

B11002235

Building Address: 1011 Long Corner Rd.
Mt. Airy, MD 21771

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

Census Tract: 6040.01 Subdivision: Woodbine

Section: _____ Area: _____ Lot: _____

Tax Map: 0006 Parcel: 0226 Grid: 0011

Zoning: RC-DE0 Map Coordinates: _____ Lot Size: 2 Acres

Existing Use: single family

Proposed Use: single family

Estimated Construction Cost: \$ 42,000

Description of Work: Bump out Kitchen / DR
Kitchen Remod
Irregular 6x12 AND 12x12 APPLY 2165/11

Occupant or Tenant: Occupant

Was tenant space previously occupied? Yes No

Contact Name: Colin Nicol

Address: 1011 Long Corner Rd

City: Mt. Airy State: MD Zip Code: 21771

Phone: 3018291105 Fax: _____

Email: CSNicol@comcast.net

Property Owner's Name: Colin Nicol

Address: 1011 Long Corner Rd.

City: Mt. Airy State: MD Zip Code: 21771

Home Phone: 301-829-1105 Work Phone: 240-994-1721

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

Phone: _____ Fax: 301-829-1105

Email: CSNicol@comcast.net

Contractor Company: Shanes Construction, Inc

Contact Person: Randy Shores

Address: 2242 Loop Rd

City: Kenneth State: MD Zip Code: 21758

License No.: 11338

Phone: 3018347508 Fax: _____

Email: _____

Engineer/Architect Company: _____

Responsible Design Prof.: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

BUILDING DESCRIPTION - COMMERCIAL	
Building Characteristics	Utilities
Height:	<u>Water Supply</u>
No. of stories:	<input type="checkbox"/> Public
Gross area, sq. ft./floor:	<input type="checkbox"/> Private
	<u>Sewage Disposal</u>
Area of construction (sq. ft.):	<input type="checkbox"/> Public
	<input type="checkbox"/> Private
Use group:	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Construction type:</u>	<u>Heating System</u>
<input type="checkbox"/> Reinforced Concrete	<input type="checkbox"/> Electric <input type="checkbox"/> Oil
<input type="checkbox"/> Structural Steel	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas
<input type="checkbox"/> Masonry	<u>Sprinkler System:</u>
<input type="checkbox"/> Wood Frame	<input type="checkbox"/> N/A
<input type="checkbox"/> State Certified Modular	<input type="checkbox"/> Full
<input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL	
Building Characteristics	Utilities
<input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input checked="" type="checkbox"/> Private
2 nd floor:	<u>Sewage Disposal</u>
Basement:	<input type="checkbox"/> Public
<input type="checkbox"/> Finished Basement	<input checked="" type="checkbox"/> Private
<input type="checkbox"/> Unfinished Basement	Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Crawl Space	Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Slab on Grade	<u>Heating System</u>
No. of Bedrooms:	<input type="checkbox"/> Electric
<u>Multi-family Dwelling</u>	<input checked="" type="checkbox"/> Oil
No. of efficiency units:	<input type="checkbox"/> Natural Gas
No. of 1 BR units:	<input type="checkbox"/> Propane Gas
No. of 2 BR units:	
No. of 3 BR units:	
Other Structure:	
Dimensions:	
Footings:	<input checked="" type="checkbox"/> <u>Roadside Tree Project Permit</u>
Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<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.

CS Nicol
 Applicant's Signature

CSNicol@comcast.net
 Email Address

Owner
 Title/Company

Colin S. Nicol
 Print Name

7/27/2011
 Date

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

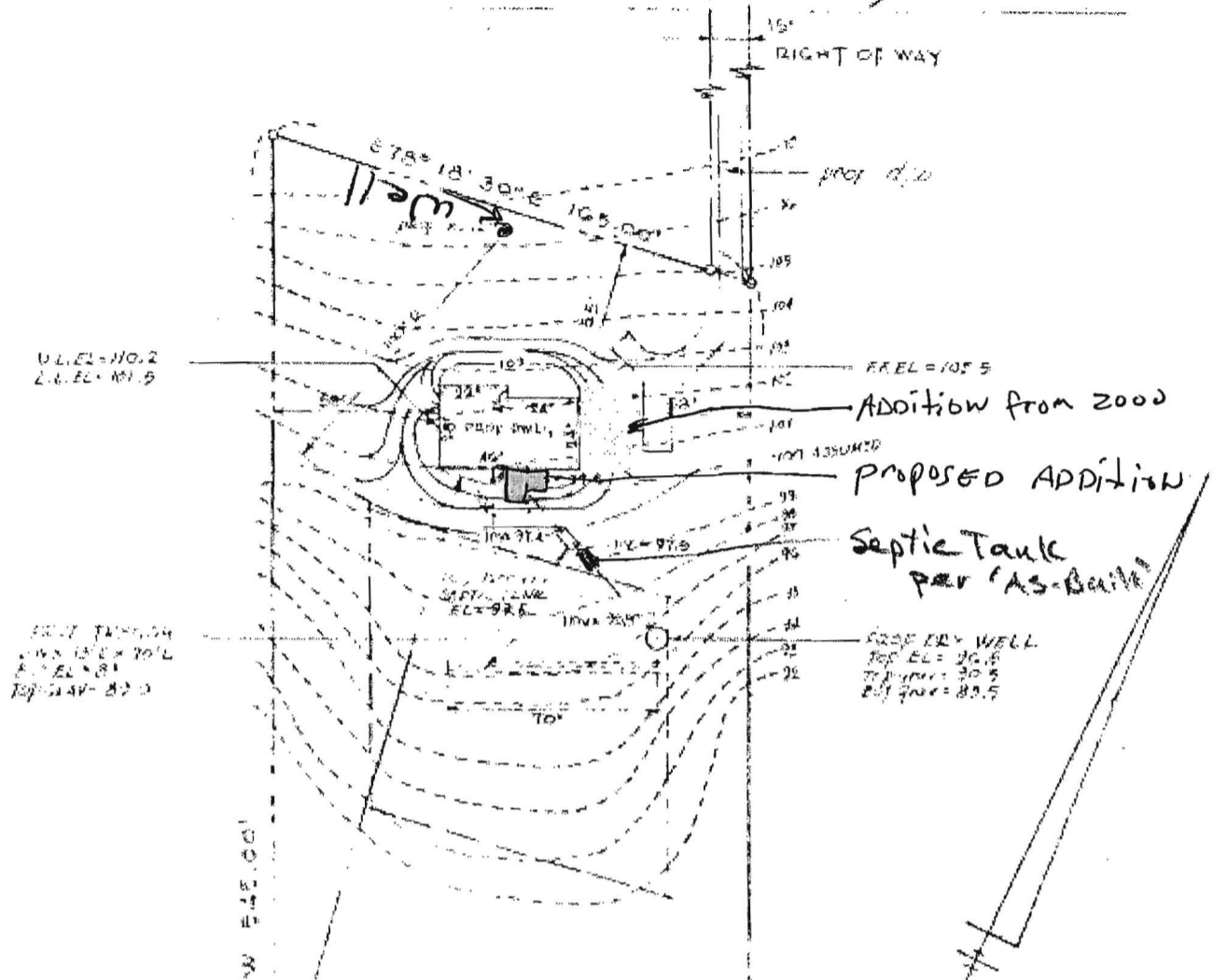
AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health	<u>7/27/11</u>	<u>R. Buck</u>
Fire Protection		

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

DPZ SETBACK INFORMATION
Front:
Rear:
Side:
Side St.:
All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No
Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No
Lot Coverage for New Town Zone:
SDP/Red-line approval date:

Filing Fee	\$
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

LONG CORNER ROAD
50' R/W



U.L. EL - NO. 2
L.L. EL - NO. 5

ADDITION FROM 2000
PROPOSED ADDITION
Septic Tank
per 'AS-Built'

PROPOSED WALKTHRU
15' x 15' x 10' L
E.L. = 8'
E.P. = 44' - 8.5'

PROPOSED WALKTHRU
TOP EL = 20.5
BOTTOM EL = 20.5
E.P. = 82.5

15' x 15' x 10' L
E.L. = 8'
E.P. = 44' - 8.5'

**APPROVED
WALKTHRU BUILDING PERMIT**

BP# _____ A# _____
APP. SAN R. Barker DATE: 7/27/11
DESC. OF WORK: 6' x 12' & 12' x 12' Addition
Kitchen/Dining Room
as shown

AS-BUILT PLAN
1" = 5'

AREA = 1,000 ACRES

N75°18'30"W 125.00'

1. The applicant shall be responsible for obtaining all necessary permits from the appropriate agencies.
2. The applicant shall be responsible for obtaining all necessary utility easements from the appropriate agencies.
3. The applicant shall be responsible for obtaining all necessary zoning variances from the appropriate agencies.
4. The applicant shall be responsible for obtaining all necessary environmental permits from the appropriate agencies.
5. The applicant shall be responsible for obtaining all necessary fire department permits from the appropriate agencies.
6. The applicant shall be responsible for obtaining all necessary health department permits from the appropriate agencies.
7. The applicant shall be responsible for obtaining all necessary police department permits from the appropriate agencies.
8. The applicant shall be responsible for obtaining all necessary court permits from the appropriate agencies.
9. The applicant shall be responsible for obtaining all necessary other permits from the appropriate agencies.
10. The applicant shall be responsible for obtaining all necessary other permits from the appropriate agencies.

MRS. MARY COLIN NICOLE
LICENSED PROFESSIONAL ARCHITECT
10000 100th St, NW
Edmonton, Alberta T6E 1A1