

HOWARD COUNTY  
 PERMIT APPLICATION

PERMIT NUMBER  
**808001813**

Building Address 4225 Luthicum Rd.  
Dayton 21036  
 Suite/Apt. #: \_\_\_\_\_ SDP/WP/Petition #: \_\_\_\_\_  
 Census Tract 605101 Subdivision Dayton  
 Section \_\_\_\_\_ Area \_\_\_\_\_ Lot \_\_\_\_\_  
 Tax Map 22 Parcel 358 Grid 13  
 Zoning RL Map Coordinates \_\_\_\_\_ Lot size 5.62

Property Owner's Name Patrick & Sue Ross  
 Address 4225 Luthicum Rd  
 City Dayton State MO Zip Code 21036  
 Phone 410-531-3469 Phone \_\_\_\_\_  
 Applicant's Name & Mailing Address, (if other than stated hereon):  
Chris Whitehead 8450 Savage Gulf Ford R  
Savage MO 20763  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_  
410-792-0900 410-792-0800

Existing Use Single Family Home - Renovation  
 Proposed Use Addition/Kitchen To Single Family  
 Estimated Construction Cost \$ \_\_\_\_\_  
 Description of Work enlarge kitchen 8x22'  
& enclose existing screen porch to  
become 12x16 Mud Room &  
14x18 Deck with stairs to grade

Contractor Company Bearmark Homes Inc  
 Contact Person Chris Whitehead  
 Address 8450 Savage Gulf Ford Rd.  
 City Savage State MO Zip Code 20763  
 License No. 97213  
 Phone 410-792-0900 Fax 410-792-0800

Occupant or Tenant \_\_\_\_\_  
 Contact Name N/A  
 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: <u>N/A</u> <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 checked="" type="checkbox"/> SF Townhouse <input type="checkbox"/> Depth _____ Width _____	Water Supply: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
1st floor: _____ 2nd floor: _____ Basement: _____	Sewage Disposal: _____ <input type="checkbox"/> Public <input type="checkbox"/> Private
Finished Basement <input type="checkbox"/> Unfinished Basement <input checked="" type="checkbox"/> Crawlspace <input type="checkbox"/> Slab on Grade <input checked="" type="checkbox"/> No. of Bedrooms _____ Height: _____	Electric Yes <input type="checkbox"/> No <input type="checkbox"/> Gas Yes <input type="checkbox"/> No <input type="checkbox"/>
Multi-family dwellings: _____ No. of efficiency units: _____ No. of 1 BR units: _____ No. of 2 BR units: _____ No. of 3 BR units: _____	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"/>
Other Structure: _____ Dimensions: _____ Footings: _____ Roof Height: _____ <input type="checkbox"/> State Certified Modular <input type="checkbox"/> Manufactured Home	Sprinkler system: <u>N/A</u> <input 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.

Chris Whitehead  
 Applicant's Signature

Chris Whitehead  
 Print Name

President Bearmark Homes  
 Title/Company

6-25-08  
 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: <u>15</u>	Filing fee \$ _____
State Highways			Rear: <u>60</u>	Permit fee \$ _____
Building Official			Side: <u>30</u>	Excise tax \$ _____
Dev. Engineering DPZ			Side St: _____	Add'l per. fee \$ _____
Health	<u>6/25/08</u>	<u>Chris Whitehead</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?			YES <input type="checkbox"/> NO <input type="checkbox"/>	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 New Town Zone _____	
			SDP/Red-line approval date _____	Accepted by _____
Distribution of Copies: _____	White: Building Official	Green: LDD, DPZ	Yellow: DED, DPZ	Pink: Health
TForms/PERMIT.FRM				Gold: SHA

4225 LINTHICUM RD.  
DAYTON MD.

SCALE 1" = 50'-0"

APPROVED  
WALK-THRU BUILDING PERMIT  
BP# BD156872 A# 32983  
APP SAN SEP DATE: 1/2/05  
DESC. OF WORK: 17 x 38  
Inground Pool

Property  
returned to  
you back to  
7/11/99

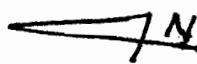
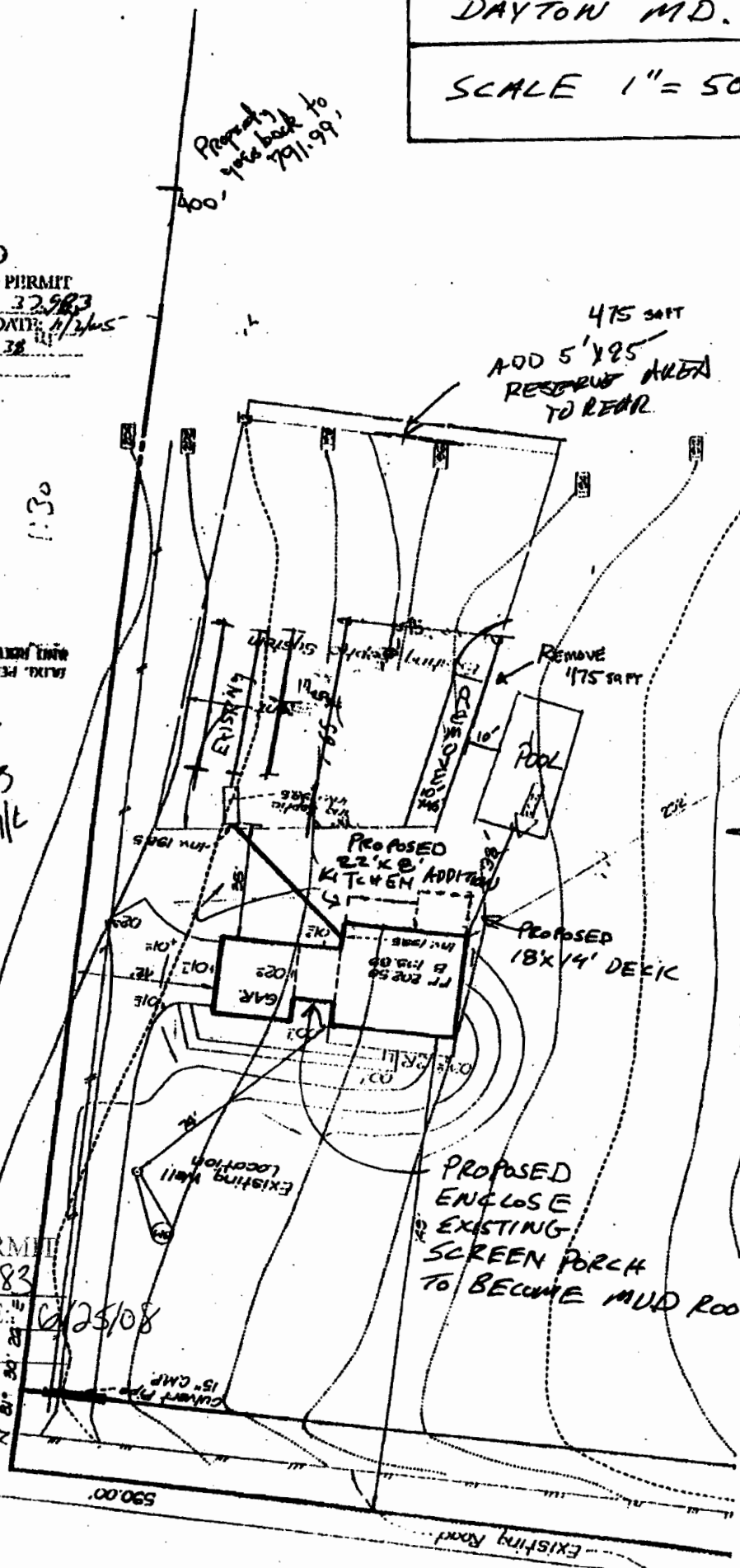
475 sqft  
ADD 5' x 25'  
RESERVE AREA  
TO REAR

ALL PERMITS  
REQUIRED  
DATE: 8/15/03  
BY: [Signature]

3/11/08  
English  
Masonry  
& [Signature]

APPROVED  
WALK-THRU BUILDING PERMIT  
BP#                      A# 37983  
APP SAN HS DATE: 6/25/08

DESC. OF WORK: Kitchen  
dition 8' x 22', enclosing  
isting porch & add  
' x 18' deck



590.00

EXISTING ROAD

11/19/07

APPROVED

WALK-THRU BUILDING PERMIT

BP# BCD150872 A# 37,983

APP. SAN SFD DATE: 11/2/05

DESC. OF WORK: 17 x 38

In ground Pool

Property  
yours back to  
791.99,

475 SQFT  
ADD 5' x 25'  
RESERVE AREA  
TO REAR

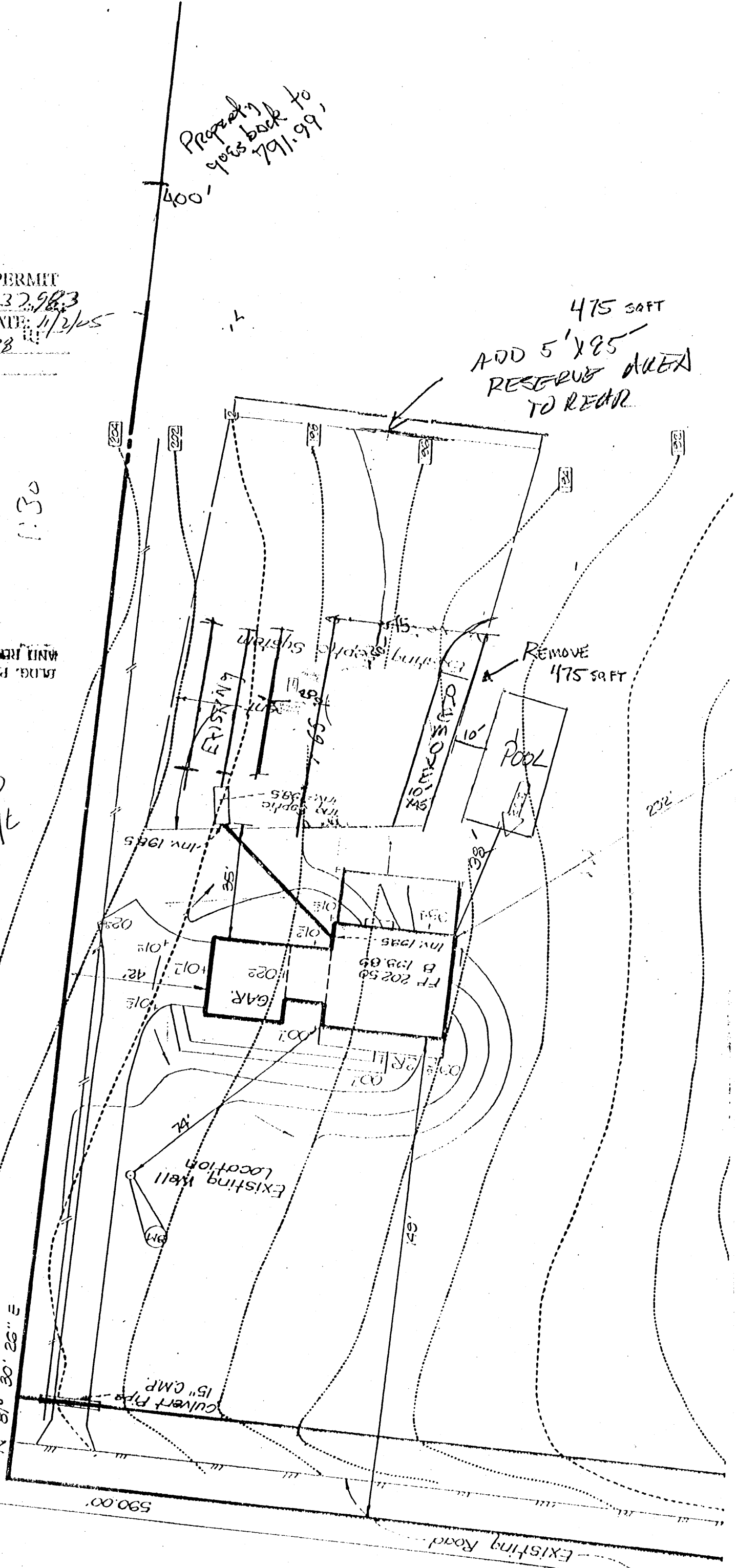
REMOVE  
475 SQFT

1:30

PLG. PERMIT SIGNED  
DATE: 11/16/05  
BY: [Signature]  
S.A.M.

Assumed  
Elevations of  
[Signature]  
11/16/05

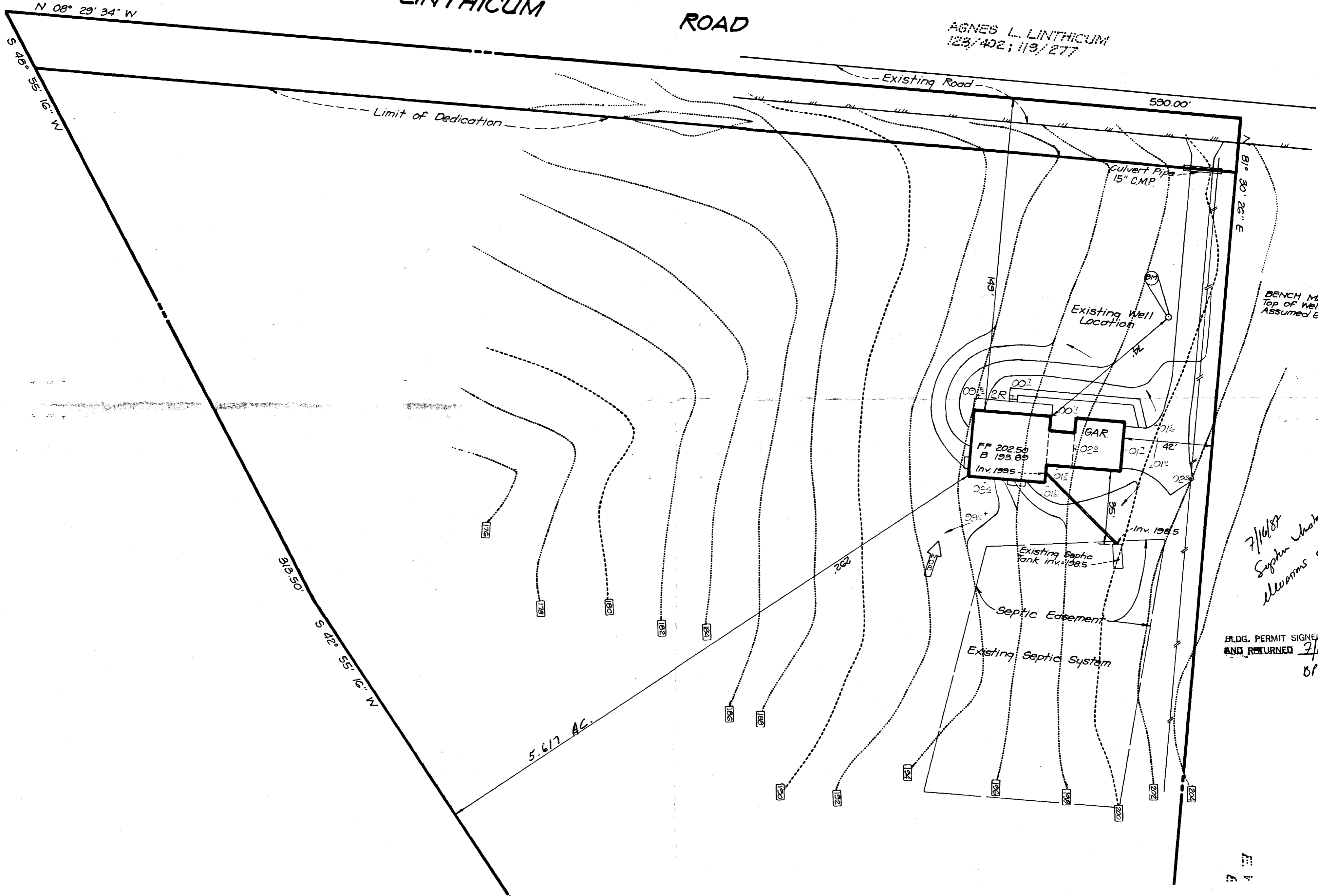
DENCH MARK  
TOP OF WELL  
Assumed Elev: 2000



11/19/05

# LINTHICUM ROAD

AGNES L. LINTHICUM  
123/402; 119/277



BENCH MARK  
Top of Well  
Assumed Elev. = 200.0

*7/16/87  
System installed  
Measurements of SAK*

BLDG. PERMIT SIGNED  
AND RETURNED *7/16/87*  
*BP 13363*  
*SAK*