

HOWARD COUNTY
PERMIT APPLICATION

PERMIT NUMBER

B-0606054

Building Address 6694 Luster Dr
Suite/Apt. #: _____ SDP/WP/Petition #: _____
Census Tract _____ Subdivision Green Hill Improv
Section 4 Area _____ Lot 16
Tax Map _____ Parcel _____ Grid _____
Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Alan & Erica Pinsky
Address 6694 Luster Dr
City Highland State MD Zip Code 20977
Home Phone 301-850-3766 Work Phone _____
Applicant's Name & Mailing Address, (if other than stated hereon):
Potts Const. Co. Inc.
6543 Minn. Hollow Del.
Highland MD 20977
Phone 410-531-6050 Fax _____

Existing Use SFD
Proposed Use SFD
Estimated Construction Cost \$ 15,000
Description of Work Add master bath.
Add garage, extend work
Shop new cover over front
porch.

Contractor Company Potts Const. Co. Inc.
Contact Person James
Address 6543 Minn. Hollow Del.
City Highland State MD Zip Code 20977
License No. 5711
Phone 410-531-6050 Fax 301-854-2862

Occupant or Tenant Pinsky
Contact Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Fax _____

Engineer or Architect Company James J. Jordon
Contact Person James
Address Blue Pool
City Columbia State MD Zip Code 21029
Phone 301-775-1211 Fax _____

BUILDING DESCRIPTION - COMMERCIAL

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics
Height: 10'
No. of stories: 1
Gross area, sq. ft. per floor: _____
Use group: _____
Construction type:
 Reinforced Concrete
 Structural Steel
 Masonry
 Wood Frame
 State Certified Modular

Utilities
Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
Full _____
Partial _____
Other Suppression _____
of Heads _____

Building Characteristics
SF Dwelling SF Townhouse
Depth _____ Width _____
1st floor: _____
2nd floor: _____
Basement: _____
Finished Basement Unfinished Basement
Crawl space Slab on Grade
No. of Bedrooms _____
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: _____
 State Certified Modular
 Manufactured Home

Utilities
Water Supply:
 Public
 Private
Sewage Disposal:
 Public
 Private
Electric Yes No
Gas Yes No
Heating System:
Electric Oil
Natural Gas
Propane Gas
Sprinkler system: N/A
NFPA #13D _____
NFPA #13R _____
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.

Applicant's Signature _____
Title/Company Pres Poot

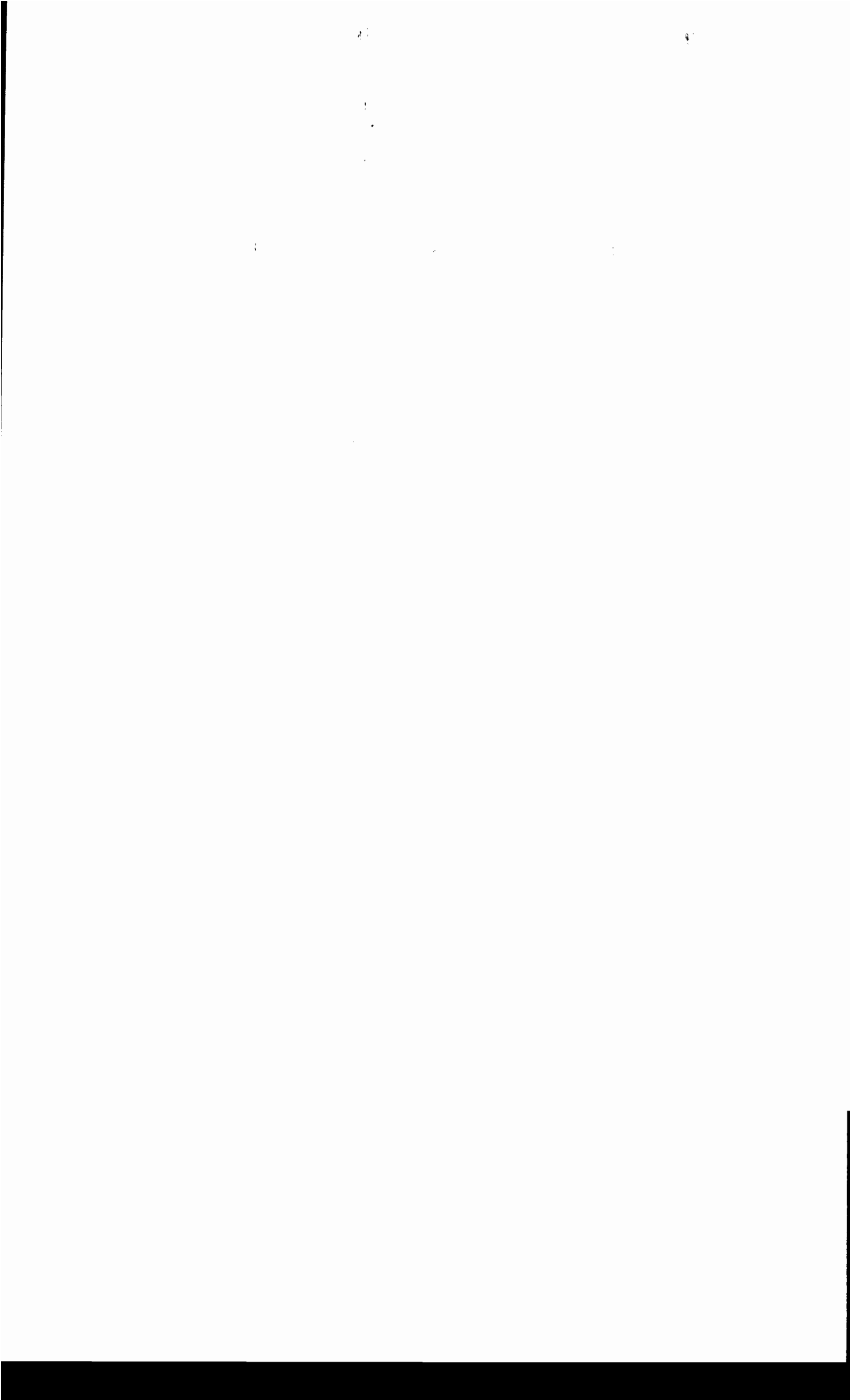
Print Name James Potts
Date 10/11/06

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			
Health	<u>10/31/06</u>	<u>[Signature]</u>	
Fire Protection			
Is Sediment Control approval required prior to issuance? YES <input type="checkbox"/> NO <input type="checkbox"/>			
CONTINGENCY CONSTRUCTION START: <input type="checkbox"/>			
ONE STOP SHOP: <input type="checkbox"/>			
Distribution of Copies: White: Building Official Green: LDD, DPZ			

DPZ SETBACK INFORMATION		PROPERTY ID#
Front: _____	Filing fee	\$ _____
Rear: _____	Permit fee	\$ _____
Side: _____	Excise tax	\$ _____
Side St: _____	Add'l per. fee	\$ _____
All minimum setbacks met? YES <input type="checkbox"/> NO <input type="checkbox"/>	TOTAL FEES	\$ _____
Is Entrance Permit required? YES <input type="checkbox"/> NO <input type="checkbox"/>	Sub-total paid	\$ _____
Historic District? YES <input type="checkbox"/> NO <input type="checkbox"/>	Balance due	\$ _____
Lot Coverage for New Town Zone _____	Check	\$ _____
SDP/Red-line approval date _____	Validation	\$ _____
Accepted by _____		



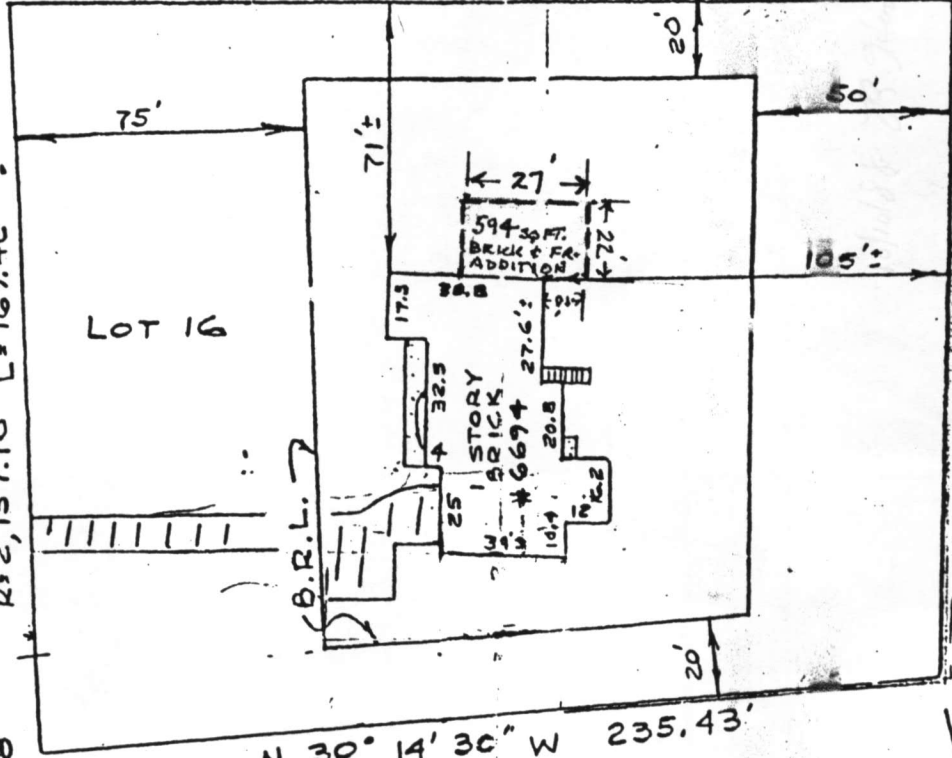
LUSTER DRIVE
(50' R/W)

1320 3/1/88
1320 7/1/88

N 59° 45' 30" E

25.18'

R=2,157.10 L=169.42'



S 25° 44' 30" E 247.63'

N 30° 14' 30" W 235.43'

S 65° 39' 20" W 175.93'

BIDD. PERMIT SIGNED
AND RETURNED 10/10/88

family room
addition

14

10/10/88
OK TO SIGN RH

LOCATION SURVEY

6694 LUSTER DRIVE
GREEN HILL MANOR
5TH ELECTION DISTRICT
HOWARD COUNTY, MD.

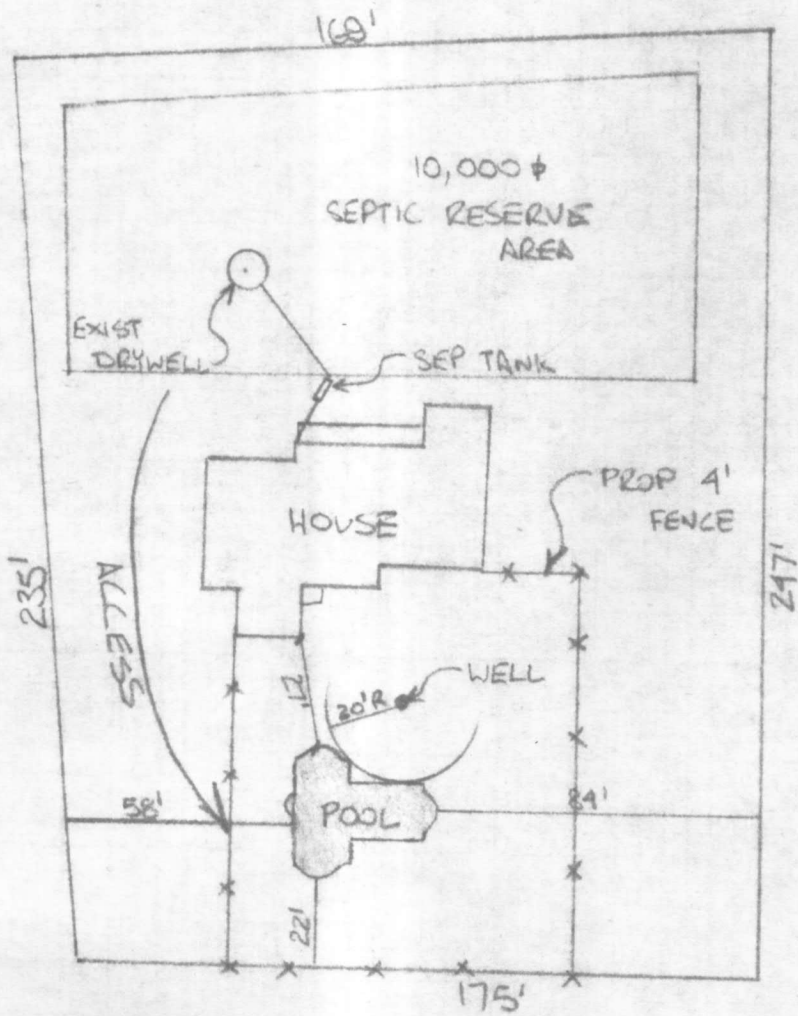
15



This is to certify that I have surveyed the property known as _____ among the sheet of recorded land records of _____ Maryland for the purpose of locating the improvements thereon.

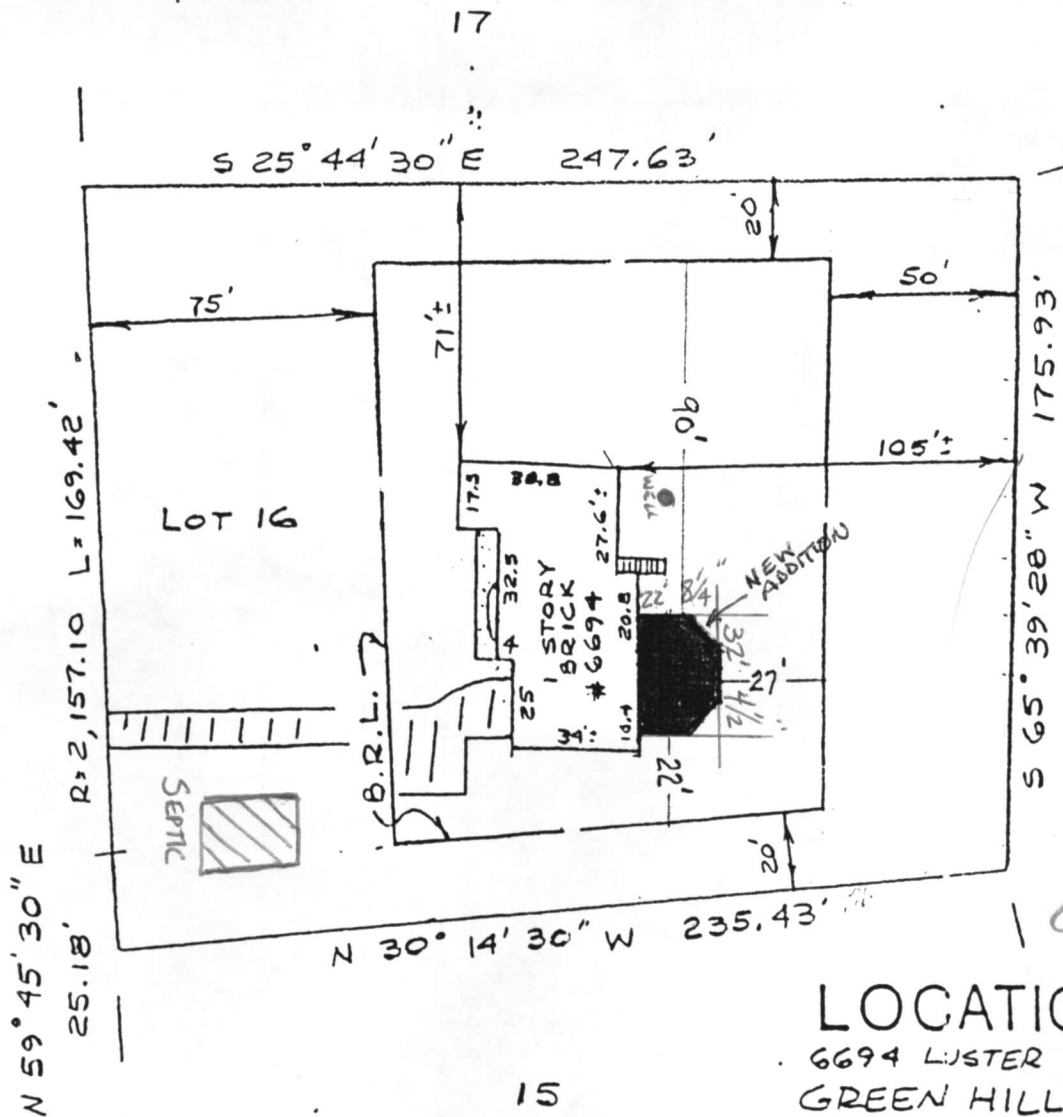
THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS NOT TO BE USED TO ESTABLISH PROPERTY LINES.		
NTI ASSOCIATES INC. 16205 OLD FREDERICK ROAD MT. AIRY, MARYLAND PHONE 646-5521 or 442-2031		
SCALE 1" = 50'	FIELD BY JLM	DRAWING NAME
DATE 9/10/85	DRAWN BY JLM	BODINE

21786



SCALE: 1" = 50'-0"

LUSTER DRIVE
(50' R/W)



8/29/90
PLANS OK

LOCATION SURVEY

6694 LUSTER DRIVE
GREEN HILL MANOR
5TH ELECTION DISTRICT
HOWARD COUNTY, MD.

This is to certify that I have surveyed the property known as _____ sheet of recorded _____ among the land records of _____ Maryland for the purpose of locating the improvements thereon.



THIS PLAT SHOWS ONLY THAT THE IMPROVEMENTS ARE CONTAINED WITHIN THE OUTLINES OF THE LOT AND IS NOT TO BE USED TO ESTABLISH PROPERTY LINES.

NTI ASSOCIATES INC. 16205 OLD FREDERICK ROAD
MT. AIRY, MARYLAND PHONE 646-5521 or 442-2031

SCALE 1"=50'	FIELD BY JLM	DRAWING NUMB
DATE 9/10/85	DRAWN BY JLM	BODINE