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3918 Prospect St. OM 52-87



Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850 279-1327

APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT #	
NAME OF PROPERTY OWNER MATTINGLY, Scott (Contract/Purchaser) ADDRESS 3918 PROSPECTST. A	TELEPHONE NO. 933 - 8745 (Include Area Code) <u>Kensington</u> MD J0895 STATE ZIP
CITY	STATE ZIP
CONTRACTOR CONTRACTOR REGISTRATION NU	TELEPHONE NO.
PLANS PREPARED BY	TELEPHONE NO
	(Include Area Code)
REGISTRATION NUMBER	
LOCATION OF BUILDING/PREMISE	
House Number Street Prespect St.	
Town/City <u>Kensington</u> MD Election D Nearest Cross Street <u>Connecticut</u> Avenue	istrict <u>13</u>
Nearest Cross Street Connecticut Avenue	·
Lot 26 25 Block 12 Subdivision Kensington	Park
Liber Folio Parcel	
1A. TYPE OF PERMIT ACTION : (circle one) Construct Extend/Add Alter/Renovate Repair Wreck/Raze Move Install Revocable Revision	Circle One: A/C Slab Room Addition Porch Deck Fireplace Shed Solar Woodburning Stove Fence/Wall (complete Section 4) Other Entrance Stept p Ap
 1B. CONSTRUCTION COSTS ESTIMATE \$ 400 1C. IF THIS IS A REVISION OF A PREVIOUSLY APPROVED ACTIVE PERMI 1D. INDICATE NAME OF ELECTRIC UTILITY COMPANY PERCO 1E. IS THIS PROPERTY A HISTORICAL SITE? 405 	T SEE PERMIT #
PART TWO: COMPLETE FOR NEW CONSTRUCTION AND EXTEND/ADDITIONS 2A. TYPE OF SEWAGE DISPOSAL 2B. 01 () WSSC 02 () Septic 03 () Other	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 1. On party line/Property line	·
I hereby certify that I have the authority to make the foregoing application, that plans approved by all agencies listed and I bereby acknowledge and accept this to be a Signature of owner or authorized agent (agen must have signature notarized on back APPROVED For Chairperson, Historic Preservation	condition for the issuance of this permit. <i>10 5 8 7</i> Date Onyfilission
DISAPPROVED Signature	Date 10/20/87
	ING FEE:\$
	RMIT FEE: \$
	LANCE \$ 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:) 011 tome diro steppin (3 ek pae www ional sheets on plain or lined paper to this application) **id**dj ouse

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 #	
(Contract/Purchaser)	TELEPHONE NO (Include Area Code)
ADDRESS	STATE ZIP
CONTRACTOR	TELEPHONE NO.
PLANS PREPARED BY	TELEPHONE NO
LOCATION OF BUILDING/PREMISE	
House Number Street	
	Election District
Nearest Cross Street	·
Lot Block Subdivisio	n
Liber	
1A. TYPE OF PERMIT ACTION: (circle one) Construct Extend/Add Alter/Renov Wreck/Raze Move Install Revoca	• • • •
1D. INDICATE NAME OF ELECTRIC UTILITY CO	2B. TYPE OF WATER SUPPLY 01 () WSSC 02 () Well
2. Entirely on land of owner	
	foregoing application, that the application is correct, and that the construction will comply with edge and accept this to be a condition for the issuance of this permit.
Signature of owner or authorized agent (agent must have	
******	*************************
APPROVED For Chair	person, Historic Preservation Commission
DISAPPROVED Signature	Date
APPLICATION/PERMIT NO:	FILING FEE:\$
DATE FILED:	PERMIT FEE:\$
DATE ISSUED:	
OWNERSHIP CODE:	RECEIPT NO: FEE WAIVED:

SEE REVERSE SIDE FOR INSTRUCTIONS

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

2.4

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

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

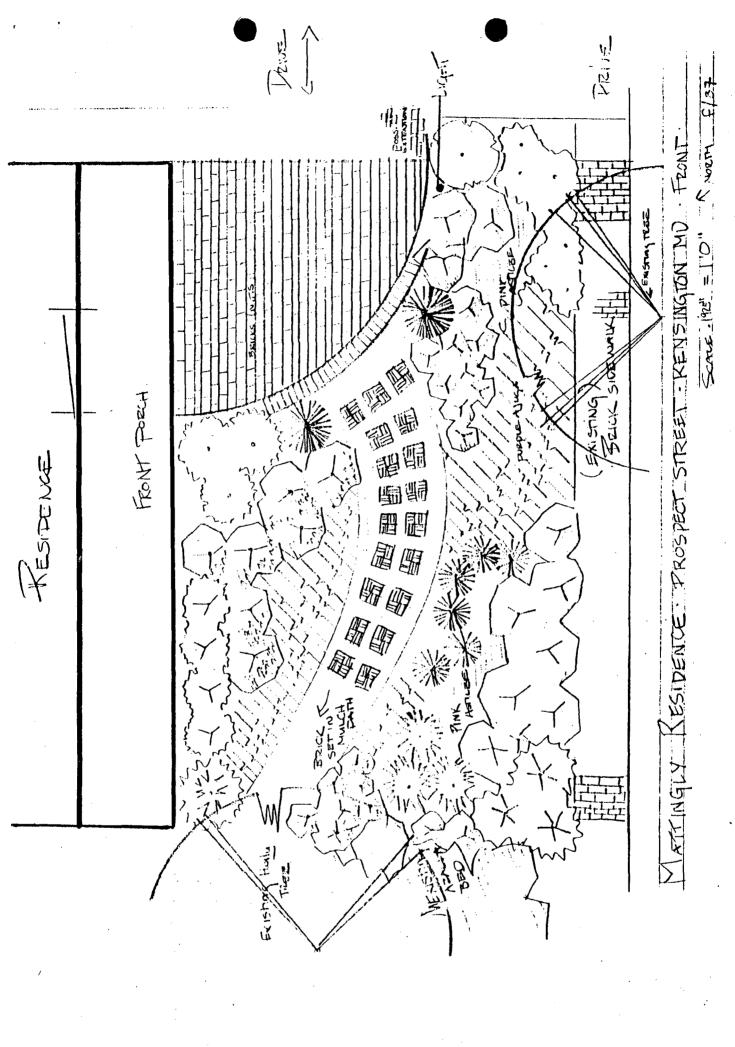
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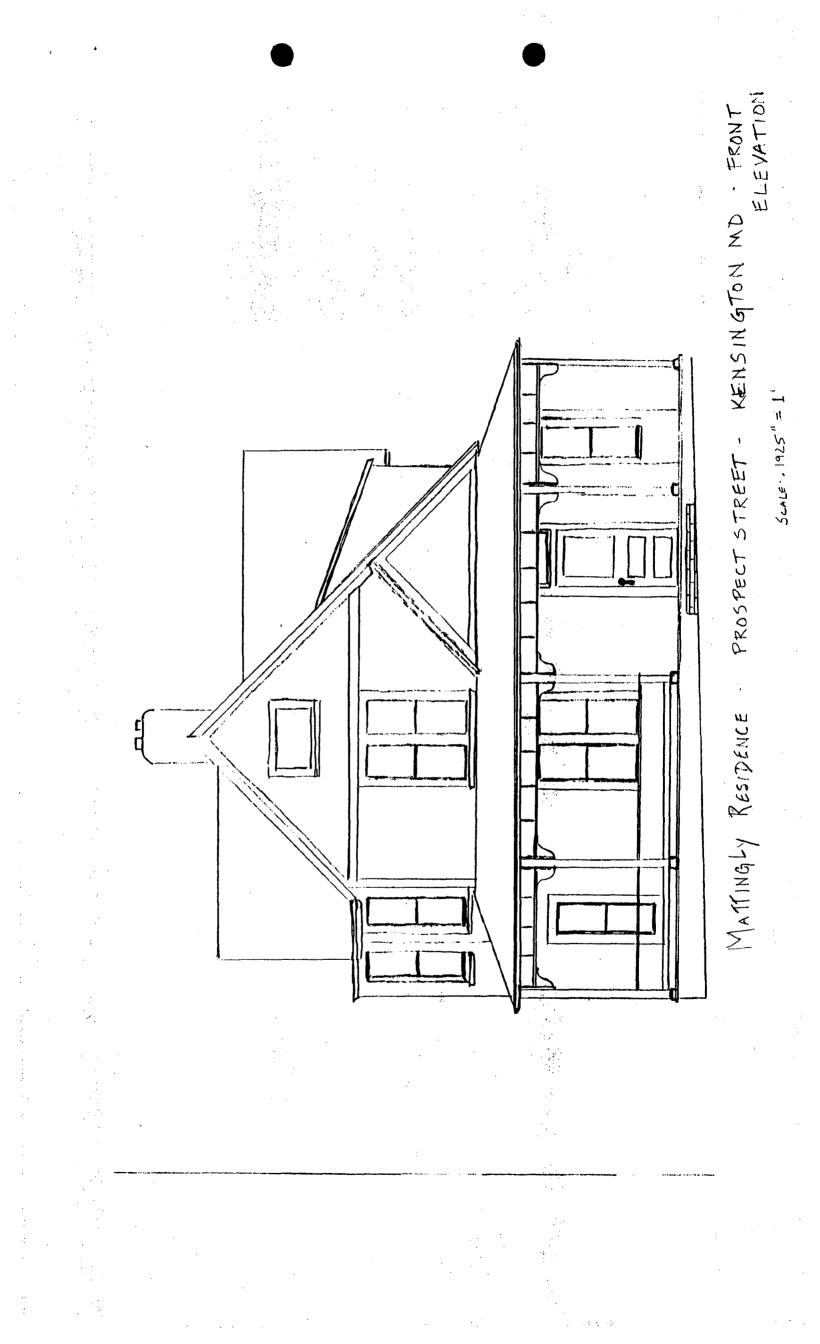
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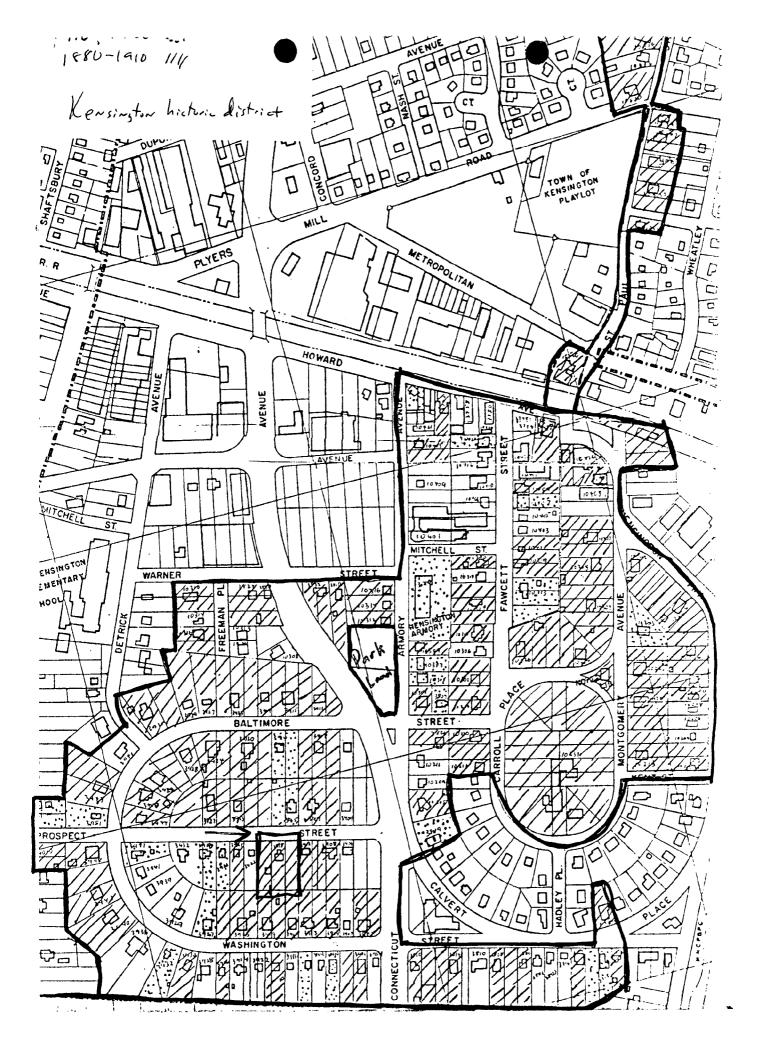
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MONTGOMERY COUNTY HISTORIC PRESERVATION COMMISSION

LOCAL ADVISORY COMMITTEE REVIEW FORM

EXTERIOR ALTERATIONS

I. Location of property a. Located within the KENSINGTON historic district. b. This is a Master Plan/Atlas historic district (circle one). c. Address of Property: 3918 PROSPELT ST. KENSINGTON, MD. d. Property owner's name, address and phone number: GLOTT AND DORIS -MATTINGLY -T.votegsald .d . >=2 ------(h) 933-8745 (w)_____ e. Is this property a contributing resource within the historic district? Yes ____ No____ f. On a map of the district locate this property and any adjacent historic resources. Will this work impact other contributing historic resources? Yes_____No__ II. Description of work proposed a. Briefly describe proposed work: LANDSCAPE FRONT GARD , NEW PORCH STEP, REVISE PORCH RAIL b. Is this work on the front, rear, or side of the structure? c. Is the work visible from the street? 4ES and the second seco بالدي بيوم الأراب المحاري المراجع المحاد d. What are the materials to be used? BRICK PAUERS , WOOD PAIL STEP e. Are these materials compatible with existing materials? How? If not, why? 4ES SAME

III.Recommendation of the Local Advisory Committee

a. Approval of Work

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- Which criteria found in the Ordinance for Historic Preservation (Sec. 24A-8-b of the Montgomery County Code) does this work meet?
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- 2. What conditions, if any, must be met in order for the proposed work to meet the above criteria? (example: the proposed windows should be double hung to conform with existing windows)

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- b. Disapproval of Work
 - On what grounds is disapproval recommended? Refer to Sec. 24A-8.

2. How could this proposal be altered so as to be approved?

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IV. Additional comments

Date on which application receive	a: OCT. 5, 1987
Date of LAC meeting at which appl	ication was reviewed: OCT. 5.1987
Form completed by: Prall Hilit	the Title: CHRMN
Member of: KENSINGTON LAC	<u></u>
Date: OCT. 16, 1987	

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