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APPLICATION FO	R
HISTORIC AREA	
NISIUNIC ANLA	
TAX ACCOUNT #	
NAME OF PROPERTY OWNER BM	BARD + SCOTT ECKERT TELEPHONE NO. (30) 587-5304
(Contract/Purchaser)	(Include Area Code)
ADDRESS 10035 PRATT	CITY STATE ZIP
CONTRACTOR POTOMAC	CONTRACTOR REGISTRATION NUMBER 2989
PLANS PREPARED BY	TELEPHDNE ND. 301-468-1228
	. (Include Area Code)
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LOCATION OF BUILDING/PREMISE	
House Number 10035	
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Nearest Cross Street	
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1A. TYPE OF PERMIT ACTION: (circle one) Circle One: A/C Slab Room Addition
Wreck/Raze Move Ir	Alter/Renovate Repair Porch Deck Fireplace Shed Solar Woodburning Stov
Wreck/Raze Move Ir 1B. CONSTRUCTION COSTS EST 1C. IF THIS IS A REVISION OF A	IMATE \$ # 1200.00 FREVISION TO DEFT. Fence Wall (complete Section 4). Other 230 82 UAM
Wreck/Raze Move Ir 1B. CONSTRUCTION COSTS EST 1C. IF THIS IS A REVISION OF A	IMATE \$ # 1200.00 PREVIOUSLY APPROVED ACTIVE PERMIT SEE PERMIT ² # ² (NIAYAAM 71 11/20 20) RIC UTILITY COMPANY DETCO
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THE FOLLOWING ITEMS MUST BE COMPLETED AND THE REQUIRED DOCUMENTS MUST ACCOMPANY THIS APPLICATION 이 말을 위한 것은 영향을 가운 물건이.

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(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 ORAWINGS (floor plans, elevations, etc.), PHOTOGRAPHS OF THE AREA AFFECTED, as are necessary to fully describe the proposed work.

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



Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850 279-1327

APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT #	1	_
NAME OF PROPERTY OWNER BREAMEN + SCOTT FCKE (Contract/Purchaser) ADDRESS 10035 PRATT PLACE SILVER	<u>72T</u> TELEPHONE ND. <u>(3a1)</u> <u>587</u> (Include Area Code) 49446 MD	20910
AUDRESS 10000 PKHI PLACE DIEVED -	STATE	ZIP
		1336
CONTRACTOR POTOMAC FEINGE CONTRACTOR REGISTRATIO	ON NUMBER 79X9	9-1970
PLANS PREPARED BY	(Include Area Code)	<u><u> </u></u>
REGISTRATION NUMBER		
LDCATION OF BUILDING/PREMISE		1. A.
House Number 10035 Street PRATT PLA		
Town/City SILVER SPRING Ele	ction District	
Nearest Cross Street UHPITAL VIEW AVENUE		
Lot 23 Block Subdivision PRATT	STATION	
Liber Folio Parcel		
1A. TYPE OF PERMIT ACTION : (circle one) Construct Extend/Add Alter/Renovate Repair Wreck/Raze Move Install Revocable Revision	Porch Deck Fireplace Shed	Solar Woodburning Stove
1B. CONSTRUCTION COSTS ESTIMATE \$ 12.00.00 1C. IF THIS IS A REVISION OF A PREVIOUSLY APPROVED ACTIVE 1D. INDICATE NAME OF ELECTRIC UTILITY COMPANY	<u>CO</u>	
PART TWO: COMPLETE FOR NEW CONSTRUCTION AND EXTEND/ADDI 2A. TYPE OF SEWAGE DISPOSAL 01 () WSSC 02 () Septic 03 () Other	2B. TYPE OF WATER SUPPLY	
 PART THREE: COMPLETE ONLY FOR FENCE/RETAINING WALL 4A. HEIGHT <u>feet</u> feet <u>n</u> inches 4B. Indicate whether the fence or retaining wall is to be constructed on on 1. On party line/Property line <u>one side on property</u> 2. Entirely on land of owner <u>rest fully on property</u> 3. On public right of way/easement 	line	
I hereby certify that I have the authority to make the foregoing application plans approved by all agencies listed and I hereby acknowledge and accept this $f_{\rm start}$	to be a condition for the issuance of this permit $2/28/87$	
Signature of owner or authorized agent (agent must have signature notarized	on back) Da	ate **********************
APPROVED For Chairperson, Historic Prese	ervation Commission	1 cm
DISAPPROVED Signature NKul	n fuln Date3/4	1 8 T
APPLICATION/PERMIT NO: OM 5-87	FILING FEE:\$	·
DATE FILED:	PERMIT FEE: \$	·
DATE ISSUED:	BALANCE \$	· · · · · · · · · · · · · · · · · · ·
OWNERSHIP CODE:	RECEIPT NO: FEEW	/AIVED:

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:)

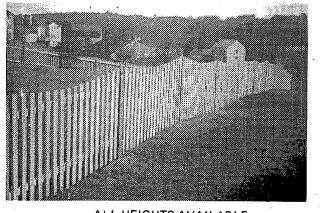
CONSTRUCTED 08 PENCE CEDNA SOMMOS BND PISTS

(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.

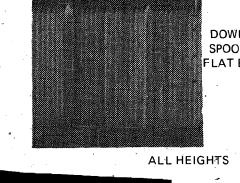
MAIL OR DELIVER THE APPLICATION AND ALL REQUIRED DOCUMENTS TO THE: HISTORIC PRESERVATION COMMISSION 100 MARYLAND AVENUE ROCKVILLE, MARYLAND 20850

WILLIAMSBURG STPLE



ALL HEIGHTS AVAILABLE 1 TO-5 INCH MT-VERNON DIP CEDAR BOARDS CEDAR OR PRESSURE TREATED POSTS

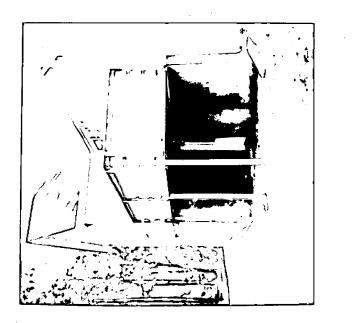




DOWELLED CEDAR PC SPOOLED RAILS 1/2 RO FLAT BACK CEDAR PIC







MONTGOMERY COUNTY HISTORIC PRESERVATION COMMISSION

LOCAL ADVISORY COMMITTEE REVIEW FORM

EXTERIOR ALTERATIONS

- Location of property I.
 - a. Located within the CAPITAL VIEW historic district. b. This is a Master Plan/Atlas historic district (circle one). c. Address of Property: 10035 PRATT PLACE SILVER SPRING, MD 20910 d. Property owner's name, address and phone number: BARBARA and SCOTT ECKERT PLACE 10035 PRATT SILVER SPRING, MD 20910 (h) (301) 587 - 5304 (W) (703) 648-1560
 - 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:

WILLIAMSBURG STYLE PICKET FENCE 4'0" High Using Bedar Boards BALLCOF HOUSE

- b. Is this work on the front, rear, or side of the structure? REAR, SIDE
- A small portion of the fince will bevisible from the street but not at hat are the materials to be used? All angles c. Is the work visible from the street?
- d. What are the materials to be used? CEDAR BOARDS
- e. Are these materials compatible with existing materials? How? If not, why?

III.Recommendation of the Local Advisory Committee

- a. Approval of Work
 - 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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Z4A-8-B 182

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?

IV. Additional comments

Date on which application received: $\frac{2/24}{24}$	
Date of LAC meeting at which application was	reviewed: 3/2/87
Form completed by: <u>PWL</u>	Title: Choir person
Member of: <u>Capital View</u> LAC	
Date: 3/2/87	

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