

31/6 10549 St. Paul St.
SA 10-86



Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850
279-1327

APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # 102 1964

NAME OF PROPERTY OWNER PAULA MERCER TELEPHONE NO. 301 933-3026
(Contract/Purchaser) (Include Area Code)

ADDRESS 10549 ST PAUL KENSINGTON MD 20895
CITY STATE ZIP

CONTRACTOR SELF TELEPHONE NO. _____
CONTRACTOR REGISTRATION NUMBER _____

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

REGISTRATION NUMBER _____

LOCATION OF BUILDING/PREMISE

House Number 10549 Street ST PAUL

Town/City KENSINGTON Election District _____

Nearest Cross Street ST PAUL

Lot P1 Block _____ Subdivision 15

Liber 6339 Folio 688 Parcel _____

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

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

1B. CONSTRUCTION COSTS ESTIMATE \$ 150.00

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

1D. INDICATE NAME OF ELECTRIC UTILITY COMPANY PEPCO

1E. IS THIS PROPERTY A HISTORICAL SITE? _____

PART TWO: COMPLETE FOR NEW CONSTRUCTION AND EXTEND/ADDITIONS

2A. 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

4A. HEIGHT _____ feet _____ inches

4B. 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.

Paula Mercer _____ 1-23-86
Signature of owner or authorized agent (agent must have signature notarized on back) Date

APPROVED X For Chairperson/ Historic Preservation Commission

DISAPPROVED _____ Signature Collette W. Hale Date 2/13/86

APPLICATION/PERMIT NO: SA 10-86 FILING FEE: \$ _____

DATE FILED: 2/13/86 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:)

1. Installation of bay window, (5'4" wide)

2. Opening of enclosed back porch on all sides by removal of windows and siding, retaining original roof, floor & footings. Replacing present steps with platform steps that will surround porch.

Materials: 1. Window - Anderson 45° BAY IN WHITE (PICTURED SPECS ATTACHED)
2. STEPS - NATURAL WOOD

(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