

<b>DEPT. OF INSPECTIONS, LICENSES AND PERMITS</b> 3430 COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1810 AUTOMATED INFORMATION (410) 313-3800		<b>HOWARD COUNTY</b> <b>PERMIT APPLICATION</b>		<b>808000632</b> <b>PERMIT NUMBER</b>	
Building Address <u>12990 Linden Church Rd.</u> <u>Clarksville, MD 21029</u>			Property Owner's Name <u>John L. Strieter</u> Address <u>12990 Linden Church Road</u> City <u>Clarksville</u> State <u>MD</u> Zip Code <u>21029</u> Phone <u>410 531 3607</u> Phone <u>240 275 6810 cell</u> Applicant's Name & Mailing Address, (if other than stated herein):		
Suite/Apt. #: <u>N/A</u> SDP/WP/Petition #: _____			Phone _____ Fax _____		
Census Tract <u>6051</u> Subdivision <u>Twelve Hills</u>			Contractor Company <u>Same as owner</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ License No. _____ Phone _____ Fax _____		
Section <u>I</u> Area _____ Lot <u>6</u>			Engineer or Architect Company <u>owner</u> Contact Person _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____		
Tax Map _____ Parcel <u>66</u> Grid _____			City _____ State _____ Zip Code _____ Phone _____ Fax _____		
Zoning _____ Map Coordinates _____ Lot Size <u>3.1 Acres</u>			Description of Work <u>Family Room Addition</u> <u>16 x 22 - 1 story</u>		
Existing Use <u>Private residence</u> Proposed Use <u>Private residence</u> Estimated Construction Cost \$ <u>50,000</u>			Occupant or Tenant <u>owner above</u> Contact Name _____ Address _____ City _____ State _____ Zip Code _____ Phone _____ Fax _____		

BUILDING DESCRIPTION - COMMERCIAL		BUILDING DESCRIPTION - RESIDENTIAL	
<b>Building Characteristics</b> Height: _____ No. of stories: _____ Gross area, sq. ft. per floor: _____ Use group: _____ 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	<b>Utilities</b> Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Private Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> 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	<b>Building Characteristics</b> SF Dwelling <input checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____ 1 <sup>st</sup> floor: <u>34 x 34</u> 2 <sup>nd</sup> floor: <u>34 x 34</u> Basement: <u>34 x 34</u> Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawl space <input type="checkbox"/> Slab on Grade <input type="checkbox"/> No. of Bedrooms <u>3</u> Multi-family dwellings: No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____ Other Structure: <u>Garage</u> Dimensions: <u>24 x 40</u> Footings: <u>12 x 24 concrete</u> Roof Height: <u>16'</u> <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	<b>Utilities</b> Water Supply: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Sewage Disposal: <input type="checkbox"/> Public <input checked="" type="checkbox"/> Private Electric Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Heating System: Electric <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas <input type="checkbox"/> Sprinkler system: N/A <input checked="" type="checkbox"/> <input type="checkbox"/> NFPA #13D <input type="checkbox"/> NFPA #13R <input type="checkbox"/> 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.

John L. Strieter      John L. Strieter  
 Applicant's Signature      Print Name  
 \_\_\_\_\_      2-28-08  
 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 #
Land Development, DPZ				Front: _____	Filing fee \$ _____
State Highways				Rear: _____	Permit fee \$ _____
Building Officials				Side: _____	Excise tax \$ _____
Dev. Engineering, DPZ				Side St.: _____	Add'l per fee \$ _____
Health	<u>2/28/2008</u>	<u>[Signature]</u>		All minimum setbacks met?	TOTAL FEES \$ _____
Fire Protection				YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid \$ _____
Is Sediment Control approval required prior to issuance?				Is Entrance Permit required?	Balance due \$ _____
YES <input type="checkbox"/> NO <input type="checkbox"/>				YES <input type="checkbox"/> NO <input type="checkbox"/>	Check # _____
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>				Historic District?	Validation # _____
ONE STOP SHOP: <input type="checkbox"/>				YES <input type="checkbox"/> NO <input type="checkbox"/>	
				Lot Coverage for New Town Zone _____	
				SDP/Red-line approval date _____	Accepted by _____

Distribution of Copies - White: Building Officials    Green: LDD, DPZ    Yellow: DED, DPZ    Pink: Health    Gold: SHA  
 T: forms/buildingpermitapplication      REV 10/28/04

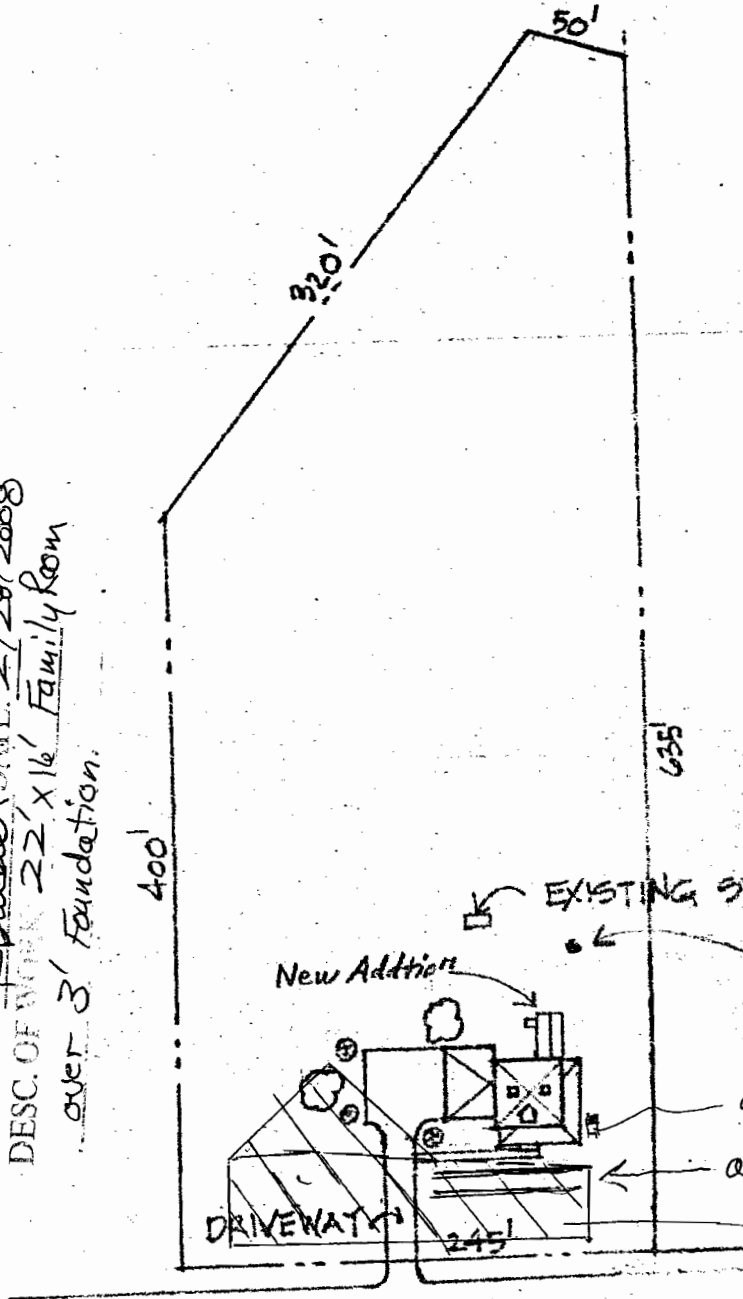
APPROVED

WALKTHRU BUILDING PERMIT

BP# B08000633. A#

APP. SAN R. Fisher DATE: 2/28/2008

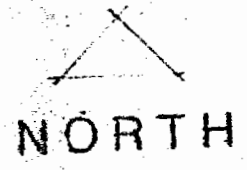
DESC. OF WORK 22' x 16' Family Room  
over 3' Foundation.



LINDEN CHURCH RD.

- SHADE TREE
- PINES

**SITE**



**NORTH**

SCALE : 1" = 100'