

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

000135909

Building Address 1049 Long Corner Rd
Mt Airy Md 21771

Property Owner's Name Marsha & Jerry Scuderi
 Address 1049 Long Corner Rd

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

City Mt Airy State Md Zip Code 21771

Census Tract 6040 Subdivision _____

Home Phone 301-831-5765 Work Phone 301-442-7408

Section _____ Area _____ Lot _____

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

Tax Map _____ Parcel _____ Grid _____

Zoning _____ Map Coordinates 2E9 Lot size _____

Phone ³⁰¹ 831-5765 Fax 301-831-5765

Existing Use Storage SF Home

Contractor Company Scuderi

Proposed Use storage near garage to be done

Contact Person Marsha Scuderi

Estimated Construction Cost \$ 12,000.

Address 1049 Long Corner Rd

Description of Work add an entry for
storage near garage 21' x 23'

City Mt Airy State Md Zip Code 21771
 License No. _____ Phone _____ Fax _____

Occupant or Tenant Owner

Engineer or Architect Company _____

Contact Name _____

Contact Person _____

Address _____

Address _____

City _____ State _____ Zip Code _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Phone _____ Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics

Utilities

Building Characteristics

Utilities

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

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

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

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.

Marsha Scuderi
 Applicant's Signature
Marsha Scuderi
 Title/Company

Marsha Scuderi
 Print Name
5/2/02
 Date

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			Fronts _____	54565
State Highways			Rear _____	Filing fee \$ _____
Building Official			Side _____	Permit fee \$ _____
Dev. Engineering, DPZ			Side St. _____	Excise tax \$ _____
Health	5/2/02	Steven R. Krueg	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	Add'l per. fee \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
CONTINGENCY CONSTRUCTION START <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	Balance due \$ _____
ONE STOP SHOP <input type="checkbox"/>			SDP/Red-line approval date _____	Check # _____
				Validation # _____
				Accepted by _____

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

LIBER0635 FOLIO500

LIBER0654 FOLIO683

Plat of Survey
PARCEL L
Being Part Of A Tract Of Land Called
CHESTNUT HILLS
Fourth District
Howard County, Maryland
Scale: 1"=200'

I hereby certify that the plan shown hereon is correct and Iron pipes have been placed where shown.

PENN HURVEYS
BOX 55
DUNBAR, MD.
Ph. 948,8822

Elwood L. Renn
Elwood L. Renn
R. P. L. S. MD. #3383
March 30, 1973



5/2/02 - enclosed garage
proposed deck
OK SRU

