



City of Annapolis
 Department of Planning and Zoning
 145 Gorman Street, 3rd Fl
 Annapolis, MD 21401-2529



FOR CITY USE ONLY	
PERMIT #	Bd19-0067
ISSUED	4-1-2019
BY	JF
EXPIRES	4-1-2021

Permitting@annapolis.gov • 410-260-2200 • Fax 410-263-9158 • TDD use MD Relay or 711 • www.annapolis.gov

Building Permit Application

Per City Code Section 17.12.056, fees are not refundable.

Fee Schedule

Please note that, per City Code Section 17.28.090, any expansion or change in use may be subject to capital facility assessment charges.

Building site address 307 Dewey Drive Suite/Unit # _____

Property Tax ID # 06 010 07321226 Lot # 22 Zone _____

Is above address within the Historic District area? ___ Yes No Waterfront? ___ Yes No

Within the floodplain? ___ Yes No Sprinkler system in building? ___ Yes No

Property Owner Information		Contractor's Information	
Name <u>Thomas & Nina Dekornfeld</u>	Name <u>Harvey Switkes/ Precise Woodworks Inc.</u>	Name _____	Name _____
Address <u>307 Dewey Drive</u>	Address <u>414 Holly Drive</u>	Address _____	Address _____
City <u>Annapolis</u> State <u>MD</u> Zip <u>21401</u>	City <u>Annapolis</u> State <u>MD</u> Zip <u>21403</u>	City _____ State _____ Zip _____	City _____ State _____ Zip _____
Day phone <u>410 562 4489</u> Cell <u>410 562 4806</u>	Day phone _____ Cell <u>410 570 1954</u>	Day phone _____ Cell _____	Day phone _____ Cell _____
E-mail <u>ninfish@gmail.com</u>	E-mail _____	E-mail _____	E-mail _____

Applicant Information		Architect/Engineer Information	
Name <u>Harvey Switkes</u>	Name <u>David Wallace</u>	Name _____	Name _____
Address <u>414 Holly Drive</u>	Address _____	Address _____	Address _____
City <u>Annapolis</u> State <u>MD</u> Zip <u>21403</u>	City _____ State _____ Zip _____	City _____ State _____ Zip _____	City _____ State _____ Zip _____
Day phone _____ Cell <u>410 570 1954</u>	Day phone <u>410 991 4446</u> Cell _____	Day phone _____ Cell _____	Day phone _____ Cell _____
E-mail <u>harveypww@verizon.net</u>	E-mail _____	E-mail _____	E-mail _____

Occupant Information		Permit Information	
Name <u>Owner</u>	Please check if any of the following work to be done is:		
Address <u>Same</u>	___ Plumbing <input checked="" type="checkbox"/> Electrical ___ HVAC ___ Gas	___ Residential <input checked="" type="checkbox"/> Commercial	Value of work \$ <u>94,000</u>
City _____ State _____ Zip _____	Value of work \$ _____		
Day phone _____ Cell _____	E-mail _____		
E-mail _____	E-mail _____		

Please provide 24-hour emergency contact information:

Name Harvey Switkes Phone 410 570 1954

Describe proposed work:

Remove existing wood deck (290 sq ft), replace with new wood deck (208 sq ft) in same area with 19' x 16' screened porch attached to rear of house. Add ceiling fans, lighting, and outlets to meet code.

Permit # _____

Building site address _____ Date _____

Contractor License	License #	Expiration Date
MHIC	43750	2/17/2019
State of MD Construction		
MD Homebuilder Registration (New residential dwellings only)		

Dimensions

Lot size 15910 Building size (sq. ft.) 1532 Building height 26' # of stories 2
 Proposed work area (sq. ft.) 450 Basement area only (sq. ft.) 0
 Total floor area (sq. ft. including basement) _____ Is it a corner lot? ___ Yes No
 Proposed setbacks from property line (ft) Front 87' Left 10' Rear 212' Right 11'

If a water or sewer connection is required, I prefer:
 City installation To seek approval of the Public Works Department to have it installed by a licensed contractor (which may require a Street/Sidewalk Opening Permit and/or a bond)

Are trees being removed? ___ Yes No If yes, complete a Tree Permit application.
 Are there trees within 15' of the limit of disturbance? Yes ___ No If yes, complete a Trees in Construction Areas form.

A use permit is required for new tenants, change of occupancy or owner, or expansion of a commercial use. (A Use Permit Application must accompany the Building Permit Application.)

Existing use _____
 Proposed use _____

A certificate of occupancy may be required as determined by the Code Official.

Signature of owner or authorized agent

The applicant certifies and agrees as follows: (1) that they are authorized to make this application; (2) that the information is correct; (3) that they will comply with all regulations of the City of Annapolis which are applicable hereto; (4) that they will only perform work on the above property specifically described in this application; (5) that they grant City officials the right to enter onto the property for the purpose of inspecting the work permitted and posting notices; (6) if you choose to appeal the issuance, decision, determination or order of this permit, the petition for appeal shall be in writing stating the grounds for appeal and shall be filed with the Building Board of Appeals within 15 calendar days of issuance, decision, determination or order. Any right to appeal shall be waived if not timely filed.

Owner or Authorized Agent (print) Thomas J. DeKornfeld
 Signature *Thomas J. DeKornfeld* Date 2/12/2019

FOR CITY USE ONLY

PZ final approval *Chris M...* Date 3-29-19
 App fee paid \$247.50 Permit fee \$892.00 Fee due \$624.50