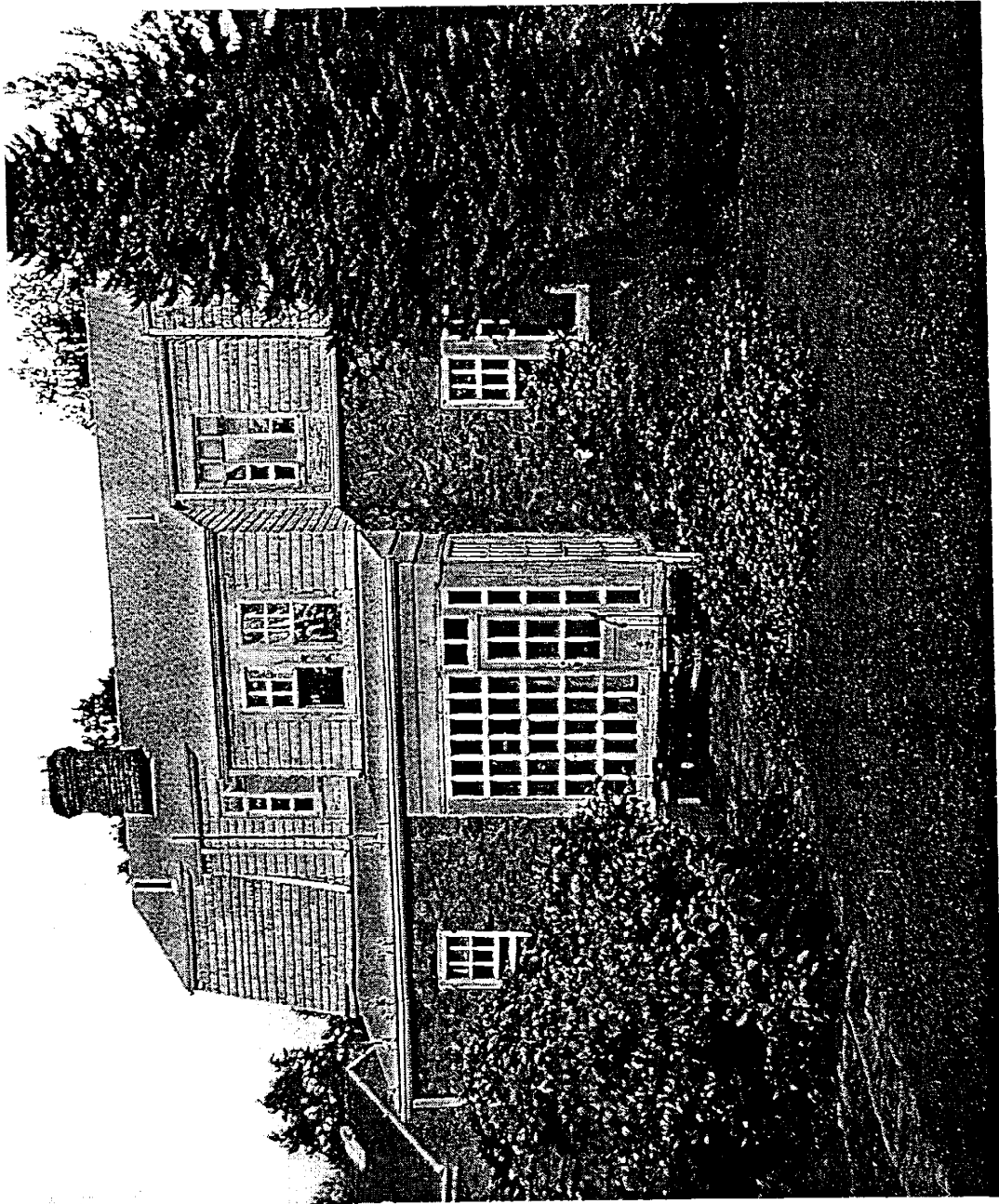
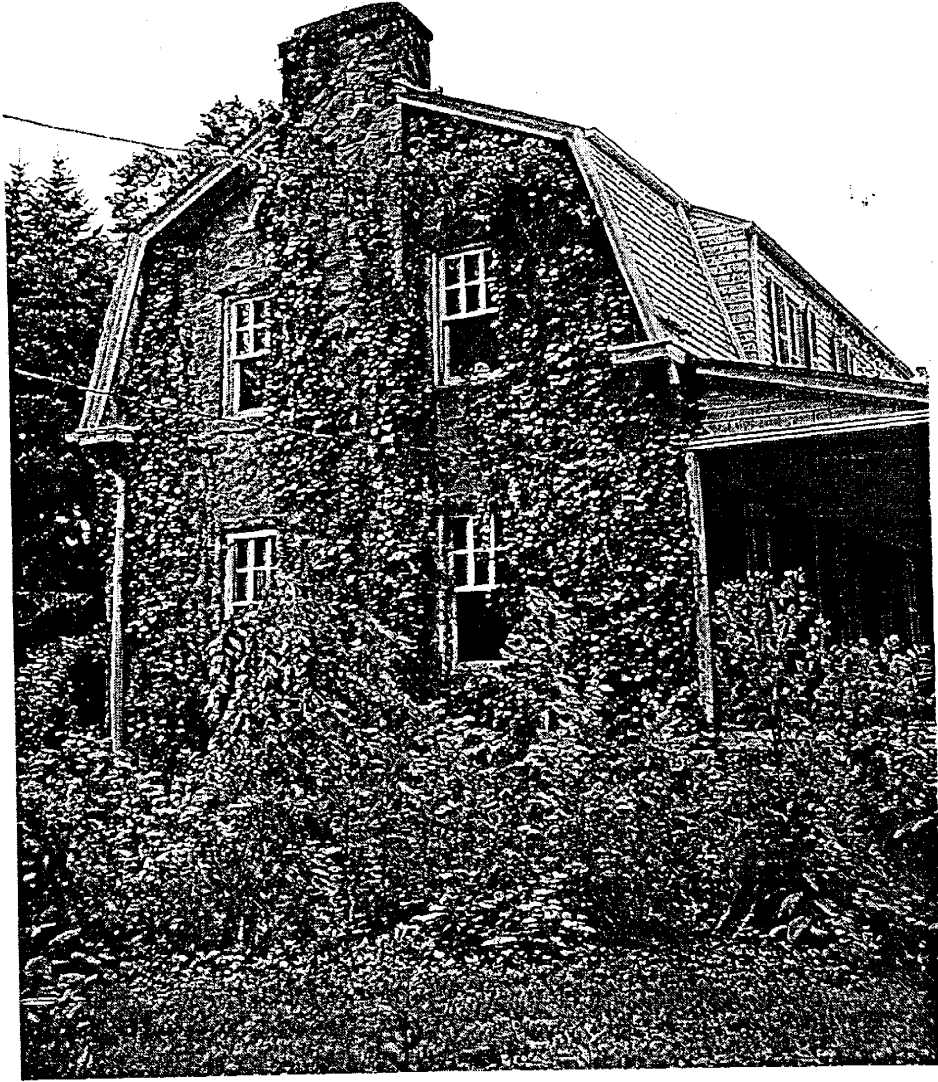


5004 River Road Front Elevation



5004 River Road Rear Elevation



5004 River Road Southeast Side Elevation



5004 River Road Northwest Side Elevation



Montgomery County Maryland  
Department of Permitting Services

255 Rockville Pike, 2<sup>nd</sup> Floor  
Rockville, Maryland 20850-4153  
(240) 771-6300 Fax (240) 777-6262  
http://permits.emontgomery.gov

### APPLICATION FOR RESIDENTIAL BUILDING PERMIT

Sediment Control # 209722 Building AP #(s) \_\_\_\_\_ Demolition # 3/8/62

#### DESCRIPTION OF WORK: (check all that apply)

- ADD
  - ALTER
  - CONSTRUCT
  - DEMOLISH
  - MOVE
  - FOUNDATION ONLY
  - RESTORE and/or REPAIR
- \* Gross Sq. Ft. of Area Created or Affected by this Action: \_\_\_\_\_  
 Estimated Cost: \$ \_\_\_\_\_  
 Disturbed Land Area: \_\_\_\_\_

#### USE OF STRUCTURE:

- SINGLE FAMILY DWELLING
  - TOWNHOUSE
  - FENCE\*
  - RETAINING WALL
  - TRAILER\*\*
  - MODULAR HOME\*\*
  - HOT TUB
  - OTHER \_\_\_\_\_
- DECK
  - DUPLEX
  - BASEMENT
  - POOL IN GROUND
  - POOL ABOVE GROUND
  - DETACHED GARAGE
  - SHED

#### \* IF BUILDING A FENCE OR RETAINING WALL

HEIGHT: \_\_\_\_\_ ft \_\_\_\_\_ in. Note: (A signed approval letter from the adjacent lot owner(s) is required)  
 Located entirely on the land of the owner  Public Right of Way/Easement  Located on the lot line

\*\*NOTE: \_\_\_\_\_  
 Manufacturer's Name and Model # for All Trailers and Modular Homes

#### MODEL HOUSE PROGRAM: to build new homes

- INITIAL SUBMITTAL or
- PREVIOUSLY APPROVED PERMIT # \_\_\_\_\_

#### REFER-BACK SYSTEM: to build new homes & pools

- INITIAL SUBMITTAL or
- PREVIOUSLY APPROVED PERMIT # \_\_\_\_\_

New Home Model Name or # \_\_\_\_\_

#### REVISION to ORIGINAL PERMIT # \_\_\_\_\_

(Original permit has been issued and is active)

- SITE  STRUCTURAL  HOUSE TYPE  OTHER: \_\_\_\_\_

#### BUILDING PREMISE ADDRESS:

Add'l. House #'s if building new townhouses: \_\_\_\_\_

House Number 5204 Street River Rd. City Bethesda Zip 20816

Lot(s) \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Nearest Cross Street Greenway Dr

APPLICANT INFORMATION: Contact ID #: \_\_\_\_\_ Fax #: 301 654-6115 Email: dkelly6c@comcast.net

Name of Applicant David Kelly Daytime Phone #: \_\_\_\_\_  
 (Permit will be issued to Applicant)

Address 5202 Norway Dr City Cherry Chase State MD Zip 20815

CONTACT INFORMATION: Contact ID #: \_\_\_\_\_ Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Contact Person David Kelly Daytime Phone # \_\_\_\_\_  
 (if other than Applicant)

Address SAME City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contractor SELF MHC or Montgomery County Builders License # \_\_\_\_\_

Contractor Address \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

EXPEDITED PLAN REVIEW:  I request an Expedited Plan Review, when available, which is subjected to additional fees.

(Applicant Signature) [Signature]

Date 8-9-03

(Print Name) David Kelly

(20)

218102

**ADDITIONAL APPROVALS:**

Properties located within historic districts, municipalities and special taxing districts may require additional approvals beyond the required Department of Permitting Services (DPS) building permit. For projects located in the City of Takoma Park's Commercial Revitalization Overlay, certain permits must be approved by the City prior to commencing construction. Please refer to 'Permit Procedures for Properties within a Montgomery County Municipality' for more information.

TYPE OF WATER SUPPLY  WSSC  WELL  OTHER (specify) \_\_\_\_\_

SEWAGE DISPOSAL  WSSC  SEPTIC  OTHER (specify) \_\_\_\_\_

MPDU ... 20% of this new home development will be built as Moderately Priced Dwelling Units  Yes  No

IMPACT TAX ... New Homes will be assessed an Impact Tax based on the area where the house is built ... (see Impact Tax guide)  
 I will exercise an approved Impact Tax Credit, a copy of which is attached

DAP & EDAET AGREEMENTS.... Agreement must be attached for new homes when applicable.

SPECIAL EXCEPTION: Is this lot subject to a Special Exception?  Yes, Case # \_\_\_\_\_  No

VARIANCE: Has a Variance been granted to perform this work?  Yes, Variance # \_\_\_\_\_  No

HISTORIC AREA IN ATLAS or MASTER PLAN: Is the property a Historic resource?  Yes  No

**AUTHORIZED AGENT AFFIDAVIT:** I hereby declare and affirm, under the penalty of perjury, that:

- I am duly authorized to make this permit application on behalf of: David Kelly  
(please print property owner's name)
  - The work proposed by this building permit application is authorized by the property owner; and
  - All matters and facts set forth in this Affidavit are true and correct to the best of my knowledge, information and belief.
- (Signature of Authorized Agent) [Signature] Date 9.8.3 (Print Name) David Kelly

**HOMEOWNER ACTING AS NEW HOME BUILDER AFFIDAVIT:**

By this instrument, I, as the property owner, am applying for an exemption from the licensing requirements for a building contractor, I hereby declare and affirm, under the penalty of perjury that:

- I or a member of my immediate family will perform any and all construction associated with the foregoing building permit application; and
  - The type of improvement indicated on the building permit application is designed for use as a residence or dwelling place for my own or my immediate family's use; and
  - I take full responsibility for all and any code violations.
  - All matters and facts set forth in this affidavit are true and correct to the best of my knowledge, information, and belief.
- (Signature of Property Owner) [Signature] Date 9.8.3 (Print Name) David Kelly

**TO BE READ BY THE APPLICANT:**

Any information that the applicant has set forth in this application that is false or misleading may result in the rejection of the application. A condition for the issuance of this permit is that the proposed construction will comply at all times with the plans as approved by all applicable government agencies. I hereby declare and affirm, under the penalty of perjury, that all matters and facts set forth in the building permit application are true and correct to the best of my knowledge, information and belief.

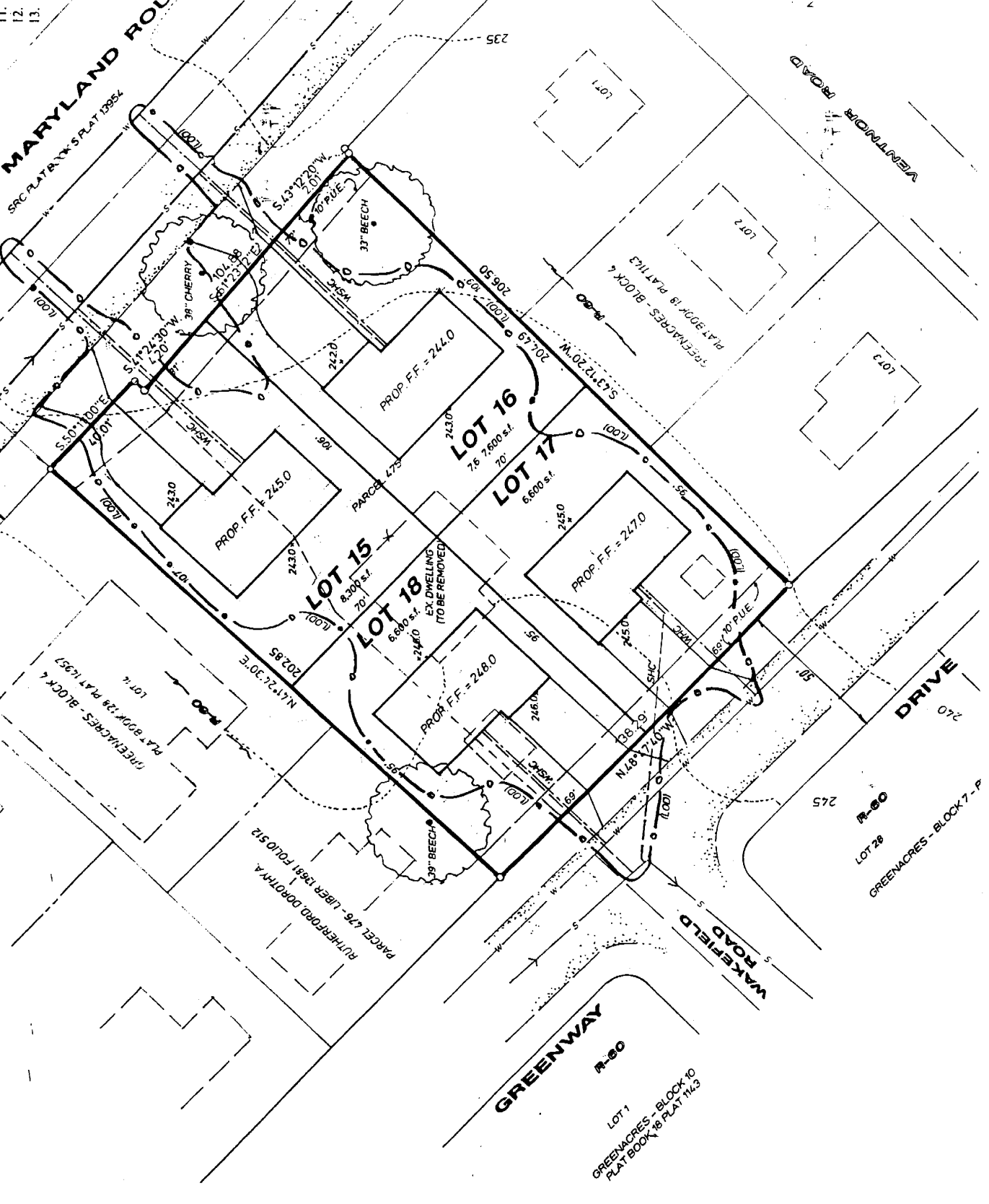
(Applicant's Signature) [Signature] Date 9.8.3 (Print Name) David Kelly

FOR OFFICE USE ONLY: Permit Fee: \$ \_\_\_\_\_ + Impact Tax, DAP or EDAET: \$ \_\_\_\_\_ Balance: \$ \_\_\_\_\_

(21)

11.  
12.  
13.

MARYLAND ROL  
SRC PLAT 1145 PLAT 13854



PROPOSED SUBDIVISION

