

30/13 10700 Kenilworth Ave.
SA 33-86



Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850
279-1327

APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # 61532
 NAME OF PROPERTY OWNER KANTORZ-MELAT PARTNERSHIP TELEPHONE NO. 946 1043
 (Contract/Purchaser) (Include Area Code)
 ADDRESS 10702 KENILWORTH GARRETT PARK MD. 20896
 CITY STATE ZIP
 CONTRACTOR _____ TELEPHONE NO. _____
 CONTRACTOR REGISTRATION NUMBER _____
 PLANS PREPARED BY SULLIVAN AND ALMY INC. TELEPHONE NO. 657 2290
 (Include Area Code)
 REGISTRATION NUMBER 2714R

LOCATION OF BUILDING/PREMISE
 House Number 10700 Street KENILWORTH AVE
 Town/City GARRETT PARK Election District 4
 Nearest Cross Street OXFORD
 Lot 17 Block 50 Subdivision GARRETT PARK
 Liber 1342 Folio 119 Parcel _____

1A. TYPE OF PERMIT ACTION: (circle one)
 Construct Extend/Add Alter/Renovate Repair
 Wreck/Raze Move Install Revocable Revision
 Circle One: A/C Slab Room Addition
 Porch Deck Fireplace Shed Solar Woodburning Stove
 Fence/Wall (complete Section 4) Other _____
 1B. CONSTRUCTION COSTS ESTIMATE \$ \$ 125,000.00
 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/ADDITDNS
 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.

David O. Almy agent 5 AUG 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 Hall Date 9/15/86

APPLICATION/PERMIT NO: SA 33-86 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.)

THIS WORK CONSISTS OF A NEW SINGLE FAMILY RESIDENCE, TWO STORY BUILDING AND BASEMENT. THE HOUSE IS CONSTRUCTED OF BRICK VENEER AT THE FOUNDATION AND FIRST FLOOR AND CLAPBOARD (ALUM) SIDING. THE HOUSE HAS A VICTORIAN TOWER OVER THE MAIN ENTRANCE WITH FISH SCALE SHINGLES AND SAWN CEDAR SHINGLED ROOF. THE MAIN ROOF OF THE HOUSE IS ASPHALT SHINGLES. THE DESIGN IS AN ATTEMPT TO BLEND IN WITH THE MASONRY HOUSE NEXT DOOR AND TO REFLECT SOME OF THE VICTORIAN FEATURES OF GARZETT PAR.

(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