

DEPARTMENT OF INSPECTIONS, LICENSES & PERMITS 3430 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>M11006595</u> BUILDING PERMIT #
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BUILDING ADDRESS: SUITE/APT: <u>1159 WILLOW GREEN WAY</u> SUBDIVISION: CENSUS TRACT: SECTION: AREA: LOT: TAX MAP: PARCEL: BLOCK: ZONE: PROPERTY ID: MAP COORDINATES: TYPE OF IMPROVEMENTS: <u>REPL</u> USE: <u>RES</u>	OWNERS NAME: <u>HARRY GRUNWELL</u> ADDRESS: <u>1159 WILLOW GREEN WAY</u> CITY: <u>MARIOTTVILLE</u> STATE: <u>MD</u> ZIP CODE: <u>21104</u> HOME PHONE: <u>410-442-7449</u> WORK PHONE:
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CHECK ONE	HOW MANY	COMPANY NAME:
SINGLE FAMILY DWELLING <input checked="" type="checkbox"/>	<u>1</u> ZONES	Ground Loop Heating & Air Cond., Inc.
SINGLE FAMILY TOWNHOUSE <input type="checkbox"/>	___ ZONES	LICENSEE NAME: Michael E. Cullum
MULTI-FAMILY / HOTEL/MOTEL <input type="checkbox"/>	___ ROOMS	ADDRESS: 1701 Whiteford Road
ASSISTED LIVING HOMES (16 OR FEWER RESIDENTS) <input type="checkbox"/>	___ ROOMS	CITY: Darlington STATE: MD ZIP CODE: 21034 PHONE: 410-836-1706 HVACR LICENSE NO: 6539

6/29/11
Approved
RB

New <input type="checkbox"/> Heating and Air Conditioning <input type="checkbox"/> Geo Thermal System	<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	Additions and Alterations <input type="checkbox"/> Heating <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Heating and Air Conditioning

NOTE: UNIT WILL BE CONNECTED TO EXISTING GEOTHERMAL SYSTEM

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 = <u>40.00</u> Technology Fee (10% of Permit Fee) = <u>4.00</u> Plus Application Fee <u>\$50.00</u> Total Fees Due = <u>94.00</u>	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.

Michael E. Cullum 6-20-11
 SIGNATURE OF LICENSEE DATE

MICHAEL E. CULLUM
 PRINT NAME OF LICENSEE

Linda @groundloop.com
 Email Address

Validation
Check Number: <u>15803</u>
Cash: _____
Receipt Number: <u>214847</u>

Make check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

Word doc: T:\Updated Forms\hvac application
 Rev:10.2009

WELL & SEPTIC

DEPARTMENT OF INSPECTIONS, LICENSES & PERMITS 3430 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>M1000646</u> BUILDING PERMIT #
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BUILDING ADDRESS: _____ SUITE/APT: _____ SUBDIVISION: _____ CENSUS TRACT: _____ SECTION: _____ AREA: <u>1</u> LOT: <u>7</u> TAX MAP: _____ PARCEL: _____ BLOCK: _____ ZONE: _____ PROPERTY ID: _____ MAP COORDINATES: <u>10-16-326</u> TYPE OF IMPROVEMENTS: <u>REPL. USE: RES.</u>	OWNERS NAME: <u>HARRY & MARIE GRUNWELL</u> ADDRESS: <u>11159 WILLOW GREEN WAY</u> CITY: <u>MARIOTTVILLE</u> STATE: <u>MD</u> ZIP CODE: <u>21104-1438</u> HOME PHONE: _____ WORK PHONE: <u>410-442-7449</u>
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	<u>CHECK ONE</u>	<u>HOW MANY</u>	
SINGLE FAMILY DWELLING	<input checked="" type="checkbox"/>	<u>3</u> ZONES	COMPANY NAME: Ground Loop Heating & Air Cond., Inc. LICENSEE NAME: Michael E. Cullum
SINGLE FAMILY TOWNHOUSE	<input type="checkbox"/>	___ ZONES	ADDRESS: 1701 Whiteford Road
MULTI-FAMILY / HOTEL/MOTEL	<input type="checkbox"/>	___ ROOMS	CITY: Darlington
ASSISTED LIVING HOMES (16 OR FEWER RESIDENTS)	<input type="checkbox"/>	___ ROOMS	STATE: MD ZIP CODE: 21034 PHONE: 410-836-1706 HVACR LICENSE NO: 6539

New

Heating and Air Conditioning
 Heating System Only
 Other Work (Describe): _____
 Geo Thermal System
 Ductless Mini Splits
 Thru The Wall Systems

Replacement

Heating
 Heating and Air Conditioning
 Air Conditioning

Additions and Alterations

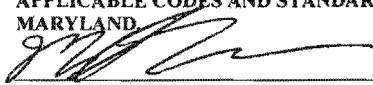
Heating
 Air Conditioning
 Heating and Air Conditioning

7/30/2010 approved
O.K. to issue
without walk
drilled per Mike
BB

****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 = <u>120</u> Technology Fee (10% of Permit Fee) = <u>12</u> Plus Application Fee <u>\$50.00</u> Total Fees Due = <u>\$182.00</u>	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 _____ DATE 6-23-10
MICHAEL CULLUM
 PRINT NAME OF LICENSEE
linda @ ground loop. com
 Email Address

Validation
Check Number: <u>14846</u>
Cash: _____
Receipt Number: <u>211628</u>

Make check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

Word doc: T:\Updated Forms\hvac application
 Rev: 10.2009

WELL & SEPTIC

M10000646

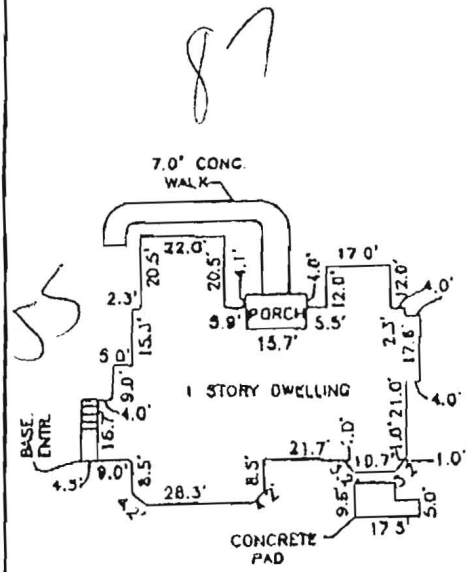
THIS PLAT IS OF BENEFIT TO A CONSUMER ONLY INsofar AS IT IS REQUIRED BY THE LENDER OR TITLE INSURANCE COMPANY OR IT'S AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR REFINANCING. THIS PLAT IS NOT TO BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR FUTURE IMPROVEMENTS. THIS PLAT DOES NOT PROVIDE THE ACCURATE IDENTIFICATION OF PROPERTY BOUNDARY LINES, BUT SUCH IDENTIFICATION MAY NOT BE REQUIRED FOR THE TRANSFER OF TITLE OR SECURING FINANCING OR REFINANCING THIS PLAT CONTAINS A TOLERANCE OF ACCURACY OF 0.2' MORE OR LESS.

GEO BOEES

MD. STATE GRID MERIDIAN

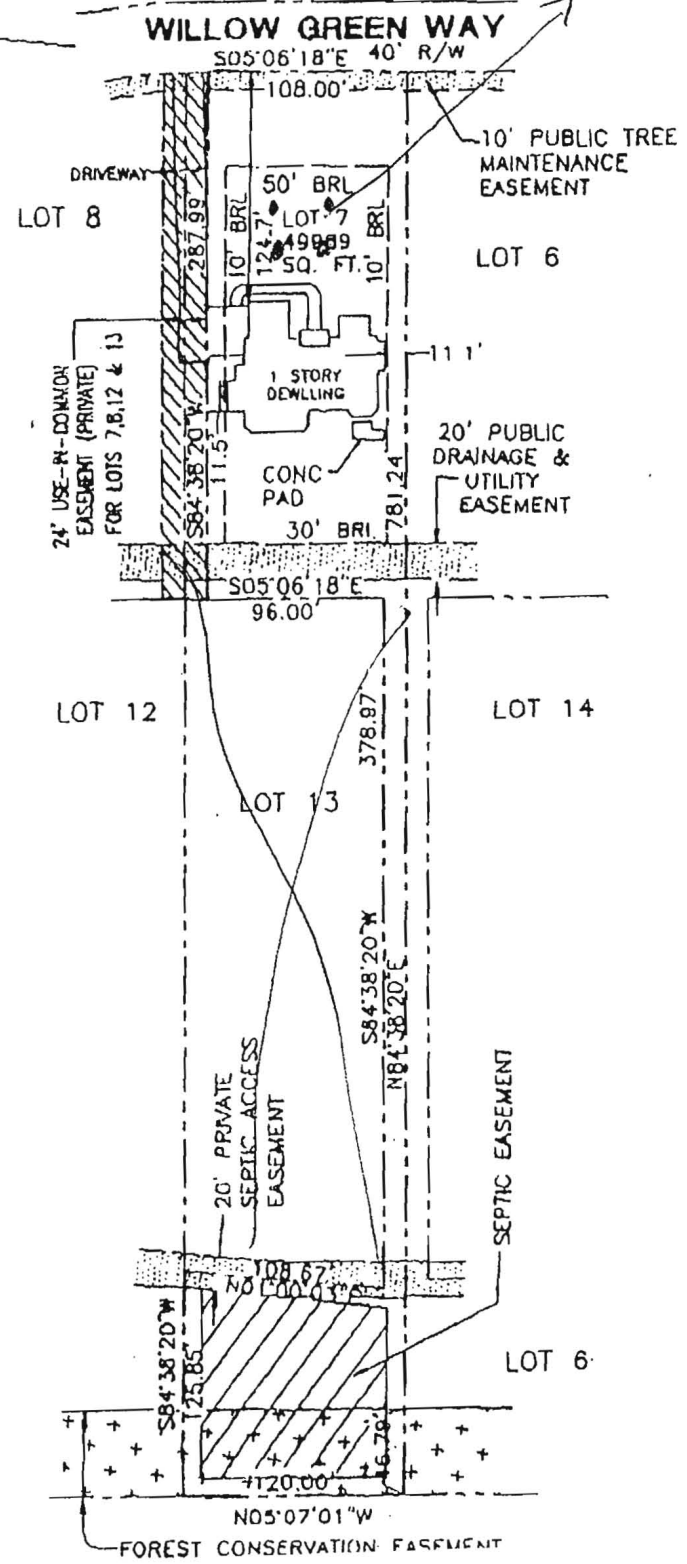
WILLOW GREEN WAY

S05°06'18"E 40' R/W



DWELLING DETAIL SCALE 1" = 50'

87



M1000044



Load Preview Report

Scope	Net Ton	ft. ² /Ton	Area	Sen Gain	Lat Gain	Net Gain	Sen Loss	Sys Htg CFM	Sys Cig CFM	Sys Act CFM	Duct Size
Building	3.48	965	3,360	32,805	8,973	41,778	58,880	769	1,439	1,439	
System 1	3.48	965	3,360	32,805	8,973	41,778	58,880	769	1,439	1,439	24x10
Ventilation				1,313	2,068	3,380	0				
Duct Latent					1,086	1,086					
Zone 1			3,360	31,492	5,819	37,311	58,880	769	1,439	1,439	24x10
1-First Floor			3,360	31,492	5,819	37,311	58,880	769	1,439	1,439	0-0*
2-Second Floor			0	0	0	0	0	0	0	0	0-0
3-Basement			0	0	0	0	0	0	0	0	0-0
4-Attic			0	0	0	0	0	0	0	0	0-0

2010/6/21 1:59 PM