

DEPARTMENT OF INSPECTIONS,  
LICENSES & PERMITS  
3430 COURT HOUSE DRIVE  
ELLIOTT CITY, MD 21043  
PERMITS (410) 313-2455  
INSPECTIONS (410) 313-1850

HOWARD COUNTY  
RESIDENTIAL  
HEATING-VENTILATION-AIR  
CONDITIONING AND  
REFRIGERATION PERMIT  
APPLICATION

HVACR PERMIT # M11000784  
BUILDING PERMIT #

BUILDING ADDRESS: SUITE/APT:  
12717 Folly Quarter rd.  
SUBDIVISION: Elliott City, MD, 21042  
CENSUS TRACT: SECTION: AREA:  
LOT: TAX MAP: PARCEL:  
BLOCK: ZONE:

OWNERS NAME: DEMETRIOS MANTZARIS  
ADDRESS: 12717 Folly Quarter rd  
CITY: Elliott City  
STATE: MD ZIP CODE: 21042  
HOME PHONE: 410-707-0402 WORK PHONE:

PROPERTY ID: MAP COORDINATES:

TYPE OF IMPROVEMENTS: USE:

|   | <u>CHECK ONE</u>                    | <u>HOW MANY</u> |
|---|-------------------------------------|-----------------|
| SINGLE FAMILY DWELLING ZONES                  | <input checked="" type="checkbox"/> | <u>1</u>        |
| SINGLE FAMILY TOWNHOUSE ZONES                 | <input type="checkbox"/>            | <u>—</u>        |
| MULTI-FAMILY / HOTEL/MOTEL ROOMS              | <input type="checkbox"/>            | <u>—</u>        |
| ASSISTED LIVING HOMES (16 OR FEWER RESIDENTS) | <input type="checkbox"/>            | <u>—</u>        |

COMPANY NAME: Supreme Air  
LICENSEE NAME: Alexandros Kougiannos  
ADDRESS: 6208 Collinsway rd  
CITY: Belt  
STATE: MD ZIP CODE: 21228  
PHONE: 410 788-1114 HVACR LICENSE NO: 47207

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  
Additions and Alterations  
 Heating  
 Air Conditioning  
 Heating and Air Conditioning

8/10/11  
*approved*  
\*\*\*\*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 = 40  
Technology Fee (10% of Permit Fee) = 4  
Plus Application Fee \$50.00  
Total Fees Due = 94

Rooms  
Permit Fee = # of Rooms x \$80 = —  
Technology Fee (10% of Permit Fee) = —  
Plus Application Fee \$50 \$50.00  
Total Fees Due = —

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

6/29/11  
DATE

PRINT NAME OF LICENSEE

Email Address

Alex Kougiannos

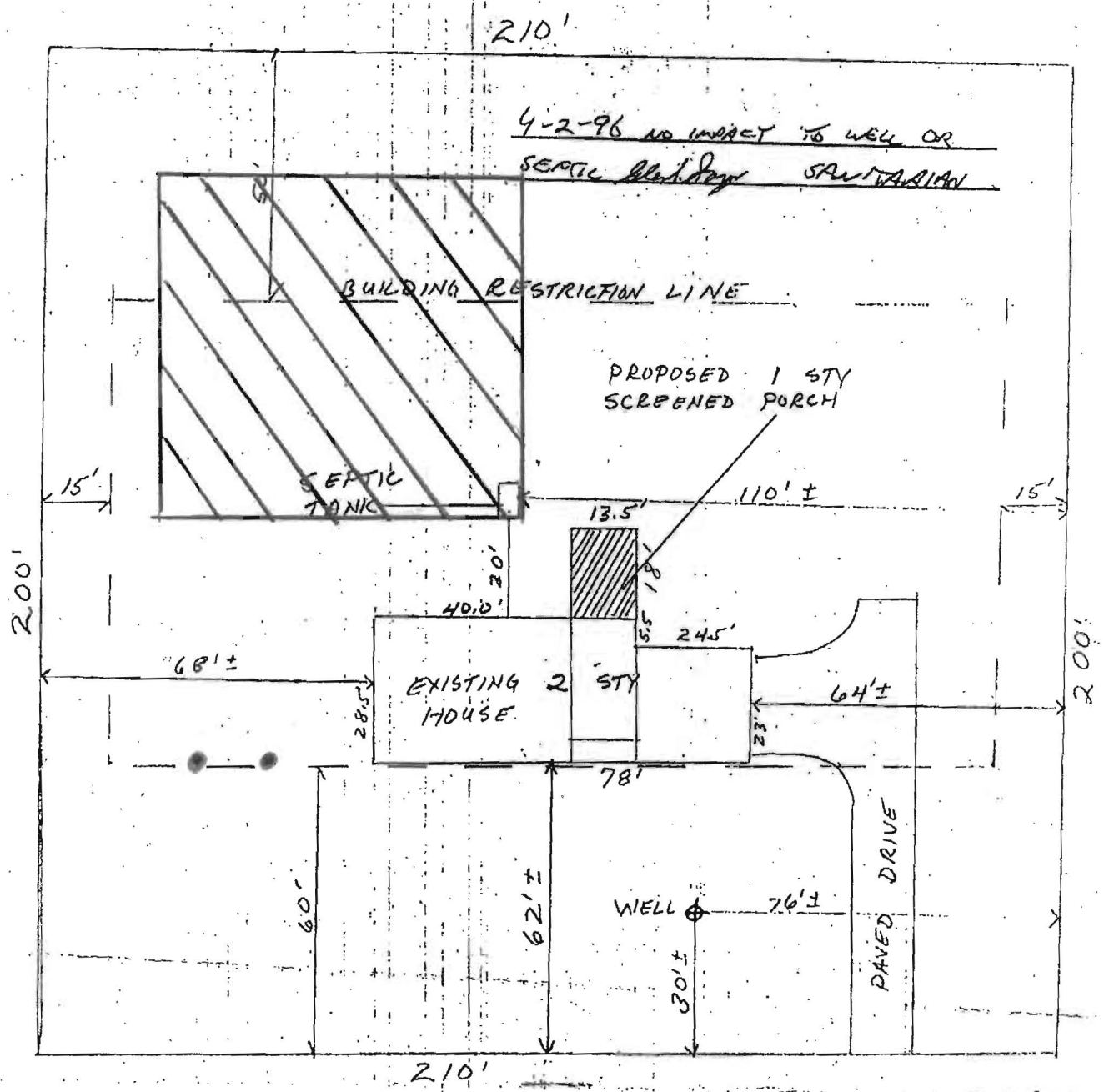
Alex@supremeairllc.com

Validation  
Check Number: 3274  
Cash: —  
Receipt Number: 048957

Make check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

Well + Septic

M11 000786



HOOKER RESIDENCE  
12717 FOLLY QUARTER RD.

PARCEL 483  
LOT 5C

1" = 30'