

23/19 Retirement
OM 9-87

23/19



Historic Preservation Commission

100 Maryland Avenue, Rockville, Maryland 20850
279-1327

APPLICATION FOR HISTORIC AREA WORK PERMIT

TAX ACCOUNT # 3333

NAME OF PROPERTY OWNER PERCY W. & J.G. WILLET TELEPHONE NO. _____
 (Contract/Purchaser) (Include Area Code)

ADDRESS 5501 GRIFFITH ROAD, GAITHERSBURG MD. 20879
 CITY STATE ZIP

CONTRACTOR DOUGLAS A. FAITH TELEPHONE NO. 869-0507
 CONTRACTOR REGISTRATION NUMBER MHC 16586

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

REGISTRATION NUMBER _____

LOCATION OF BUILDING/PREMISE

House Number 5501 Street GRIFFITH ROAD

Town/City GAITHERSBURG Election District 01

Nearest Cross Street _____

Lot _____ Block _____ Subdivision ADDITION TO BROOKS GROVE

Liber 5822 Folio 861 Parcel P-909 MAP HW-11

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

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

1B. CONSTRUCTION COSTS ESTIMATE \$ \$20,000

1C. IF THIS IS A REVISION OF A PREVIOUSLY APPROVED ACTIVE PERMIT SEE PERMIT # NO

1D. INDICATE NAME OF ELECTRIC UTILITY COMPANY POTOMAC EDISON

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 <input checked="" type="checkbox"/> Septic
03 () Other	

2B. TYPE OF WATER SUPPLY

01 () WSSC	02 <input checked="" type="checkbox"/> 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.

Signature of owner or authorized agent (agent must have signature notarized on back) _____ Date _____

APPROVED X For Chairperson, Historic Preservation Commission

DISAPPROVED _____ Signature Adriana W. Hall Date 4/17/87

APPLICATION/PERMIT NO: 019-87 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:)

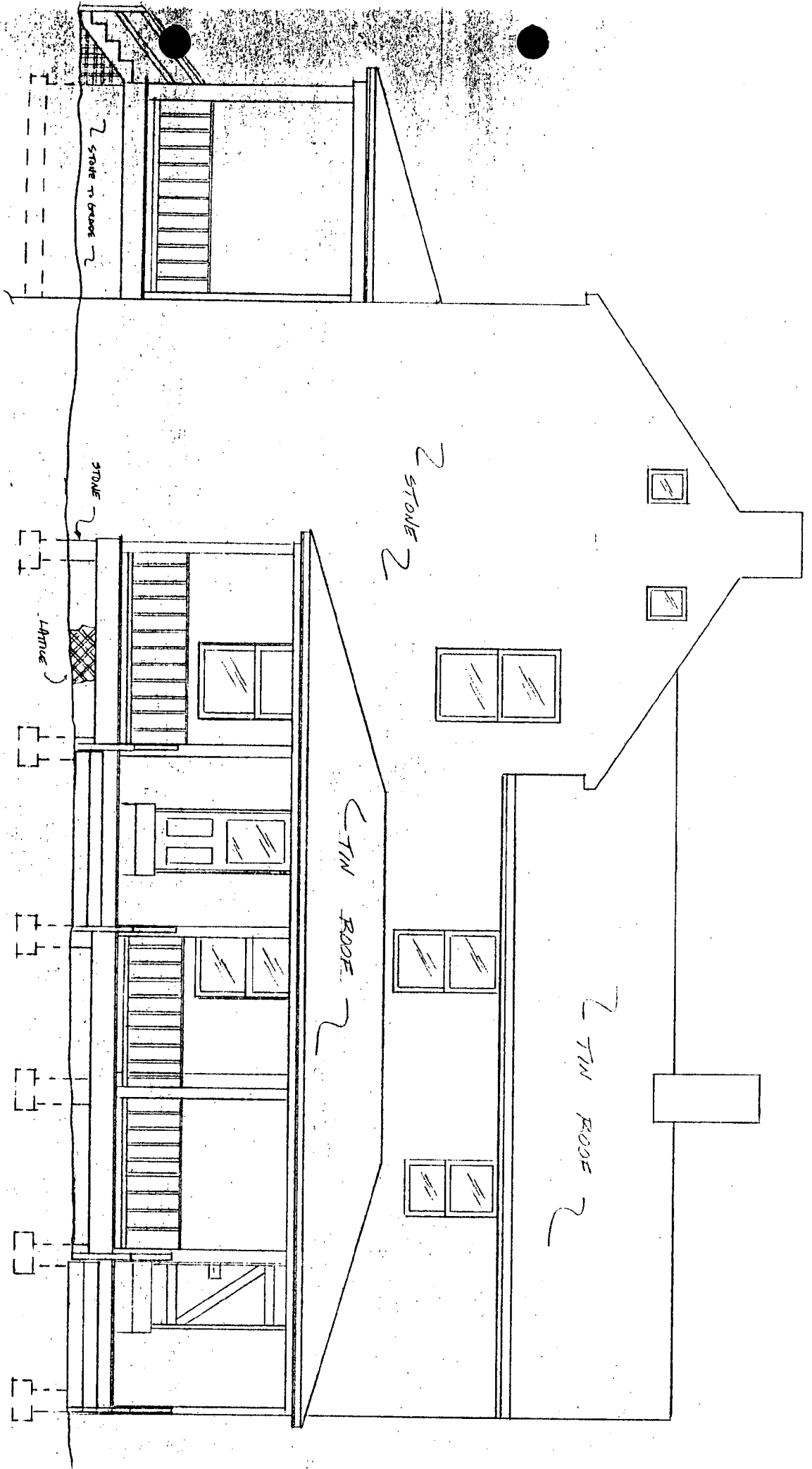
REPAIR & RENOVATE EXISTING PORCHES
FRONT & SIDE IN A MANNER TO BRING THE
PORCHES UP TO A SAFE & USABLE EXISTENCE.
ALL MILLWORK ETC. IS TO BE MADE TO MATCH
EXISTING

(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

SIDE ELEVATION



L-O STUM

2 TIN ROOF 2

2 TIN ROOF 2

2 STONE

2 STONE TO GRADE 2

2 TIN ROOF 2

GRADE

FRONT ELEVATION

1/2" = 1'-0"

