

DEPARTMENT OF INSPECTIONS, LICENSES & PERMITS 343J COURT HOUSE DRIVE ELLICOTT CITY, MD 21043 PERMITS (410) 313-2455 INSPECTIONS (410) 313-1850	HOWARD COUNTY RESIDENTIAL HEATING-VENTILATION-AIR CONDITIONING AND REFRIGERATION PERMIT APPLICATION	HVACR PERMIT # <u>M10000591</u> BUILDING PERMIT #
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BUILDING ADDRESS: <u>15153 Maxine Street</u> <u>Ellicott City, MD 21042</u> SUBDIVISION: CENSUS TRACT: SECTION: LOT: TAX MAP: BLOCK: ZONE:	SUITE/APT: AREA: PARCEL:	OWNERS NAME: <u>Dan Savin</u> ADDRESS: <u>10153 Maxine Street</u> CITY: <u>Ellicott City</u> STATE: <u>MD</u> ZIP CODE: <u>21042</u> HOME PHONE: <u>410 461-5250</u> WORK PHONE: <u>410 705-1793</u>
PROPERTY ID:	MAP COORDINATES:	
TYPE OF IMPROVEMENTS:	USE:	

<u>CHECK ONE</u>	<u>HOW MANY</u>	
SINGLE FAMILY DWELLING <input checked="" type="checkbox"/>	<u>1</u> ZONES	COMPANY NAME: <u>Louis Heating & Air, Inc.</u>
SINGLE FAMILY TOWNHOUSE <input type="checkbox"/>	___ ZONES	LICENSEE NAME: <u>John Davidson</u>
MULTI-FAMILY / HOTEL/MOTEL <input type="checkbox"/>	___ ROOMS	ADDRESS: <u>P.O. Box 396</u>
ASSISTED LIVING HOMES (16 OR FEWER RESIDENTS) <input type="checkbox"/>	___ ROOMS	CITY: <u>Sewern</u>
		STATE: <u>MD</u> ZIP CODE: <u>21144</u>
		PHONE: <u>410 551-1376</u> HVACR LICENSE NO: <u>5613</u>

New <input type="checkbox"/> Heating and Air Conditioning <input type="checkbox"/> Geo Thermal System	1/23/2010 Approved Without Completion Report (BB)	<input type="checkbox"/> Heating System Only <input type="checkbox"/> Ductless Mini Splits <input type="checkbox"/> Other Work (Describe): <input type="checkbox"/> Thru The Wall Systems
Replacement <input type="checkbox"/> Heating <input type="checkbox"/> Air Conditioning <input checked="" type="checkbox"/> Heating and Air Conditioning - <u>Geo thermal</u>	public use	Additions and Alterations <input type="checkbox"/> Heating <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Heating and Air Conditioning

****Replacement Geo Thermal Systems are not required; However, if a tax credit is being sought a permit is required****

Zones Permit Fee = # of Zones x \$40 = _____ Technology Fee (10% of Permit Fee) = _____ Plus Application Fee <u>\$50.00</u> Total Fees Due = _____	Rooms Permit Fee = # of Rooms x \$80 = _____ Technology Fee (10% of Permit Fee) = _____ Plus Application Fee \$50 <u>\$50.00</u> Total Fees Due = _____
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I HAVE CAREFULLY EXAMINED AND READ THIS APPLICATION AND KNOW IT IS TRUE AND CORRECT. THE WORK DESCRIBED HEREIN WILL BE PERFORMED BY A STATE HVACR LICENSED PERSON(S), AND ALL WORK WILL BE PERFORMED IN COMPLIANCE WITH APPLICABLE CODES AND STANDARDS OF HOWARD COUNTY THE STATE OF MARYLAND.

SIGNATURE OF LICENSEE John Davidson DATE _____
 PRINT NAME OF LICENSEE _____
 Email Address info@louisheatingandair.com

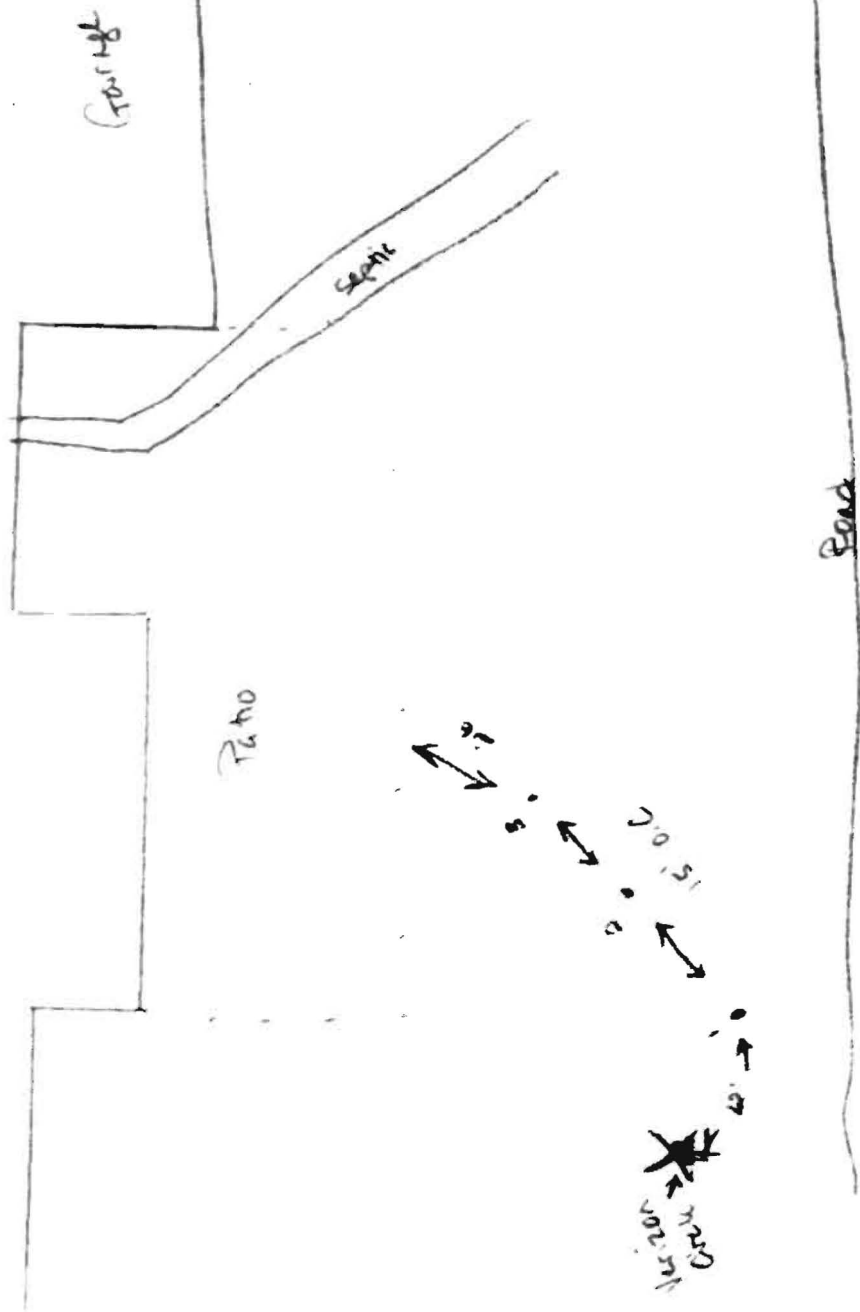
Validation Check Number: _____ Cash: _____ Receipt Number: <u>209427</u>
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Make check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

Distance from

Road	15'
Septic	25'
House	36'
Property line	20'

Daniel Sain
10153 SW Marine St
Elliot City, MO 20142



M1000591

Daniel Savare
10153 SW Marine St.
Ellicott City, MD 21042

