

31/7 10031 Pratt Pl.  
OM 20-86

# APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # 2360133  
 NAME OF PROPERTY OWNER GARY WING TELEPHONE NO. 301-288-3517  
(Contract/Purchaser) (Include Area Code)  
 ADDRESS 10031 PRATT PLACE SILVER SPRING MD.  
CITY STATE ZIP  
 CONTRACTOR SIM BRUMSTED TELEPHONE NO. 301-992-9349  
CONTRACTOR REGISTRATION NUMBER 21988  
 PLANS PREPARED BY SIM BRUMSTED TELEPHONE NO. 301-992-9349  
(Include Area Code)  
 REGISTRATION NUMBER \_\_\_\_\_

LOCATION OF BUILDING/PREMISE  
 House Number 10031 Street PRATT PLACE  
 Town/City SILVER SPRING Election District 13  
 Nearest Cross Street CAPITOL VIEW AVE  
 Lot 25 Block 29 Subdivision CAPITOL VIEW PARK  
 Liber \_\_\_\_\_ Folio \_\_\_\_\_ Parcel \_\_\_\_\_

1A. TYPE OF PERMIT ACTION: (circle one)  
 Construct  Extend/Add  Alter/Renovate  Repair  Porch  Deck  Fireplace  Shed  Solar  Woodburning Stove  
 Wreck/Raze  Move  Install  Revocable  Revision  Fence/Wall (complete Section 4) Other \_\_\_\_\_  
 1B. CONSTRUCTION COSTS ESTIMATE \$ 45,000  
 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? YES

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:  
 1. On party line/Property line \_\_\_\_\_  
 2. Entirely on land of owner \_\_\_\_\_  
 3. 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.

James D. Brumsted 6/2/86  
 Signature of owner or authorized agent (agent must have signature notarized on back) Date

APPROVED X For Chairperson, Historic Preservation Commission  
 DISAPPROVED \_\_\_\_\_ Signature Christa Hall Date 6/10/86

APPLICATION/PERMIT NO: OM 20-86 FILING FEE: \$ \_\_\_\_\_  
 DATE FILED: \_\_\_\_\_ PERMIT FEE: \$ \_\_\_\_\_  
 DATE ISSUED: \_\_\_\_\_ BALANCE \$ \_\_\_\_\_  
 OWNERSHIP CODE: \_\_\_\_\_ RECEIPT NO: \_\_\_\_\_ FEE WAIVED: \_\_\_\_\_

SEE REVERSE SIDE FOR INSTRUCTIONS

THE FOLLOWING ITEM 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.)

DECK + SCREENED IN PORCH  
DECK WILL BE WOLMANIZED LUMBER  
PORCH WILL BE AN EXTENSION OF THE  
PRESENT HOME, IE SAME SIDING, ROOF  
SHINGLES, SCREENING, DOWNSPOUTS + GUTTERS.

(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

SEE THE REVERSE SIDE FOR INSTRUCTIONS