



APPLICATION FOR
HISTORIC AREA WORK PERMIT
HISTORIC PRESERVATION COMMISSION
301.563.3400

FOR STAFF ONLY:

HAWP# _____

DATE ASSIGNED _____

APPLICANT:

Name: _____

E-mail: _____

Address: _____

City: _____ Zip: _____

Daytime Phone: _____

Tax Account No.: _____

AGENT/CONTACT (if applicable):

Name: _____

E-mail: _____

Address: _____

City: _____ Zip: _____

Daytime Phone: _____

Contractor Registration No.: _____

LOCATION OF BUILDING/PREMISE: MIHP # of Historic Property _____

Is the Property Located within an Historic District? ☐ Yes/District Name _____

☐ No/Individual Site Name _____

Is there an Historic Preservation/Land Trust/Environmental Easement on the Property? If YES, include a map of the easement, and documentation from the Easement Holder supporting this application.

Are other Planning and/or Hearing Examiner Approvals /Reviews Required as part of this Application? (Conditional Use, Variance, Record Plat, etc.?) If YES, include information on these reviews as supplemental information.

Building Number: _____ Street: _____

Town/City: _____ Nearest Cross Street: _____

Lot: _____ Block: _____ Subdivision: _____ Parcel: _____

TYPE OF WORK PROPOSED: See the checklist on Page 4 to verify that all supporting items for proposed work are submitted with this application. Incomplete Applications will not be accepted for review. Check all that apply:

☐ New Construction

☐ Deck/Porch

☐ Shed/Garage/Accessory Structure

☐ Addition

☐ Fence

☐ Solar

☐ Demolition

☐ Hardscape/Landscape

☐ Tree removal/planting

☐ Grading/Excavation

☐ Roof

☐ Window/Door

☐ Other: _____

I hereby certify that I have the authority to make the foregoing application, that the application is correct and accurate and that the construction will comply with plans reviewed and approved by all necessary agencies and hereby acknowledge and accept this to be a condition for the issuance of this permit.

Signature of owner or authorized agent

Date

HAWP APPLICATION: MAILING ADDRESSES FOR NOTIFYING
[Owner, Owner's Agent, Adjacent and Confronting Property Owners]

Owner's mailing address

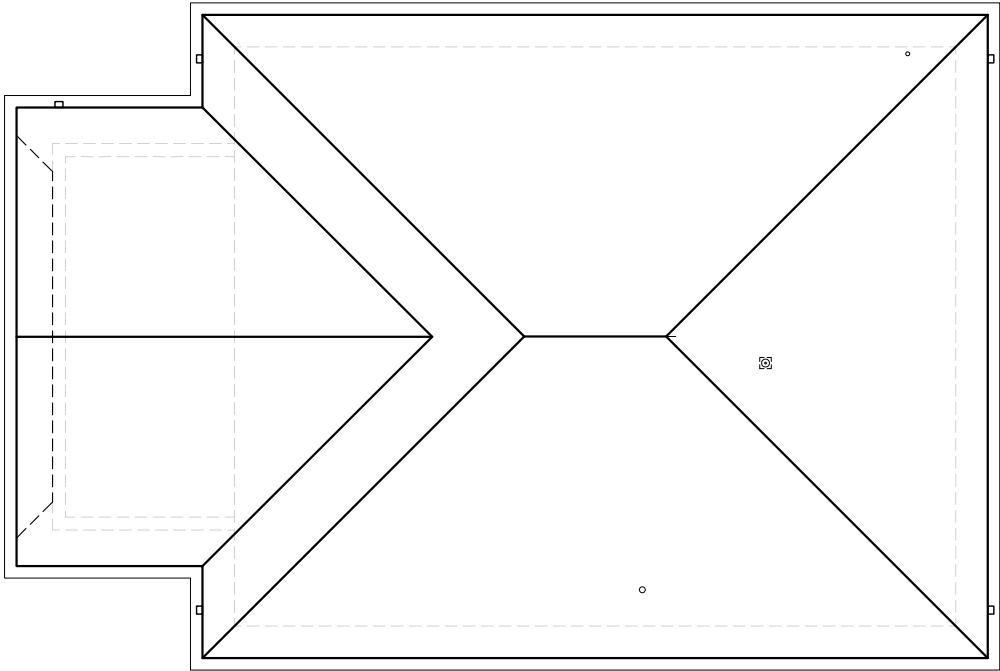
Owner's Agent's mailing address

Miche Booz Architect
208 Market St
Brookeville, MD 20833

Adjacent and confronting Property Owners mailing addresses

Description of Property: Please describe the building and surrounding environment. Include information on significant structures, landscape features, or other significant features of the property:

Description of Work Proposed: Please give an overview of the work to be undertaken:



MICHE BOOZ

A R C H I T E C T

15 High St
Brookeville
Maryland 20833
(301)774 6911

Project:

SNYDER-ROOSE

6812 Westmoreland Ave
Takoma Park, MD 20912

Title:

R12 - EXISTING ROOF PLAN



Scale:

1/8" = 1'-0"
0 5

Date:



MICHE BOOZ

ARCHITECT

15 High St
Brookeville
Maryland 20833
(301)774 6911

Project:

SNYDER-ROOSE

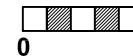
6812 Westmoreland Ave
Takoma Park, MD 20912

Title:

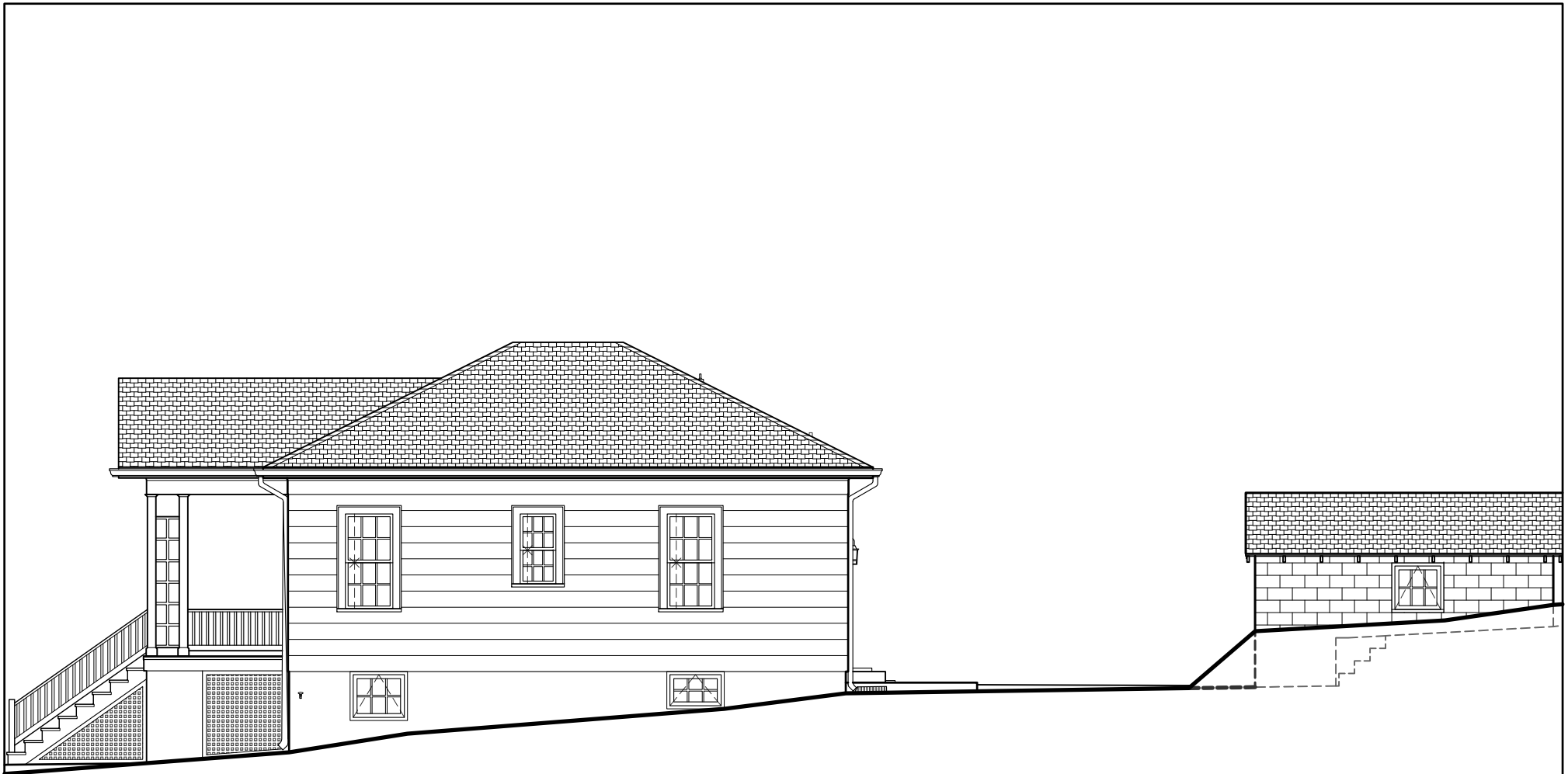
R20 - NORTH ELEVATION

Scale:

1/8" = 1'-0"



Date:



<p>MICHE BOOZ ARCHITECT</p> <p>15 High St Brookeville Maryland 20833 (301)774 6911</p>	<p>Project:</p> <p>SNYDER-ROOSE</p> <p>6812 Westmoreland Ave Takoma Park, MD 20912</p>	<p>Title:</p> <p>R21 - WEST ELEVATION</p>	<p>Scale: 1/8" = 1'-0"</p> <p>0 5</p> <p>Date:</p>
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<div><div>MICHE BOOZ</div><div>ARCHITECT</div><div>15 High St Brookeville Maryland 20833 (301)774 6911</div></div>	<div>Project:</div> <div>SNYDER-ROOSE</div> <div>6812 Westmoreland Ave Takoma Park, MD 20912</div>	<div>Title:</div> <div>R23 - EAST ELEVATION</div>	<div>Scale: 1/8" = 1'-0"</div> <div><div><div></div><div></div><div></div><div></div><div></div></div><div>05</div></div> <div>Date:</div>
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HISTORIC AREA WORK PERMIT CHECKLIST OF APPLICATION REQUIREMENTS

	Required Attachments						
Proposed Work	I. Written Description	2. Site Plan	3. Plans/ Elevations	4. Material Specifications	5. Photographs	6. Tree Survey	7. Property Owner Addresses
New Construction	*	*	*	*	*	*	*
Additions/ Alterations	*	*	*	*	*	*	*
Demolition	*	*	*		*		*
Deck/Porch	*	*	*	*	*	*	*
Fence/Wall	*	*	*	*	*	*	*
Driveway/ Parking Area	*	*		*	*	*	*
Grading/Exc avation/Land scaing	*	*		*	*	*	*
Tree Removal	*	*		*	*	*	*
Siding/ Roof Changes	*	*	*	*	*		*
Window/ Door Changes	*	*	*	*	*		*
Masonry Repair/ Repoint	*	*	*	*	*		*
Signs	*	*	*	*	*		*











< BACK



37482 THERMAL SASH (SDL)

The door you have selected is available with almost unlimited personalization options. For example, you can order this door in any type of wood and any size and change virtually any detail. To make this door even more "you," Personalize Your Door below.

DOOR SPECIFICATIONS (AS SHOWN):

Wood Species: Fir

Glass: Clear

Profile: Ovolo Sticking

Panel Type: 3/4" FP

Rough opening needs to be 2" wider and 2 1/2" taller than your door.

Get a Quote



View on
my Home



Print



Where to Buy



Guided Tour



Dutch Door
Visualizer



Exterior Door
Selection Guide

Compare

Our agents are not availa...