

31/7 10010 Menlo Ave.
OM 14-86



Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850

APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # _____

NAME OF PROPERTY OWNER MARGARET A. BANNIGAN TELEPHONE NO. (301) 588-3249
 (Contract/Purchaser) (Include Area Code)

ADDRESS 10010 MENLO AVE Silver Spring MD 20910
 CITY STATE ZIP

CONTRACTOR _____ TELEPHONE NO. _____

PLANS PREPARED BY _____ CONTRACTOR REGISTRATION NUMBER _____ TELEPHONE NO. _____
 (Include Area Code)

REGISTRATION NUMBER _____

LOCATION OF BUILDING/PREMISE

House Number 10010 Street MENLO AVENUE

Town/City Silver Spring Election District 13

Nearest Cross Street Leafy Ave and Baker St

Lot 5+16 Block 32 Subdivision Capital View

Liber _____ Folio _____ Parcel _____

- 1A. TYPE OF PERMIT ACTION: (circle one)
- | | | | | | | |
|------------|------------|----------------|-----------|---------------------------------|------|-------------------|
| Construct | Extend/Add | Alter/Renovate | Repair | Circle One: A/C | Slab | Room Addition |
| Wreck/Raze | Move | Install | Revocable | Porch | Deck | Fireplace |
| | | | Revision | Fence/Wall (complete Section 4) | Shed | Solar |
| | | | | | | Woodburning Stove |
- The removal + repair wall damage Gate wall
- 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 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 |
| 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:
- 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.

Margaret A. Bannigan 4/28/86
 Signature of owner or authorized agent (agent must have signature notarized on back) Date

APPROVED X For Chairperson Historic Preservation Commission

DISAPPROVED _____ Signature Robert Halim Date 5/9/86

APPLICATION/PERMIT NO: OM 14-86 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):

Removal of Tree
Repair wall damage

TAX ACCOUNT #
NAME OF PROPERTY OWNER
ADDRESS
CITY
CONTRACTOR'S REGISTRATION NUMBER
PLANNED BY
DATE OF PROPOSAL
HOW

(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

PART TWO: COMPLETE FOR NEW CONSTRUCTION AND EXTENSIONS
3A. TYPE OF SEWAGE DISPOSAL
01 () WSSC 02 () Septic
03 () Other
3B. 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 face of retaining wall is to be constructed on one of the following locations:
1. The party's property line
2. Entirely on land of owner
3. Other _____

I hereby certify that I am the owner of the property and I hereby authorize and accept this to be a condition of the proposed work.

APPROVED
DATE ISSUED
DATE FILED
APPLICATION PERMIT NO.
FEE
OWNER'S CODE