



ST. MARY'S COUNTY, MARYLAND
PERMIT APPLICATION



Please complete the information below prior to your submission. This application will be required in order to accept and process your submission.
ALL INFORMATION MUST BE COMPLETE OR SUBMISSION WILL BE RETURNED TO APPLICANT.

Owner: ROBYNE HENRY (& JASON)
 Mailing Address: 15246 LAKE DR
SLOTLAND MD 20687
 Phone: (609) 864-2276 JASON CELL
 E-mail: JASON.C.HENRY1@GMAIL.COM

Applicant: TAYLOR GAS HEATING AIR
 Mailing Address: 21434 GREAT WILLS RD
LEXINGTON PARK MD 20653
 Phone: (301) 862-1800
 E-mail: MICHAEL.STEWART@TAYLORGASCOMPANY.COM

If you want an agent (surveyor, engineer, etc.) contacted by reviewing agencies, provide information below:
 Name: _____ Phone: _____
 Address: _____ E-mail: _____

The Property: Street Address or Tax ID: 15246 LAKE DR
 Tax Map: _____ Grid: _____ Parcel: _____ Lot: _____ Sec: _____ Block: _____
 Size of Property _____ Subdivision: _____ Zoning: _____
 Critical Area Zoning: _____ Floodplain Zone: _____ Airport Overlay Zone: _____ AICUZ: _____

Permit Request (check more than one, if applicable):

Custom House _____ Addition: _____ Detached Structure: _____ Other: (describe) HVAC REPLACEMENT
 Modular Home _____ Garage _____ Garage _____
 Mobile Home _____ Living Space _____ Shed _____
 Renovation _____ Porch/Deck _____ Pier _____
 In-ground Pool _____
 Demolition _____ Year structure was built _____
 Commercial New Structure _____ Commercial Change of Use _____
 Commercial Renovation _____ Commercial Change of Occupancy _____
 Commercial Other: (describe) _____ New Business Name and Type _____
 Previous Business Name and Type _____

If application is for construction of a house or renovation or addition to a house, please answer the following:

Is there an existing dwelling on the site? _____
 Is the dwelling currently occupied? _____ If "no", when was the dwelling last occupied? _____
 Is this a replacement dwelling? _____ Number of Bedrooms: Existing? _____ Proposed? _____ Total? _____
 Is this an addition to an existing dwelling? _____ If "yes", please provide size of existing dwelling on septic system.

If construction is proposed, please provide square footage of ALL sections:

1 st Floor: _____	Porch(es): _____	Size of existing dwelling
2 nd Floor: _____	Deck(s): _____	1 st Floor: _____
3 rd Floor: _____	Landing/Stoop _____	2 nd Floor: _____
Basement _____	Carport: _____	3 rd Floor: _____
Attached Garage _____	Breezeway: _____	Basement _____
Detached Garage _____	Other: _____	
2 nd Floor _____	Describe: _____	

Total Square Footage: _____ **Value of construction:** _____

Property is served by: Public Water: yes no Public Sewer: yes no

Will this project include: Plumbing: yes no Electrical: yes no HVAC: yes no

Who will be the Builder? Contractor SCOTT TAYLOR Myself _____

Homebuilder Registration # _____ Home Improvement License # _____ Marine License # _____
 Plumbing # _____ HVACR # 120109 Electrical # _____

The following must be included with this application:

- Contract of Sale, Lease or Written Notarized Permission to make application if you are not the property owner.
- Recorded Deed(s) if property is not in a recorded subdivision. Provide deeds dating back to March 15, 1978.
- Plot (site) plan – **5 prints required for review**
 - Applicable site plan checklist
- Floor Plans showing interior room locations with each room use labeled. – **3 prints required for review**
- Digital submittals are requested for all document. Emailed to: BPService@stmaryscountymd.gov

Signature _____ Date: 3/16/20

By making this application, I agree and consent for employees / agents of St. Mary's County Department of Land Use and Growth Management to enter upon the land, during normal business hours, to conduct such inspections as may be required or necessary to determine compliance with the Comprehensive Zoning Ordinance.



Critical Area Site Plan Checklist (CZO Section 71.2.4)

Permit approval may be delayed if the below information is not provided at the time of application

- N/A
- Acceptable
- Unacceptable

Permit # _____

- Using a scale of 1"=10' 1"=20' 1"=30' 1"=40' 1"=50' or 1"=60' show the boundary of the property and the location and dimensions of all existing and proposed structures.
- Indicate the Critical Area Overlay Zones: RCA__LDA__IDA__BMO__

☆ This includes **buildings** (houses, sheds, barns, garages, gazeboes, porches, stoops, etc.) **paving** (decks, patios, steps, walkways, driveways, roads, parking lots, paths) **recreational amenities** (swimming pools, tennis courts, basketball courts, etc.)

Lot Coverage Calculations (square foot)				
	Existing	Removed	Adding	Total
Dwelling				
Walkways				
Porches				
Decks				
Pool				
Driveway/Parking				
Garage				
Roads				
Sheds				
HEAT PUMP (REPLACEMENT)			3 sq. ft	
TOTALS				
Percent L.C.				

- Label and dimension **all** structures and surfaces that are proposed and **all** surfaces and surfaces that are to be removed. Show total amounts of **existing** and **proposed lot coverage** and amount of any lot coverage to be **removed**.
- Clearly identify boundaries of forest, boundaries of shrubby woody vegetation and individual trees and shrubs.
- ☆ Use appropriate symbols for different types of vegetation when identifying individual trees and shrubs. **Identify vegetative areas, trees, and shrubs to be removed. Indicate "no clearing" on the plan if none is proposed.**
- Location of the shoreline (mean high water line) drawn to scale if present
- Location of all USGS streams, wetlands, hydric and highly erodible soils, on or adjacent to the parcel, if present
- Show the names of all bodies of water.
- Indicate the boundaries of all buffers: the tidal wetland buffer, non-tidal wetland buffer, and stream buffers including expansion for steep slopes, hydric soils, and highly erodible soils, if applicable.
- Show all recorded easements (slope, forest retention, drainage, access, sewage disposal)

*** Please provide a copy of any active Soil Conservation and Water Quality Plan (Farm Plan), soil reports, or wetland delineation reports***