

**HOWARD COUNTY
 PERMIT APPLICATION**

PERMIT NUMBER

B00158631

Building Address 13756 Lakeside Dr
Clarksville 21029
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot 10
 Tax Map 34 Parcel 396 Grid 7
 Zoning _____ Map Coordinates _____ Lot size 3.00AC

Property Owner's Name Marsha Gladden
 Address 13756 Lakeside Dr
 City Clarksville State Md Zip Code 21029
 Home Phone _____ Work Phone _____
 Applicant's Name & Mailing Address, (if other than stated hereon):
 Phone 410 507 7705 Fax _____

Existing Use _____
 Proposed Use _____
 Estimated Construction Cost \$ _____
 Description of Work 25 x 46 inground
pool

C _____
 C **ANTHONY & SYLVAN POOLS**
 - 556-E Ritchie Highway
 A Severna Park, Md. 21146
 - 410-544-6084
 C M.H.I.C. 19347
 L _____
 P _____

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: <input type="checkbox"/> Public <input type="checkbox"/> Private
No. of stories: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> 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: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
Construction type: <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Structural Steel <input type="checkbox"/> Masonry <input type="checkbox"/> Wood Frame <input type="checkbox"/> State Certified Modular	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Other Suppression <input type="checkbox"/> # of Heads _____

Building Characteristics	Utilities
SF Dwelling <input type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: _____	Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private
2nd floor: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Basement: <input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement <input type="checkbox"/> <input type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/>	Heating System: <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> <input type="checkbox"/> Natural Gas <input type="checkbox"/> <input type="checkbox"/> Propane Gas <input type="checkbox"/>
No. of Bedrooms _____	Sprinkler system: N/A <input type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> Other: _____
Height: _____	
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: _____	
<input type="checkbox"/> State Certified Modular <input type="checkbox"/> 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.

[Signature]
 Applicant's Signature

Karen Klayman
 Print Name

Title/Company

Date 3/20/06

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	<u>3/20/06</u>	<i>[Signature]</i>
Health		
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 # _____
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:

MAIL TO CONTRACTOR

Building Address <u>LOT 10 LAKESIDE DRIVE</u> <u>CLARKSVILLE, MD 13756</u>	Property Owner's Name <u>MARSHA GLADDEN</u> Address <u>LOT #10 LAKESIDE DRIVE</u> City <u>CLARKSVILLE</u> State <u>MD</u> Zip Code _____
Suite/Apt. #: _____ SDP/WP/Petition #: _____ Census Tract <u>605101</u> Subdivision <u>BRIGHTON PINES</u> Section <u>1</u> Area <u>1</u> Lot <u>10</u> Tax Map <u>34</u> Parcel <u>110</u> Grid <u>1</u> Zoning <u>RR-DE</u> Map Coordinates _____ Lot size _____	Home Phone <u>410 608 0577</u> Work Phone _____ Applicant's Name & Mailing Address, (if other than stated hereon): _____ Phone _____ Fax _____

Existing Use <u>SINGLE FAMILY DWELLING</u> Proposed Use <u>U.G PROpane TANK</u> Estimated Construction Cost \$ <u>3,000.00</u> Description of Work <u>Bury a 1,000 Gallon U.G TANK</u>	Contractor Company <u>SUBURBAN PROPANE</u> Contact Person <u>MIKE DEVINCENT</u> Address <u>31 DERWOOD CIRCLE P.O. BOX 1766</u> City <u>ROCKVILLE</u> State <u>MD</u> Zip Code <u>20850</u> License No. _____ Phone <u>301 251 0606</u> Fax <u>301 251 0608</u>
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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 _____
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BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities	Building Characteristics	Utilities
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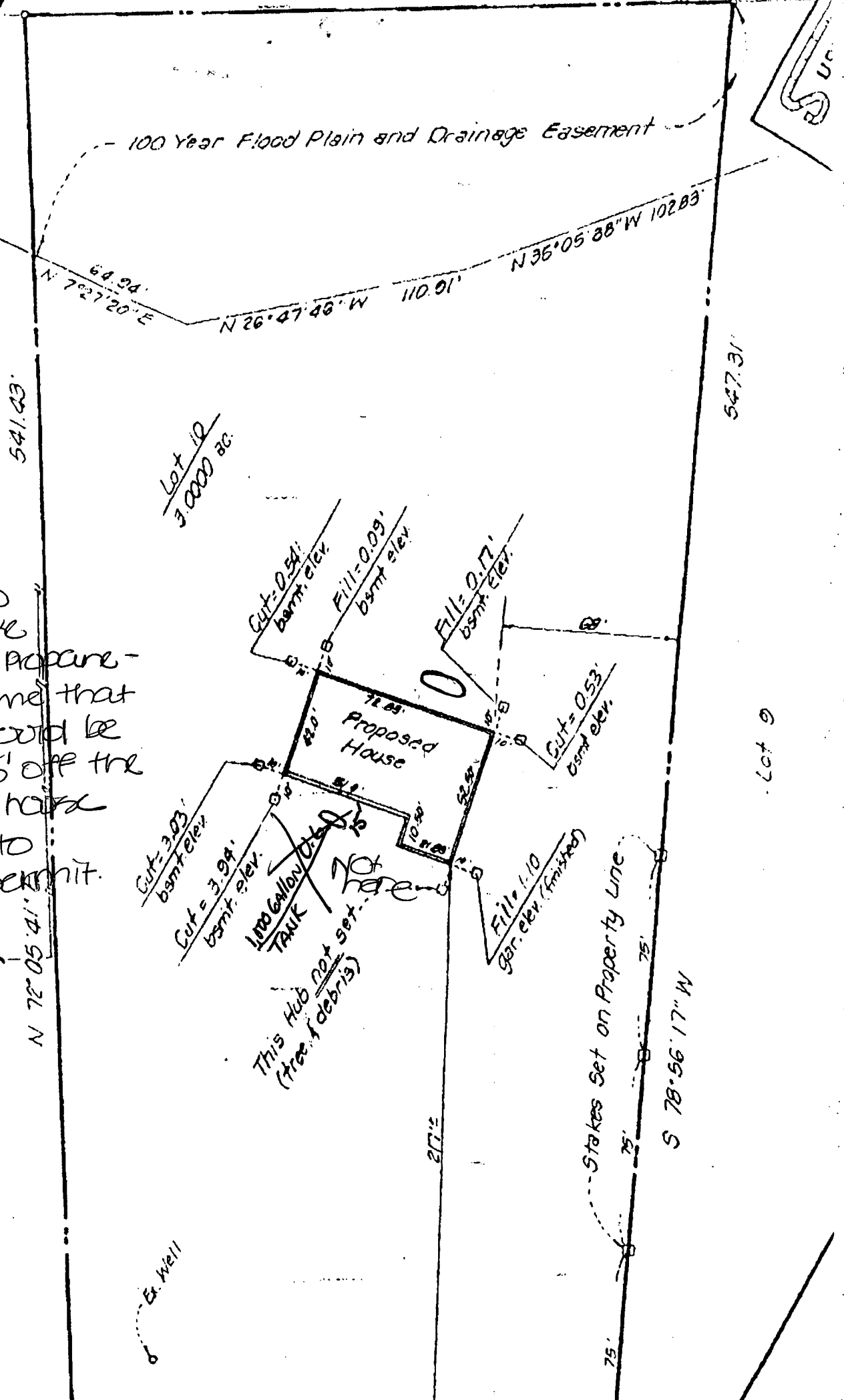
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<u>Michael A. Dellincent</u> Applicant's Signature <u>Residential Energy Rep</u> Title/Company	<u>Michael A. Dellincent</u> Print Name <u>7/17/99</u> Date
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<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>AGENCY</th> <th>DATE</th> <th>SIGNATURE APPROVAL</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> Land Development DPZ</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> State Highways</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Building Official</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Dev. Engineering DPZ</td> <td><u>7/13/99</u></td> <td><u>[Signature]</u></td> </tr> <tr> <td><input checked="" type="checkbox"/> Health</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Fire Protection</td> <td></td> <td></td> </tr> </tbody> </table>	AGENCY	DATE	SIGNATURE APPROVAL	<input checked="" type="checkbox"/> Land Development DPZ			<input type="checkbox"/> State Highways			<input type="checkbox"/> Building Official			<input checked="" type="checkbox"/> Dev. Engineering DPZ	<u>7/13/99</u>	<u>[Signature]</u>	<input checked="" type="checkbox"/> Health			<input type="checkbox"/> Fire Protection			DPZ SETBACK INFORMATION Front: _____ Rear: _____ Side: _____ Side St.: _____ All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/> Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/> Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/> Lot Coverage for New Town Zone _____ SDP/Red-line approval date _____	PROPERTY ID#: <u>37555</u> Filing fee \$ <u>100.00</u> Permit fee \$ _____ Excise tax \$ _____ Sub-total paid \$ _____ Add'l permit fee \$ _____ TOTAL FEES \$ <u>100.00</u> Balance due \$ _____ Check # <u>6256</u> Validation # _____
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CONTINGENCY CONSTRUCTION START:
 ONE STOP SHOP:



7/13/09 10:10
 spoke to Mike
 @ Suburban Propane -
 he assured me that
 the tank would be
 installed ~15' off the
 right rear corner
 corner of to
 proceed w/ permit.

(DK)

This Hub not set...
 (free of debris)

Stakes Set on Property Line

Lot 10
 3.0000 ac.

547.31'

Lot 9

541.03'

N 72°05'41.1"

S 78°56'17" W

100 Year Flood Plain and Drainage Easement

Cut = 3.03' bsmt. elev.

Cut = 3.94' bsmt. elev.

Cut = 0.54' bsmt. elev.

Fill = 0.09' bsmt. elev.

Fill = 0.17' bsmt. elev.

Cut = 0.53' bsmt. elev.

Fill = 1.10' 98' elev. (mistaken)

Ex. Well

27'±

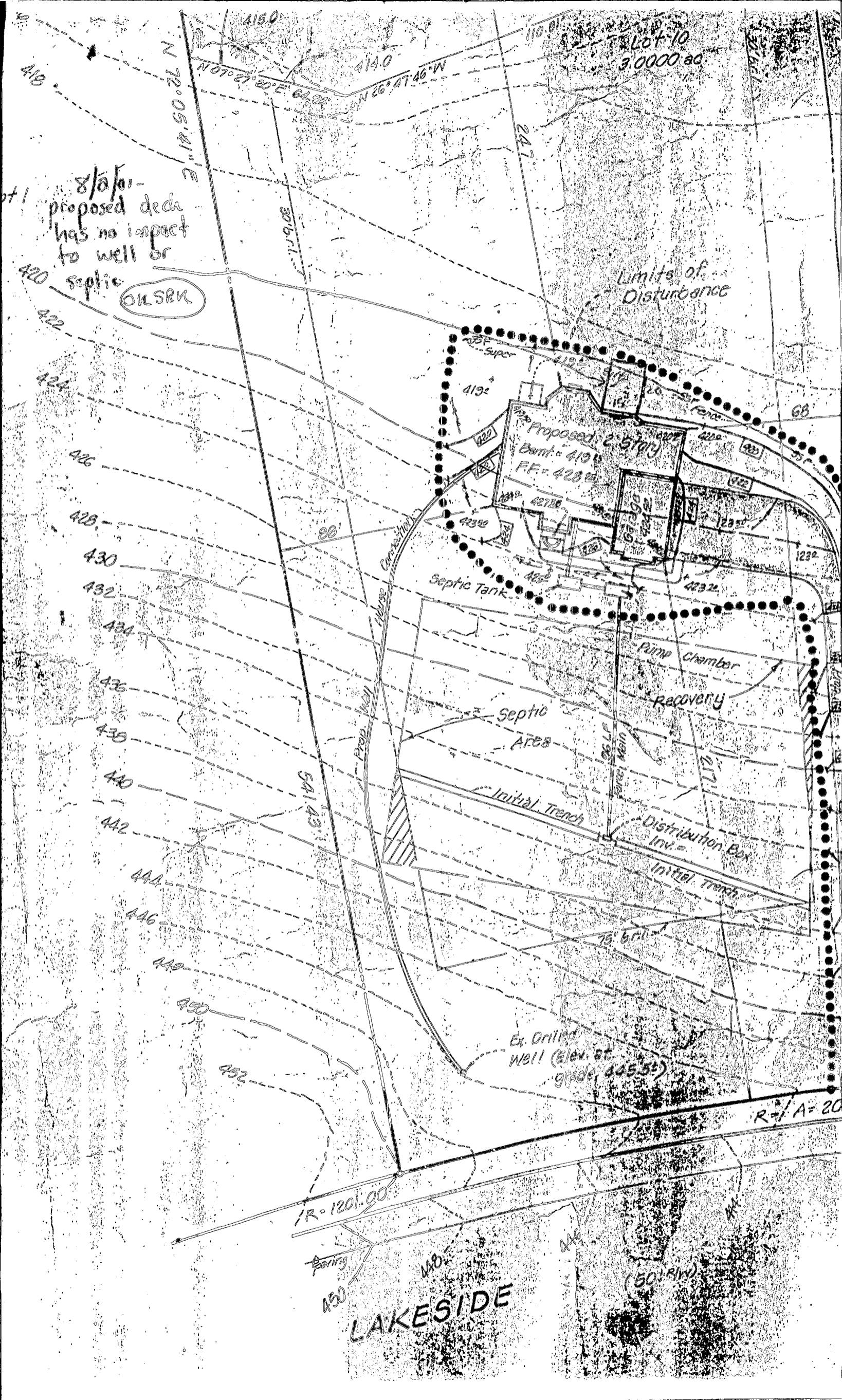
75'

75'

75'

75'

75'



Lot 10
3,000 sq. ft.

8/2/01 -
proposed deck
has no impact
to well or
420 septic
ON SRM

Limits of
Disturbance

Proposed 2-Story
Bent: 419
F.F.: 428

Septic Tank

Pump Chamber

Recovery

Septic Area

Initial Trench

Distribution Box

Initial Trench

Ex. Drilled
Well (Elev. at
grade 425.5)

LAKESIDE

