

HOWARD COUNTY PERMIT APPLICATION

PERMIT NUMBER
B 00-150673

Building Address 7675 Kindler Road
Laurel, MD 20723
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract 60802 Subdivision _____
Section _____ Area _____ Lot _____
Tax Map _____ Parcel _____ Grid _____
Zoning _____ Map Coordinates 1903 Lot size _____

Property Owner's Name Elizabeth Cashmer
Address 7675 Kindler Road
City _____ State MD Zip Code 20723
Home Phone _____ Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):

Phone _____ Fax _____

Existing Use 1st family home
Proposed Use Deck
Estimated Construction Cost \$ 2500.00
Description of Work 42'x9 Deck with

Contractor Company Robinson Building, Inc.
Contact Person Stephen Karshner
Address 4726 Gayden Way
City Ellicott City State MD Zip Code 21042
License No. 121952
Phone 410-702-2111 Fax 410-702-9245

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	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"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Use group: _____	Heating System: _____ Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: _____ Reinforced Concrete _____ Structural Steel _____ Masonry _____ 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"/> Depth _____ Width _____	Water Supply: _____ Public _____ Private _____
1st floor: _____	Sewage Disposal: _____ Public _____ Private _____
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 type="checkbox"/> Slab on Grade <input type="checkbox"/>	Sprinkler system: N/A <input type="checkbox"/> NFPA #13D _____ NFPA #13R _____ Other: _____
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 _____	

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.

Stephen T. Karshner
Applicant's Signature

Stephen T. Karshner
Print Name

Title/Company

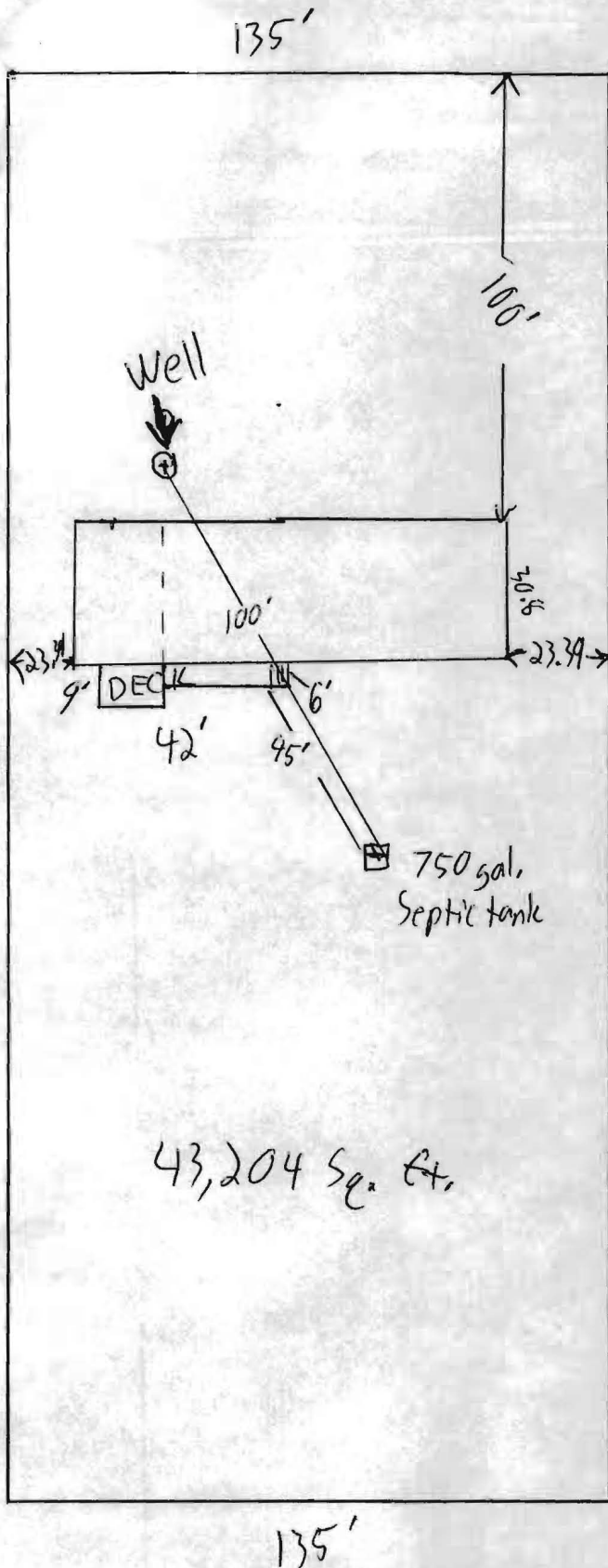
Date

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#: <u>4972</u>
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>10/7/09</u>	<u>Kace Thomas</u>	All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES \$ _____
Fire Protection			Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
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"/>	Balance due \$ _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			Lot Coverage for NewTown Zone _____	Check # <u>1100</u>
ONE STOP SHOP: <input type="checkbox"/>			SDP/Red-line approval date _____	Validation # <u>7950</u>

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

7675 Kindler Rd.
Laurel, MD 20723



Scale 1" = 40'

346-

320.35-

43,204 Sq. Ft.

APPROVED

WALK-THRU BUILDING PERMIT
BP# B00150670 A# P20023
APP. SAN K.O./P.Y. DATE: 10/6/04
DESC. OF WORK: Deck

135'