

**HOWARD COUNTY  
PERMIT APPLICATION**

**PERMIT NUMBER**

B00134700

Building Address 4575 Manor Lane  
Ellicott City, MD  
Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
Census Tract 6030 Subdivision Doughoregan MAN  
Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_  
Tax Map 29 Parcel 4 Grid 5  
Zoning RC Map Coordinates 11 C 13 Lot size \_\_\_\_\_

Property Owner's Name Mike/Lois Knecht  
Address 4575 Manor Lane  
City Ellicott City State MD Zip Code 21043  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Applicant's Name & Mailing Address, (if other than stated hereon): \_\_\_\_\_

Existing Use None SFD  
Proposed Use Kitchen ext. to SFD  
Estimated Construction Cost \$ 30,000  
Description of Work All Room addition  
1682 sq ft as kitchen extension

Contractor Company F&L Const Co  
Contact Person Frank Lowman  
Address 333 Broadview Ave  
City Annapolis State MD Zip Code 21403  
License No. \_\_\_\_\_  
Phone 410-647-5520 Fax 547-9100

Occupant or Tenant owners  
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	Utilities
Height: _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
No. of stories: <u>1</u>	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
Gross area, sq. ft. per floor: <u>352</u>	Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ <input checked="" type="checkbox"/> Masonry _____ <input checked="" type="checkbox"/> Wood Frame _____ State Certified Modular _____	Sprinkler system: N/A <input type="checkbox"/> Full _____ Partial _____ Other Suppression _____ # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> <u>Depth</u> _____ <u>Width</u> _____	Water Supply: _____ Public _____ Private <input checked="" type="checkbox"/>
1st floor: _____	Sewage Disposal: _____ Public _____ Private <input checked="" type="checkbox"/>
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 type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> Crawl space <input checked="" type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms _____	Sprinkler system: N/A <input 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: _____	State Certified Modular _____ Manufactured Home _____
Other Structure: _____ Dimensions: _____ Footings: _____ Roof: _____	

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.

[Signature]  
Applicant's Signature  
F&L Const Co (owner)  
Title/Company

Frank Lowman Sr  
Print Name  
3/6/07  
Date

Checks payable to: **DIRECTOR OF FINANCE OF HOWARD COUNTY**  
\*\* PLEASE WRITE NEATLY AND LEGIBLY. \*\*

- FOR OFFICE USE ONLY -

AGENCY	DATE	SIGNATURE APPROVAL
<input checked="" type="checkbox"/> Land Development, DPZ		
<input checked="" type="checkbox"/> State Highways		
<input checked="" type="checkbox"/> Building Official	<u>3/6/07</u>	<u>[Signature]</u>
<input checked="" type="checkbox"/> Dev. Engineering, DPZ		
<input checked="" type="checkbox"/> Health	<u>3/6/07</u>	<u>[Signature]</u>
<input type="checkbox"/> Fire Protection		
Is Sediment Control approval required prior to issuance?		
YES <input type="checkbox"/> NO <input type="checkbox"/>		
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>		
ONE STOP SHOP: <input type="checkbox"/>		

DPZ SETBACK INFORMATION	PROPERTY ID#:
Front: _____	<u>52801</u>
Rear: _____	Filing fee \$ <u>25.00</u>
Side: _____	Permit fee \$ <u>63</u>
Side St.: _____	Excise tax \$ <u>282</u>
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per fee \$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ <u>370.00</u>
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Lot Coverage for New Town Zone _____	Balance due \$ _____
SDP/Red-line approval date _____	Check # <u>7100</u>
	Validation # _____
	Accepted by _____

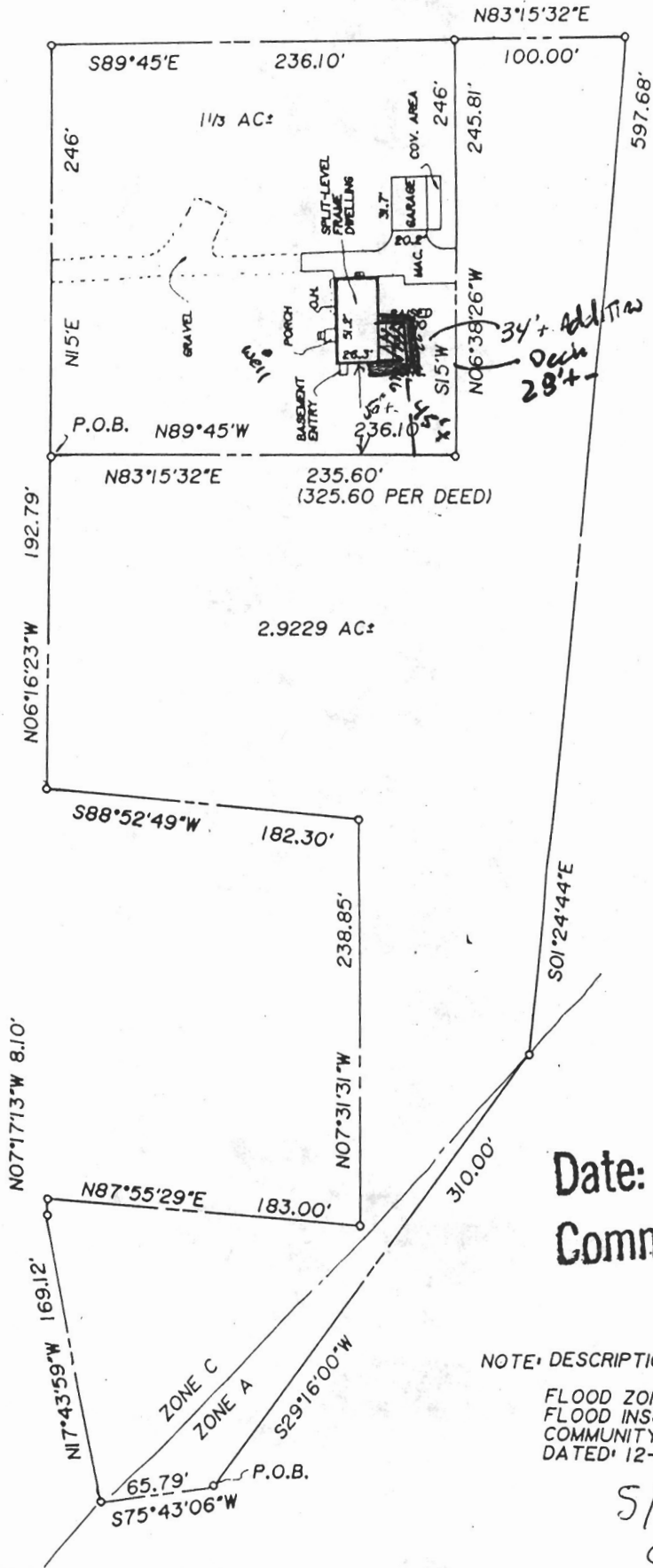
Distribution of Copies- White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA





LANDTECH ASSOCIATES, INC.  
 1410 CRAIN HIGHWAY N.W. SUITE 78  
 GLEN BURNIE, MARYLAND 21061  
 (301) 768-2121

MANOR LANE



B00134700  
 REVISED

Date: 5-9-02

Comments: Deck added

NOTE: DESCRIPTION FURNISHED BY CLIENT.

FLOOD ZONE SCALED FROM THE  
 FLOOD INSURANCE RATE MAPS  
 COMMUNITY PANEL NO.240044-0027B  
 DATED: 12-4-86

5/9/02 - Amendment  
 OK (SRK) HCHD

Steven R. Krug



NOTE: No title report furnished.

CERTIFICATION: This is to certify that the improvements indicated hereon are located as shown. This is not a property line survey and should not be used for the erection of fences or any other improvements.

BRADEN A. ROGERS - PROP. L.S. MD. LIC. NO. 119

4575 MANOR LANE

LIBER 2389 FOLIO 376

LOT BLOCK SECT. PLAT

PLAT ENTITLED

RECORDED IN HOWARD CO. MD.

PLAT BOOK FOLIO

SCALE 1"=100' CASE NO. P9305039

DATE 6-7, 1993 JOB NO. CSP-93106