

HOWARD COUNTY
 PERMIT APPLICATION

PERMIT NUMBER
 B06000222

Building Address 14502 MacClinton Drive
Glenwood MD 21738
 Suite/Apt. #: _____ SDP/WP/Petition #: _____
 Census Tract _____ Subdivision _____
 Section _____ Area _____ Lot _____
 Tax Map _____ Parcel _____ Grid _____
 Zoning _____ Map Coordinates _____ Lot size _____

Property Owner's Name Lee & Dawn Schultz
 Address 14502 MacClinton Drive
 City Glenwood State MD Zip Code 21738
 Home Phone 410442-2415 Work Phone N/A
 Applicant's Name & Mailing Address, (if other than stated hereon): _____
 Phone _____ Fax _____

Existing Use Single Family Dwelling
 Proposed Use SAME
 Estimated Construction Cost \$ 7,000
 Description of Work Construct Deck at
rear of house with post
6 beam construction 2645, F
TOTAL

Contractor Company C.H.I. Contractors
 Contact Person John Cochran
 Address 14661 MUSTANG PATH
 City Glenwood State M.D. Zip Code 21738
 License No. 71948
 Phone 410-4895711 Fax N/A

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

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

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 Cochran
 Applicant's Signature
C.H.I. Contractors
 Title/Company

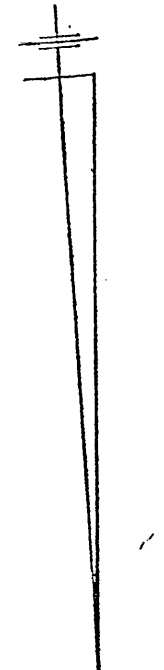
John Cochran
 Print Name
7/29/06
 Date

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>7/27/06</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"/>		

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 NewTown Zone _____	Check # _____
SDP/Red-line approval date _____	Validation # _____
Accepted by _____	

Distribution of Copies: White: Building Official Green: LDD, DPZ Yellow: DED, DPZ Pink: Health Gold: SHA
 T:\norma\PERMIT.FRM



SHADY LAKE
80' R/W
Edge Mac
Mac Paving

125.00'
S 05° 21' 45" N

R=25.00' L=39.27'

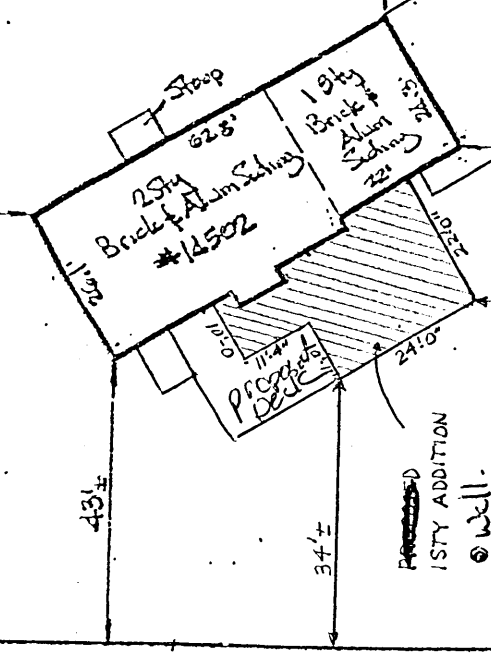
APPROVED
WALK-THRU BUILDING PERMIT
BP# _____ A# P57371B
APP. SAN GAC DATE: 7/27/90
DESC. OF WORK: Deck as shown

273.98'

182'

125' B.R.L. 7' Deck
11' Deck

Lot 12
Block "A"



52' 35" 15" E

52' ±

New Drive

N 05° 21' 45" E

150.00'

Note: Portion of Drive in Utility Easement

289.96'

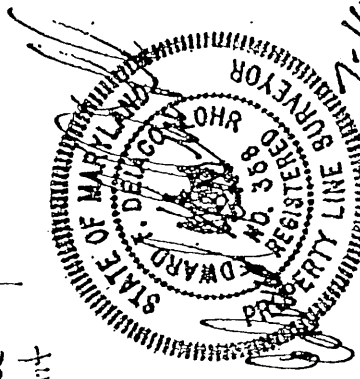
40' R/W

DRIVE

24' ± Mac Paving

MAC CLINTOCK

U&S 38' 15" W



THIS IS TO CERTIFY THAT THE PROPERTY SHOWN
HEREON IS NOT IN A FLOOD PLAIN.

THIS IS TO CERTIFY THAT THE IMPROVEMENTS INDICATED
HEREON ARE LOCATED AS SHOWN. THIS IS NOT A PROPERTY
LINE SURVEY AND SHOULD NOT BE USED AS SUCH.

HICKS ENGINEERING COMPANY, INC.
ENGINEERS • SURVEYORS • PLANNERS
200 EAST JOPPA ROAD - SUITE 402
TOWSON, MARYLAND 21204
TELEPHONE: 301/494-0001

LOCATION CERTIFICATION
#14502 MACCLINTOCK DRIVE, LOT 12, BLOCK "A"
SECTION FOUR "WATERFIELD ESTATES"
HOWARD CO, MD. 1 PLAT BOOK 21, FOLIO 118
DATE: 7/15/90 SCALE: 1" = 20' FILE: 9886

Dorothy T. Schultz
14502 MacClintock Drive
Glenwood, Maryland 21738

(410) 442-2413

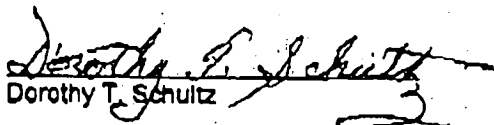
August 5, 2003

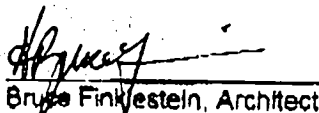
Environmental Health
Howard County, Maryland

Dear Sirs:

I am requesting a permit to build a handicapped-accessible bedroom and bath addition to the first floor of my residence (see address above). I have advanced, chronic-progressive multiple sclerosis and am confined to a wheelchair. For the past few years I have been able to access the master bedroom and bath on the second floor of my residence using a stair ascender. The master bathroom is the only one in the house that currently is large enough for me to enter with the wheelchair. However, my condition now has advanced to the point where I require substantial assistance to use the stair ascender, to get into the shower, etc. if no one else is at home I am unable to access the master bath with the stair ascender, and in the foreseeable future it undoubtedly will be unsafe for me to use that conveyance at all. Thus, I am now forced to relocate to the main floor of my home into a bedroom and bathroom that is specifically designed to accommodate my deteriorating condition. The addition I am planning has been designed by Bruce Finklestein of HBF Plus Architects, who has reviewed this letter and has cosigned below.

At the present time the second floor of this house has three bedrooms and a study that serves as a home office for my husband who telecommutes to work part of each week. When the addition is completed the house will have four bedrooms. Only the new bathroom on the first floor will have a wheelchair accessible toilet and shower.


Dorothy T. Schultz


Bruce Finklestein, Architect

