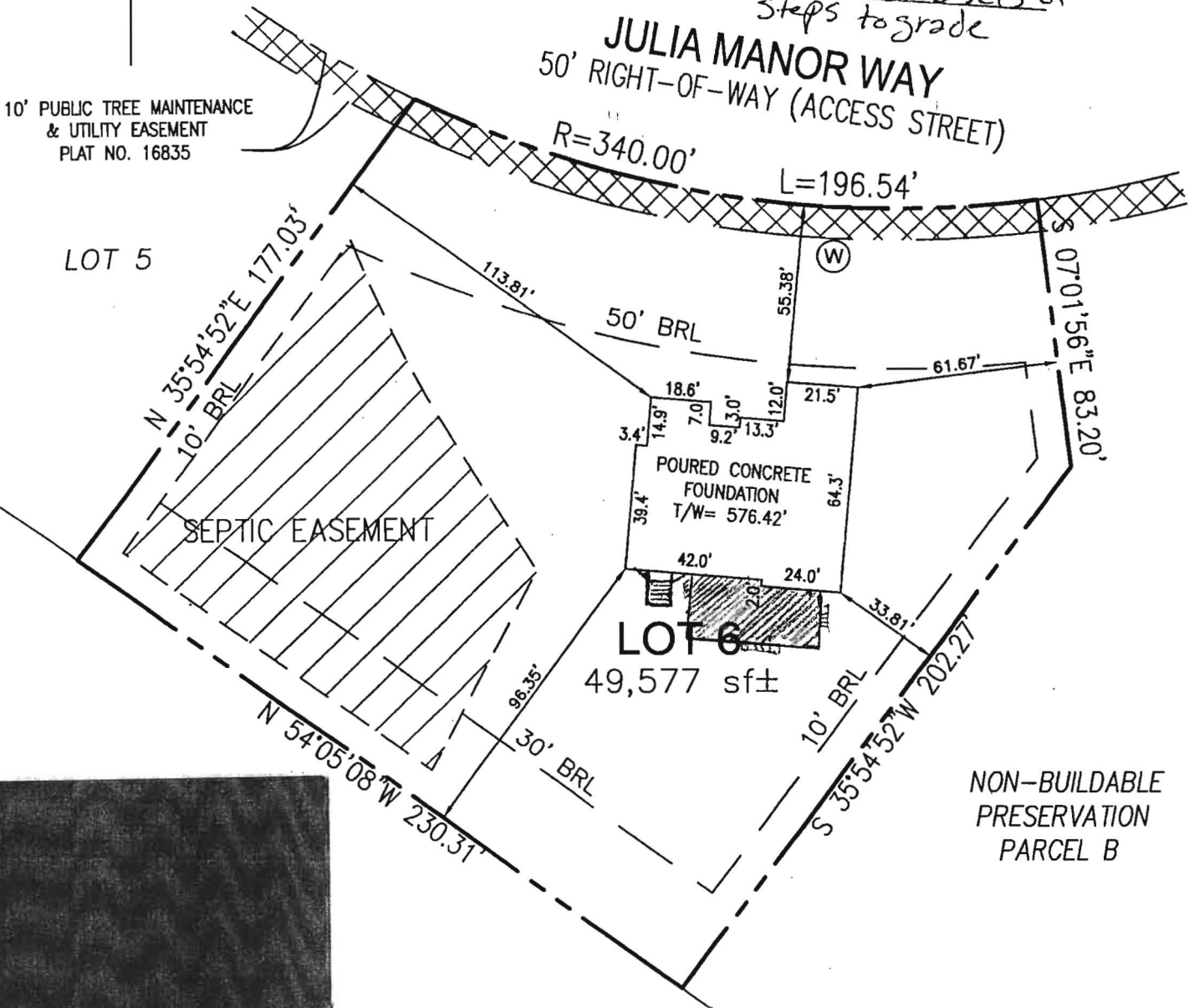
LOT 6
49,577 sft±

30' BRL

10' BRL

NON-BUILDABLE
PRESERVATION
PARCEL B

POURED CONCRETE
FOUNDATION
T/W= 576.42'



6-8964

DEPARTMENT OF INSPECTIONS, LICENSES AND PERMITS
HOWARD COUNTY PERMITS DIVISION
PERMITS (410) 315-2425 INSPECTIONS (410) 313-1810
AUTOMATED INFORMATION (410) 313-3800

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER **KB**
B-00152376

Building Address **13575 Julia Manor Wy**
West Friendship 21794
Sub/Apt #: **SDP/W/P** Petition #: **04 67**
Census Tract **603000** Subdivision **Paddock East**
Section **TAX ID # 03-341798** Area **6** Lot **6**
Tax Map **22** Parcel **7** Grid **8**
Zoning **953** Map Coordinates **953** Lot size

Property Owner's Name **Pulte Homes Inc**
Address **1501 S. Edgewood St**
City **Baltimore** State **Md** Zip Code **21227**
Home Phone **410 644 5203** Work Phone
Applicant's Name & Mailing Address, (if other than stated hereon):
Super - Mike Weiner
Phone **443 865 5974** Fax

Existing Use **VACANT LOT**
Proposed Use **SFD**
Estimated Construction Cost \$ **250,000**
Description of Work **CONSTRUCT "Compan"**
W/5th BR, 2 story, full bsmt, 9R,
4 FB, 1 HB, 1 FP, 3 CAR (SPIC) OPT.
In LL + BATT + WALKER EXIT

Contractor Company **Pulte Homes Inc**
Contact Person **Dianna Wenzlaff**
Address **1501 S. Edgewood St**
City **Balt** State **Md** Zip Code **21227**
License No. **516** Phone **516** Fax

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
Height: _____
No. of stories: _____
Gross area, sq. ft. per floor: _____
Use group: _____
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
1st floor: **64** Depth **44** Width **44**
2nd floor: **34** **46**
Basement: **64** **66**
Finished Basement Unfinished Basement
Crawl space Slab on Grade
No. of Bedrooms: **5**
Height: **22**
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 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 **Dianna Wenzlaff**
Title/Company **Pulte Homes**

Print Name **DIANNA WENZLAFF**
Date **2 24 05**

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

AGENCY	DATE	SIGNATURE APPROVAL
Land Development, DPZ		
State Highways		
Building Official		
Civ. Engineering, DPZ		
Health	3/3/05	[Signature]
Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		
Distribution of Copies:	White: Building Official	Green: LDD, DPZ
	Yellow: DED, DPZ	Pink: Health
		Gold: SHA

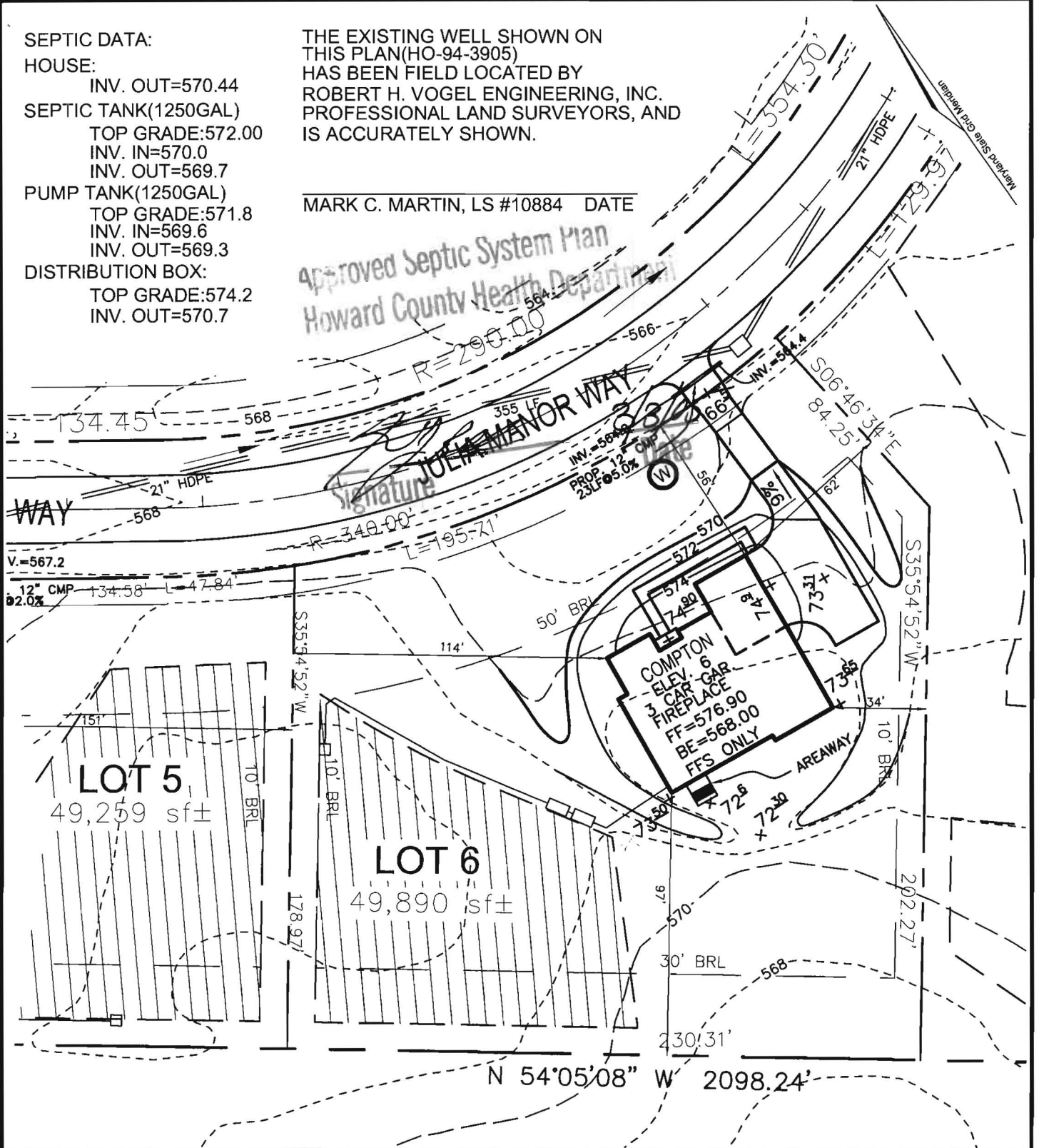
DPZ SETBACK INFORMATION	PROPERTY ID#
Front: _____	Filing fee \$ 100.00
Rear: _____	Permit fee \$ _____
Side: _____	Excise tax \$ _____
Side St: _____	Add'l per. fee \$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Entrance Permit required? 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 New Town Zone _____	Check \$ 102.40
SDP/Red-line approval date _____	Validation \$ 54.91
Accepted by [Signature]	

SEPTIC DATA:
 HOUSE:
 INV. OUT=570.44
 SEPTIC TANK(1250GAL)
 TOP GRADE:572.00
 INV. IN=570.0
 INV. OUT=569.7
 PUMP TANK(1250GAL)
 TOP GRADE:571.8
 INV. IN=569.6
 INV. OUT=569.3
 DISTRIBUTION BOX:
 TOP GRADE:574.2
 INV. OUT=570.7

THE EXISTING WELL SHOWN ON
 THIS PLAN(HO-94-3905)
 HAS BEEN FIELD LOCATED BY
 ROBERT H. VOGEL ENGINEERING, INC.
 PROFESSIONAL LAND SURVEYORS, AND
 IS ACCURATELY SHOWN.

MARK C. MARTIN, LS #10884 DATE

Approved Septic System Plan
 Howard County Health Department



SCALE 1"=50'
 DRAWN BY JCO
 CHECKED BY JCO
 DATE FEBRUARY, 2005
 W. O. # 2034058
 SHEET# 1 OF 1

TAX MAP 22
 3RD ELECTION DISTRICT

PULTE HOMES
 PADDOCKS EAST
 LOT 6

PARCEL 7
 HOWARD COUNTY, MARYLAND



**ROBERT H. VOGEL
 ENGINEERING, INC.**

ENGINEERS • SURVEYORS • PLANNERS
 8407 MAIN STREET TEL: 410.461.7666
 ELLICOTT CITY, MD 21043 FAX: 410.461.8961

REV.2/28/05