

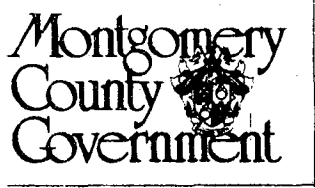
31/6 10403 Fawcett St.

OM 22-88

949-4670
3611 FARMER

LITTLE
Don Little

933-5006 (h)
8-8100 (o)



Historic Preservation Commission
100 Maryland Avenue, Rockville, Maryland 20850
279-1327

APPLICATION FOR HISTORIC AREA WORK PERMIT

AX ACCOUNT # _____

NAME OF PROPERTY OWNER REUVEN + SUSAN UBERMAN TELEPHONE NO. 301-933-0353
(Contract/Purchaser) (Include Area Code)

ADDRESS 10903 FAWCETT STREET KENSINGTON MD 20895
CITY STATE ZIP

CONTRACTOR David Gregg TELEPHONE NO. _____
CONTRACTOR REGISTRATION NUMBER _____

PLANS PREPARED BY _____ TELEPHONE NO. _____
(Include Area Code)

REGISTRATION NUMBER _____

LOCATION OF BUILDING/PREMISE NOTE contractor says that tree poses
House Number A hazard Street Much of the tree is hollow and
Town/City parts are dead Election District _____
Nearest Cross Street By chance is the town responsible for any
Block of the cost? Subdivision _____
Folio _____ Parcel _____

A. TYPE OF PERMIT ACTION: (circle one)

<input checked="" type="radio"/> Construct	<input type="radio"/> Extend/Add	<input type="radio"/> Alter/Renovate	<input type="radio"/> Repair	Circle One: A/C	Slab	Room Addition
<input type="radio"/> Wreck/Raze	<input type="radio"/> Move	<input type="radio"/> Install	<input type="radio"/> Revocable Revision	Porch	Deck	Fireplace
				Fence/Wall (complete Section 4)	Other	Shed
						Solar
						Woodburning Stove
						Remove Tree

B. CONSTRUCTION COSTS ESTIMATE \$ 1250.00

C. IF THIS IS A REVISION OF A PREVIOUSLY APPROVED ACTIVE PERMIT SEE PERMIT # _____

D. INDICATE NAME OF ELECTRIC UTILITY COMPANY _____

E. IS THIS PROPERTY A HISTORICAL SITE? NO

PART TWO: COMPLETE FOR NEW CONSTRUCTION AND EXTEND/ADDITIONS

A. TYPE OF SEWAGE DISPOSAL

01 () WSSC	02 () Septic	2B. TYPE OF WATER SUPPLY
03 () Other _____		01 () WSSC
		02 () Well
		03 () Other _____

PART THREE: COMPLETE ONLY FOR FENCE/RETAINING WALL

A. HEIGHT _____ feet _____ inches

B. Indicate whether the fence or retaining wall is to be constructed on one of the following locations:

- On party line/Property line _____
- Entirely on land of owner _____
- On public right of way/easement _____ (Revocable Letter Required).

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

Signature of owner or authorized agent (agent must have signature notarized on back) Reuven Uberman Date 4-13-88

APPROVED For Chairperson, Historic Preservation Commission
DISAPPROVED _____ Signature Robert Hale Date 4/18/88

APPLICATION/PERMIT NO: OM 22-88 FILING FEE: \$ _____
DATE FILED: _____ PERMIT FEE: \$ _____
DATE ISSUED: _____ BALANCE \$ _____
OWNERSHIP CODE: _____ RECEIPT NO: _____ FEE WAIVED: _____

SEE REVERSE SIDE FOR INSTRUCTIONS

THE FOLLOWING ITEMS MUST BE COMPLETED AND THE REQUIRED DOCUMENTS MUST ACCOMPANY THIS APPLICATION

DESCRIPTION OF PROPOSED WORK: (including composition, color and texture of materials to be used:)

Cut Down Large Silver Maple in
Front of 10403 Fawcett Street

(If more space is needed, attach additional sheets on plain or lined paper to this application)

ATTACH TO THIS APPLICATION (2) COPIES OF: SUCH SITE PLANS (lot dimensions, building location with dimensions, drives, walks, fences, patios, etc. proposed or existing) and/or ARCHITECTURAL DRAWINGS (floor plans, elevations, etc.), PHOTOGRAPHS OF THE AREA AFFECTED, as are necessary to fully describe the proposed work.

MAIL OR DELIVER THE APPLICATION AND ALL REQUIRED DOCUMENTS TO THE:
HISTORIC PRESERVATION COMMISSION
100 MARYLAND AVENUE
ROCKVILLE, MARYLAND 20850



Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850
279-1327

APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # _____

NAME OF PROPERTY OWNER Rebecca's Susan Williams TELEPHONE NO. 301 933-0353
(Contract/Purchaser) (Include Area Code)

ADDRESS 10903 BRADLEY STREET ROCKVILLE MD 20855
CITY STATE ZIP

CONTRACTOR David Gregg TELEPHONE NO. _____
CONTRACTOR REGISTRATION NUMBER _____

PLANS PREPARED BY _____ TELEPHONE NO. _____
(Include Area Code)

REGISTRATION NUMBER _____

LOCATION OF BUILDING/PREMISE NOTE: contractor says that the price

House Number 4 Street March of the 17th

Town/City Rockville Election District _____

Nearest Cross Street By choice - the town responsible for it

Lot _____ Block 1/2 Subdivision _____

Liber _____ Folio _____ Parcel _____

1A. TYPE OF PERMIT ACTION: (circle one)

Construct	Extend/Add	Alter/Renovate	Repair	Circle One: A/C	Slab	Room Addition
Wreck/Raze	Move	Install	Revocable	Porch	Deck	Fireplace
			Revision	Fence/Wall (complete Section 4)	Shed	Solar
					Woodburning Stove	Other <u>Renovate</u>

1B. CONSTRUCTION COSTS ESTIMATE \$ 1250

1C. IF THIS IS A REVISION OF A PREVIOUSLY APPROVED ACTIVE PERMIT SEE PERMIT # _____

1D. INDICATE NAME OF ELECTRIC UTILITY COMPANY _____

1E. IS THIS PROPERTY A HISTORICAL SITE? etc

PART TWO: COMPLETE FOR NEW CONSTRUCTION AND EXTEND/ADDITIONS

2A. TYPE OF SEWAGE DISPOSAL

01 () WSSC	02 () Septic
03 () Other _____	

2B. TYPE OF WATER SUPPLY

01 () WSSC	02 () Well
03 () Other _____	

PART THREE: COMPLETE ONLY FOR FENCE/RETAINING WALL

4A. HEIGHT _____ feet _____ inches

4B. Indicate whether the fence or retaining wall is to be constructed on one of the following locations:

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- Entirely on land of owner _____
- On public right of way/easement _____ (Revocable Letter Required).

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

Signature of owner or authorized agent (agent must have signature notarized on back) _____ Date _____

APPROVED X For Chairperson, Historic Preservation Commission

DISAPPROVED _____ Signature Robert Hahn Date 4/14/88

APPLICATION/PERMIT NO: CM 22-88 FILING FEE: \$ _____

DATE FILED: _____ PERMIT FEE: \$ _____

DATE ISSUED: _____ BALANCE \$ _____

OWNERSHIP CODE: _____ RECEIPT NO: _____ FEE WAIVED: _____

SEE REVERSE SIDE FOR INSTRUCTIONS

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DESCRIPTION OF PROPOSED WORK: (including composition, color and texture of materials to be used:)

Lined area for describing proposed work.

(If more space is needed, attach additional sheets on plain or lined paper to this application)

ATTACH TO THIS APPLICATION (2) COPIES OF: SUCH SITE PLANS (lot dimensions, building location with dimensions, drives, walks, fences, patios, etc. proposed or existing) and/or ARCHITECTURAL DRAWINGS (floor plans, elevations, etc.), PHOTOGRAPHS OF THE AREA AFFECTED, as are necessary to fully describe the proposed work.

MAIL OR DELIVER THE APPLICATION AND ALL REQUIRED DOCUMENTS TO THE: HISTORIC PRESERVATION COMMISSION 100 MARYLAND AVENUE ROCKVILLE, MARYLAND 20850

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DESCRIPTION OF PROPOSED WORK: (including composition, color and texture of materials to be used:)

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100 MARYLAND AVENUE
ROCKVILLE, MARYLAND 20850

Mr Andrew Dempster

Town of Kensington

4/17/88

Dear Mr Dempster.

The other day I submitted a permit request to remove a large tree from my front yard. This request was delivered to your home.

This afternoon parts of the tree began to fall. I called your house and spoke to your wife who said she would let you know that I called. I spoke to the Mayor who recommended that I not cut the tree down until receipt of a permit.

I am not anxious to pay for the removal of this tree, however, I do not want anyone to get hurt. It is my understanding that the tree is hollow and parts are completely dead. I am prepared to have this tree removed as soon as possible.

As the only thing delaying the removal of this tree is municipal - government - historical society approval, I disclaim any and all responsibility for the tree and any and all damage that it may cause to person or property.

Very truly yours,

Renven Weisman

10403 Fawcett Street
Kensington Maryland 20895

4/17/88

Bobbi,

This is an enormous Silver Maple tree immediately adjacent to the right-of-way. There is a considerable amount of dead wood in the main limbs of the tree. The owner of the property, Mr. Weerman is very concerned about the hazard this tree ~~poses~~ may create. Based on the contracted comments, my observations and the applicants' disapproval I would recommend approval of the ~~removal~~ this application.

Andrew Dempster