



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



FOR CITY USE ONLY	
PERMIT #	B1019-0435
ISSUED	8-28-19
BY	JF
EXPIRES	8-27-2021

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 2 Somerset Ct Suite/Unit # _____
 Property Tax ID # 6405-9004-9517 Lot # 56 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>Ingrid Ratz</u>	Name <u>Annapolis Construction Services Inc.</u>
Address <u>2 Somerset Ct</u>	Address <u>949 Bayard Rd</u>
City <u>Annapolis</u> State <u>MD</u> Zip <u>21403</u>	City <u>Lothian</u> State <u>MD</u> Zip <u>20711</u>
Day phone _____ Cell _____	Day phone _____ Cell <u>410-562-5876</u>
E-mail _____	E-mail <u>mam80450@yahoo.com</u>

Applicant Information

Architect/Engineer Information

Name <u>Annapolis Construction Services Inc.</u>	Name _____
Address <u>949 Bayard Rd</u>	Address _____
City <u>Lothian</u> State <u>MD</u> Zip <u>20711</u>	City _____ State _____ Zip _____
Day phone _____ Cell <u>410-562-5876</u>	Day phone _____ Cell _____
E-mail <u>mam80450@yahoo.com</u>	E-mail _____

Occupant Information

Permit Information

Name Same as owner

Address _____

City _____ State _____ Zip _____

Day phone _____ Cell _____

E-mail _____

Please check if any of the following work to be done is:
 ___ Plumbing ___ Electrical ___ HVAC ___ Gas
 Residential ___ Commercial
 Value of work \$ 14,700.00

Please provide 24-hour emergency contact information:

Name Mike Andrew McConnell Phone 410-562-5876

Describe proposed work:

Excavate 30' of Left Side of house to repair leaking wall, install Drain board, drain tile, washed gravel in a wrap of filter cloth.

Permit # _____

Building site address 2 Somerset Ct. Date 8-7-19

Contractor License	License #	Expiration Date
MHIC	108252 108282	7-31-2020
State of MD Construction		
MD Homebuilder Registration (New residential dwellings only)		

Dimensions

Lot size _____ Building size (sq. ft.) _____ Building height _____ # of stories _____

Proposed work area (sq. ft.) _____ Basement area only (sq. ft.) _____

Total floor area (sq. ft. including basement) _____ Is it a corner lot? Yes No

Proposed setbacks from property line (ft) Front _____ Left _____ Rear _____ Right _____

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 Private Residence

Proposed use No change

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) Mike Andrew McCann

Signature [Signature] Date 8-7-19

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PZ final approval [Signature] Date 8-28-19

App fee paid \$100.00 Permit fee 237.60 Fee due \$137.60