

23/65 2 High. St.  
OM 41-88



# Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850  
279-1327

## APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # \_\_\_\_\_

NAME OF PROPERTY OWNER ROGER STERLING TELEPHONE NO. 301 570-0861  
(Contract/Purchaser) TRACY BROWLIE (Include Area Code)

ADDRESS 2 HIGH ST. CITY BROOKEVILLE STATE MD ZIP 20833

CONTRACTOR OUR SELVES TELEPHONE NO. \_\_\_\_\_  
 \_\_\_\_\_ CONTRACTOR REGISTRATION NUMBER \_\_\_\_\_

PLANS PREPARED BY \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_  
 \_\_\_\_\_ (Include Area Code)  
 \_\_\_\_\_ REGISTRATION NUMBER \_\_\_\_\_

LOCATION OF BUILDING/PREMISE

House Number 2 Street HIGH ST.

Town/City BROOKEVILLE Election District 02

Nearest Cross Street MARKET ST.

Lot 48 Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Liber 513 Folio 337 Parcel 49

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

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

1B. CONSTRUCTION COSTS ESTIMATE \$ \_\_\_\_\_

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? 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 1 feet 6 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.

[Signature] \_\_\_\_\_ Date 5-24-88  
 Signature of owner or authorized agent (agent must have signature notarized on back)

APPROVED X For Chairperson, Historic Preservation Commission

DISAPPROVED \_\_\_\_\_ Signature [Signature] Date 6/24/88

APPLICATION/PERMIT NO: OM 41-88 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:)

REMOVE RECENT VINTAGE STOCKADE  
FENCE. REPLACE WITH LOW SINGLE  
TIER STONE WALL.

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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 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

REMOVE RECENT VINYL STAIRCASE  
FENCE. REPLACE WITH LOW SINGLE  
TIER STONE WALL

## APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # \_\_\_\_\_

NAME OF PROPERTY OWNER ROGER STERLING TELEPHONE NO. 301 510 0861  
 (Contract/Purchaser) IKRAV BROOKSIDE (Include Area Code)

ADDRESS 2 HIGH ST. BROOKVILLE, MD 20833  
 CITY STATE ZIP

CONTRACTOR OUR SELVES TELEPHONE NO. \_\_\_\_\_  
 CONTRACTOR REGISTRATION NUMBER \_\_\_\_\_

PLANS PREPARED BY \_\_\_\_\_ TELEPHONE NO. \_\_\_\_\_  
 (Include Area Code)

REGISTRATION NUMBER \_\_\_\_\_

LOCATION OF BUILDING/PREMISE

House Number 2 Street HIGH ST.

Town/City BROOKVILLE Election District 02

Nearest Cross Street MARKET ST.

Lot 4 Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Liber 51 Folio 337 Parcel 49

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

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

1B. CONSTRUCTION COSTS ESTIMATE \$ \_\_\_\_\_

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? 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

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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] Signature of owner or authorized agent (agent must have signature notarized on back) Date 5-24-88

APPROVED \_\_\_\_\_ For Chairperson, Historic Preservation Commission  
 DISAPPROVED \_\_\_\_\_ Signature [Signature] Date 6/14/88

APPLICATION/PERMIT NO: 141-27 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) AMPA THIS

REMOVE RECENT VINTAGE STOCKADE  
FENCE. REPLACE WITH LOW SINGLE  
TIER STONE WALL. AMPA THIS

AMPA THIS

(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

MONTGOMERY COUNTY HISTORIC PRESERVATION COMMISSION

LOCAL ADVISORY COMMITTEE REVIEW FORM

EXTERIOR ALTERATIONS

I. Location of property

a. Located within the Brockville historic district.

b. This is a Master Plan/Atlas historic district (circle one).

c. Address of Property: 2 High St

d. Property owner's name, address and phone number:

Roger Sterling/Tracy Browne  
2 High St 20833

(h) 570-0861 (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:

Remove redwood stockade fence, abetge of property. Replace with low single tier stone wall.

b. Is this work on the front, rear, or side of the structure?

c. Is the work visible from the street? YES

d. What are the materials to be used? Removal of fence

e. Are these materials compatible with existing materials? How? If not, why?

III. Recommendation of the Local Advisory Committee

a. Approval of Work

1. Which criteria found in the Ordinance for Historic Preservation (Sec. 24A-8-b of the Montgomery County Code) does this work meet?

1, 2, 5

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)

b. Disapproval of Work

1. 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

Removal of this fence enhances property.

Date on which application received: 5/24/88  
Date of LAC meeting at which application was reviewed: 6/21/88  
Form completed by: Mary Gardner Title: Chair  
Member of: Brookville LAC  
Date: 6/22/88