

23/65 3 Church St.

OM 9-86



Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850

279-1327-2090

APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # n/a

NAME OF PROPERTY OWNER John & Pat Seibel TELEPHONE NO. 301-946-8190
(Include Area Code)

ADDRESS 2927 Weisman Rd Wheaton MD 20902
CITY STATE ZIP

CONTRACTOR Parton & Swanson TELEPHONE NO. 301-964-1752
CONTRACTOR REGISTRATION NUMBER 610795

PLANS PREPARED BY Ryland Homes TELEPHONE NO. 301-730-8800
(Include Area Code)

REGISTRATION NUMBER _____

LOCATION OF BUILDING/PREMISE

House Number 3 Street CHURCH

Town/City BROOKVILLE Election District 8th

Nearest Cross Street Georgia Ave

Lot 7043 Block 151 Subdivision _____ Parcel 732102

- 1A. TYPE OF PERMIT ACTION: (circle one)
- | | | | | | |
|---|-------------------------------------|---|------------------------------------|--|--|
| <input checked="" type="checkbox"/> Construct | <input type="checkbox"/> Extend/Add | <input type="checkbox"/> Alter/Renovate | <input type="checkbox"/> Repair | <input type="checkbox"/> Slab | <input type="checkbox"/> Room Addition |
| <input type="checkbox"/> Wreck/Raze | <input type="checkbox"/> Move | <input type="checkbox"/> Install | <input type="checkbox"/> Revocable | <input type="checkbox"/> Fence/Wall (complete Section 4) | <input type="checkbox"/> Solar |
| | | | <input type="checkbox"/> Revision | <input type="checkbox"/> Other <u>n/a</u> | <input type="checkbox"/> Woodburning Stove |
- 1B. CONSTRUCTION COSTS ESTIMATE \$ 55,000
- 1C. IF THIS IS A REVISION OF A PREVIOUSLY APPROVED ACTIVE PERMIT SEE PERMIT # n/a
- 1D. INDICATE NAME OF ELECTRIC UTILITY COMPANY PEPCO
- 1E. IS THIS PROPERTY A HISTORICAL SITE? NO (YES ALL BROOKVILLE IS)

PART TWO: COMPLETE FOR NEW CONSTRUCTION AND EXTEND/ADDITIONS

- 2A. TYPE OF SEWAGE DISPOSAL
- | | |
|---|------------------------------------|
| 01 <input checked="" type="checkbox"/> WSSC | 02 <input type="checkbox"/> Septic |
| 03 <input type="checkbox"/> Other _____ | |
- 2B. TYPE OF WATER SUPPLY
- | | |
|---|---|
| 01 <input type="checkbox"/> WSSC | 02 <input checked="" type="checkbox"/> Well |
| 03 <input type="checkbox"/> 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.

John & Pat Seibel 4-2-86
 Signature of owner or authorized agent (agent must have signature notarized on back) Date

APPROVED X For Chairperson, Historic Preservation Commission
 Signature White W. Hahn Date 4/11/86

APPLICATION/PERMIT NO: 049-86 FILING FEE: \$ _____
 DATE FILED: _____ PERMIT FEE: \$ _____
 DATE ISSUED: _____ BALANCE \$ _____
 OWNERSHIP CODE: _____ RECEIPT NO: _____ FEE WAIVED: _____

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.)

The house is wood frame with 4" vinyl siding. It will be gray with black roof, black shutters, white trim and white door.

It consists of 3 bedrooms, 2 Baths, full walkout basement.

A proposed deck out back off of the dining area.

approx 1000 ft from Church on a direct line behind F. Luten's house

(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

APPROVED

DATE

DATE

DATE

DATE