

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 # M1800046
BUILDING PERMIT # B17002762

BUILDING ADDRESS: SUITE/APT:

OWNERS NAME: Charles Harris
ADDRESS: 17529 Timberleigh way

SUBDIVISION:
CENSUS TRACT: SECTION: AREA:
LOT: TAX MAP: PARCEL:
BLOCK: ZONE:

CITY: Wood Bine
STATE: md. ZIP CODE: 21797

PROPERTY ID: MAP COORDINATES:

HOME PHONE: 410-963-8788 WORK PHONE:

TYPE OF IMPROVEMENTS: USE:

CHECK ONE	HOW MANY
SINGLE FAMILY DWELLING ☒	<u>3</u> ZONES
SINGLE FAMILY TOWNHOUSE ☐	___ ZONES
MULTI-FAMILY / HOTEL/MOTEL ☐	___ ROOMS
ASSISTED LIVING HOMES (16 OR FEWER RESIDENTS) ☐	___ ROOMS

COMPANY NAME: WaterVale Heating & Air Cond.
LICENSEE NAME: Joseph F. Opdyke
ADDRESS: 2116 WaterVale Rd.
CITY: FALLSTON
STATE: md. ZIP CODE: 21047
PHONE: 410-879-0292
HVACR LICENSE NO: 7629

New

☐ Heating and Air Conditioning
☒ Geo Thermal System

☐ Heating System Only
☐ Ductless Mini Splits

☐ Other Work (Describe):
☐ Thru The Wall Systems

Replacement

☐ Heating
☐ Air Conditioning
☐ Heating and Air Conditioning

1st floor - 3 TON WATER FURNACE ND2038/GAS BACK UP.
2nd floor - 2 1/2 TON WATER FURNACE NS2030/GAS

Additions and Alterations

☐ Heating
☐ Air Conditioning
☐ Heating and Air Conditioning

"INTERIOR WORK ONLY"

****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
Total Fees Due =

120
12
\$50.00
182.00

Rooms

Permit Fee = # of Rooms x \$80 =
Technology Fee (10% of Permit Fee) =
Plus Application Fee \$50
Total Fees Due =

\$50.00

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.

Joseph F. Opdyke
SIGNATURE OF LICENSEE
Joseph F. Opdyke
PRINT NAME OF LICENSEE

3-2-18
DATE

water.vale.geo@gmail.com
Email Address

Make check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

Word doc: T:Updated Formshvac application
Rev:10.2609

Validation

Check Number: 25123
Cash: _____
Receipt Number: 524607

RECEIVED

Approved Septic System Plan / HVAC
Howard County Health Department

[Signature]
Signature

3/13/18
Date