

Permits: 410-313-2455
 Inspections: 410-313-1810
 Automated Line: 410-313-3800

Howard County Building/Fire Permit Application
 Department of Inspections, Licenses & Permits
 3430 Court House Drive
 Ellicott City, MD 21043

Permit Number: **B/300 3644**

William R. Toole

Building Address: **16491 AE MULLINX RD**
Woodbine Md 21797

Suite/Apt. # _____ SDP/WP/BA #: _____

Census Tract: _____ Subdivision: _____

Section: _____ Area: _____ Lot: **3**

Tax Map: **0007** Parcel: **0475** Grid: **0023**

Zoning: _____ Map Coordinates: _____ Lot Size: **41,164SF**

Property Owner's Name: **Phylliss Heffer**

Address: **16491 AE MULLINX Road**

City: **Woodbine** State: **md** Zip Code: **21797**

Home Phone: **410-487-2584** Cell Phone: _____

Applicant's Name & Mailing Address, (if other than stated herein): _____

Phone: _____ Fax: _____

Email: _____

Existing Use: **SFD**

Proposed Use: **SFD with tank**

Estimated Construction Cost: \$ **4897.00**

Description of Work: **install 500 ug propane tank for 20 kw generator**

Occupant or Tenant: _____

Was tenant space previously occupied? Yes No

Contact Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

Contractor Company: **Southern States**

Contact Person: **NATHAN L HAINES JR**

Address: **5831 Buckaystown Pike Suite E**

City: **Frederick** State: **MD** Zip Code: **21704**

License No.: **73732**

Phone: **301-663-6168** Fax: **301-663-0274**

Email: **Nathan.Haines@SSCOOP.com**

Engineer/Architect Company: _____

Responsible Design Prof.: **MAIL TO**

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Email: _____

| BUILDING DESCRIPTION - COMMERCIAL | |
|--|---|
| Building Characteristics | Utilities |
| Height: | <u>Water Supply</u> |
| No. of stories: | <input type="checkbox"/> Public |
| Gross area, sq. ft./floor: | <input type="checkbox"/> Private |
| | <u>Sewage Disposal</u> |
| Area of construction (sq. ft.): | <input type="checkbox"/> Public |
| | <input type="checkbox"/> Private |
| Use group: | Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <u>Construction type:</u> | <u>Heating System</u> |
| <input type="checkbox"/> Reinforced Concrete | <input type="checkbox"/> Electric <input type="checkbox"/> Oil |
| <input type="checkbox"/> Structural Steel | <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane Gas |
| <input type="checkbox"/> Masonry | <u>Sprinkler System:</u> |
| <input type="checkbox"/> Wood Frame | <input type="checkbox"/> N/A |
| <input type="checkbox"/> State Certified Modular | <input type="checkbox"/> Full |
| <input checked="" type="checkbox"/> Roadside Tree Project Permit | <input type="checkbox"/> Partial |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Other Suppression |
| Roadside Tree Project Permit # | No. of Heads: |

| BUILDING DESCRIPTION - RESIDENTIAL | |
|---|---|
| Building Characteristics | Utilities |
| <input checked="" type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse | <u>Water Supply</u> |
| Depth Width | <input type="checkbox"/> Public |
| 1 st floor: | <input checked="" type="checkbox"/> Private |
| 2 nd floor: | <u>Sewage Disposal</u> |
| Basement: | <input type="checkbox"/> Public |
| <input type="checkbox"/> Finished Basement | <input checked="" type="checkbox"/> Private |
| <input type="checkbox"/> Unfinished Basement | Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Crawl Space | Gas: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Slab on Grade | <u>Heating System</u> |
| No. of Bedrooms: | <input type="checkbox"/> Electric |
| <u>Multi-family Dwelling</u> | <input type="checkbox"/> Oil |
| No. of efficiency units: | <input type="checkbox"/> Natural Gas |
| No. of 1 BR units: | <input type="checkbox"/> Propane Gas |
| No. of 2 BR units: | |
| No. of 3 BR units: | |
| Other Structure: | |
| Dimensions: | |
| Footings: | <input checked="" type="checkbox"/> Roadside Tree Project Permit |
| Roof: | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <input type="checkbox"/> State Certified Modular | Roadside Tree Project Permit # |
| <input type="checkbox"/> Manufactured Home | |

THE UNDERSIGNED HEREBY CERTIFIES AND AGREES AS FOLLOWS: (1) THAT HE/SHE IS AUTHORIZED TO MAKE THIS APPLICATION; (2) THAT THE INFORMATION IS CORRECT; (3) THAT HE/SHE WILL COMPLY WITH ALL REGULATIONS OF HOWARD COUNTY WHICH ARE APPLICABLE THERETO; (4) THAT HE/SHE WILL PERFORM NO WORK ON THE ABOVE REFERENCED PROPERTY NOT SPECIFICALLY DESCRIBED IN THIS APPLICATION; (5) THAT HE/SHE GRANTS COUNTY OFFICIALS THE RIGHT TO ENTER ONTO THIS PROPERTY FOR THE PURPOSE OF INSPECTING THE PROPERTY AND TESTING THE WORK.

Applicant's Signature: **Nathan L Haines Jr**

Print Name: **NATHAN L HAINES JR**

Email Address: **nathan.haines@SSCOOP.com**

Date: **9/26/13**

Title/Company: **Propane manager**

RECEIVED
SEP 26 2013

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 FOR OFFICE USE ONLY.

LICENSES & PERMITS
 DIVISION

| AGENCY | DATE | SIGNATURE OF APPROVAL |
|--|------|-----------------------|
| State Highways | | |
| <input checked="" type="checkbox"/> Building Officials | | |
| <input checked="" type="checkbox"/> PSZA (Zoning) | | |
| <input checked="" type="checkbox"/> PSZA (Engineering) | | |
| Health | | W. R. Buehler |
| Fire Protection | | |

Is Sediment Control approval required for issuance? Yes No
 CONTINGENCY CONSTRUCTION START
 ONE STOP SHOP

| DPZ SETBACK INFORMATION |
|---|
| Front: |
| Rear: |
| Side: |
| Side St.: |
| All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Lot Coverage for New Town Zone: |
| SDP/Red-line approval date: |

| | |
|----------------|-----------|
| Filing Fee | \$ |
| Permit Fee | \$ 100.00 |
| Tech Fee | \$ 10.00 |
| Excise Tax | \$ |
| PSFS | \$ |
| Guaranty Fund | \$ |
| Add'l per Fee | \$ |
| Total Fees | \$ 110.00 |
| Sub-Total Paid | \$ |
| Balance Due | \$ 02183 |

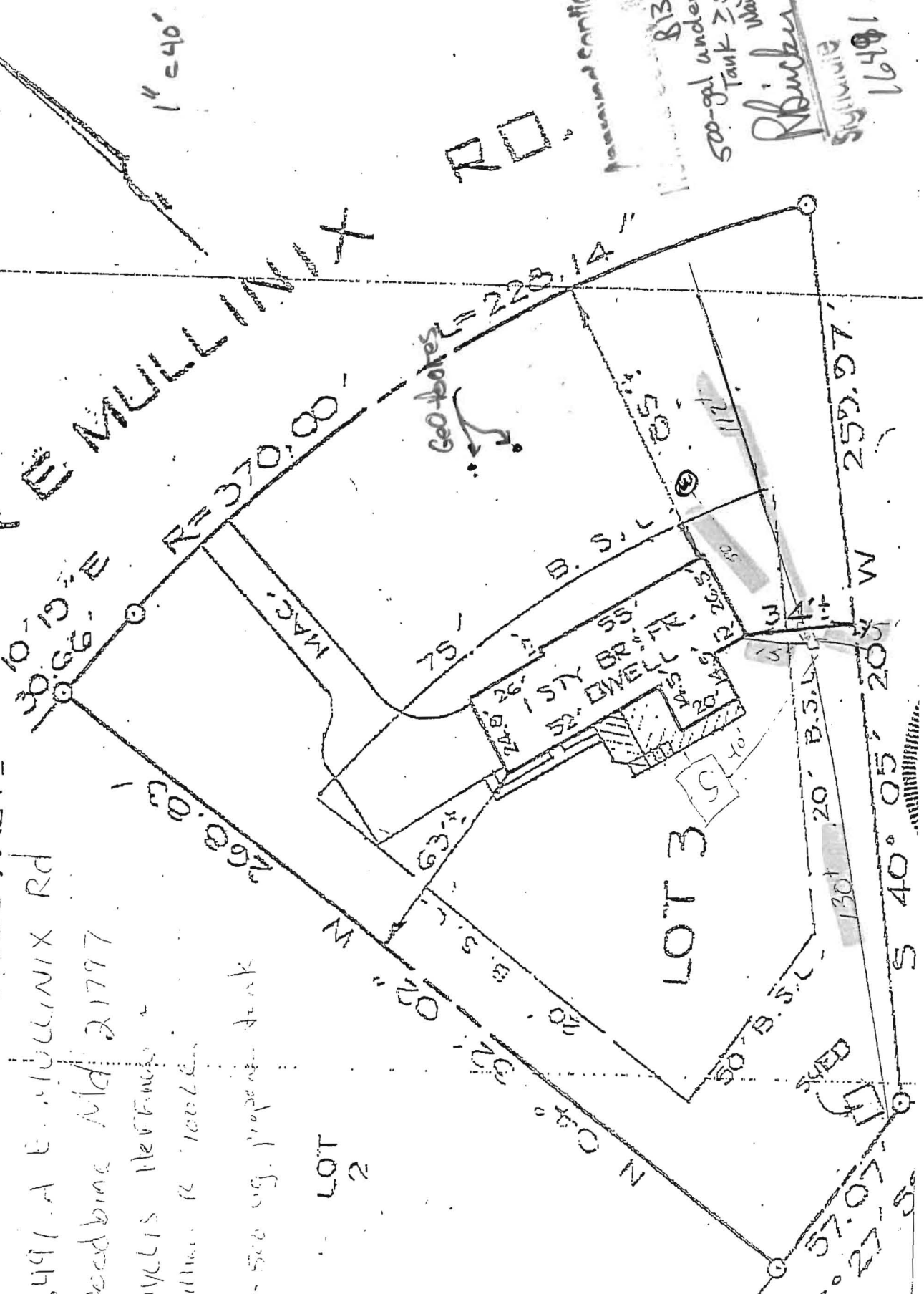
491 A E. MULLINIX Rd
Woodbine Md 21797

MULLINIX HEFFNER
MULLINIX R 1002 E

See ug. Propane tank

LOT 2

LOT 3



1" = 40'

Professional Engineering System Plan
Department

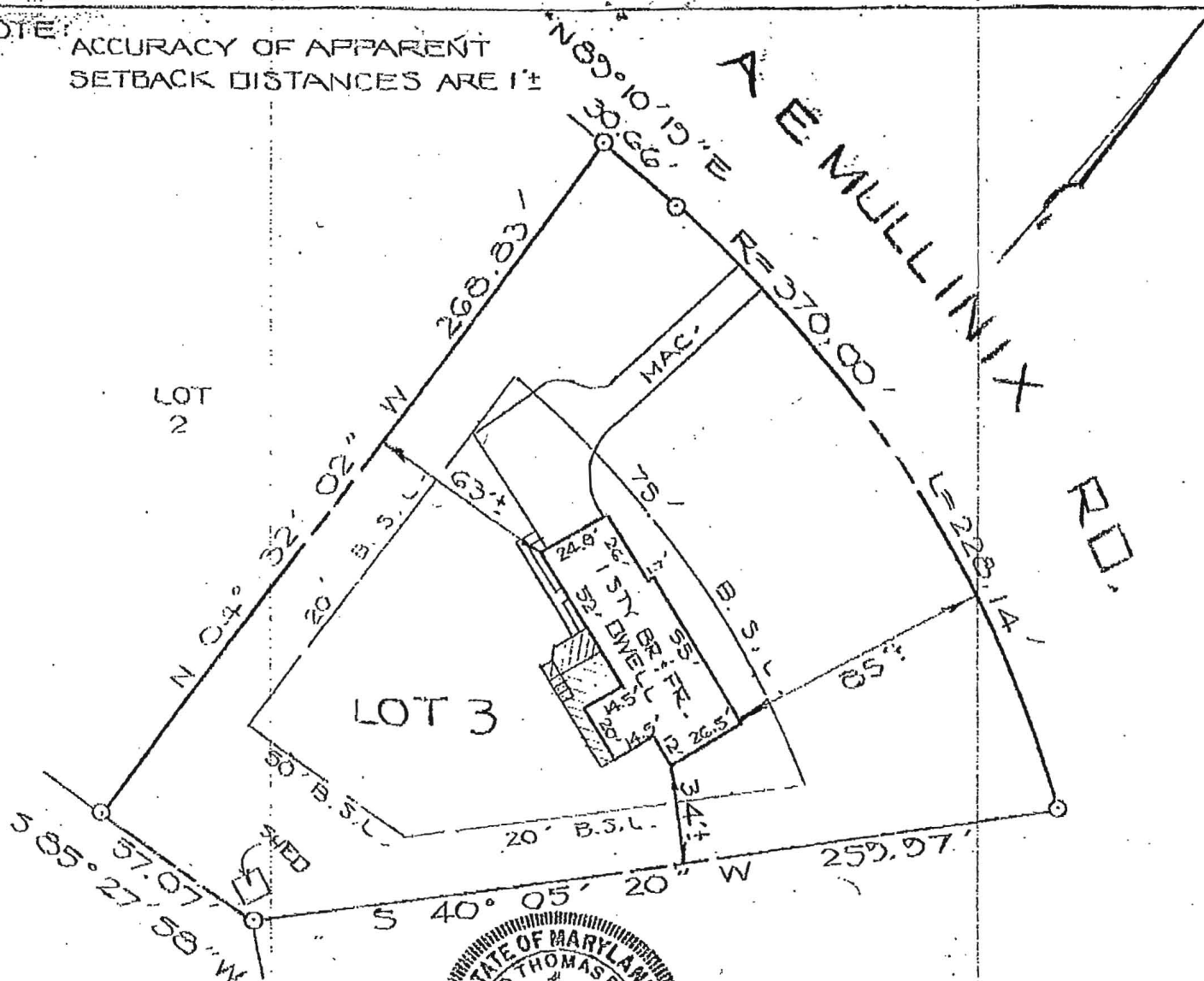
83003644 Propane
500-gal underground propane
Tank ≥ 50' frosted
waiver applied 10/10/2013

R. Binkley

SYLVANIA

16481 A.E. Mullinix Rd.

NOTE: ACCURACY OF APPARENT SETBACK DISTANCES ARE 1±



REFERENCE LOT 3 PLAT ENTITLED
 PLAT OF GLEN ALPINE
 DATED: APR 1, 1977 AND RECORDED
 AMONG THE PLAT RECORDS OF
 HOWARD COUNTY, MD. IN PLAT C.M.F. NO. 3667

- (A) THIS PLAT IS NOT INTENDED FOR USE IN ESTABLISHING PROPERTY LINES AND DOES NOT CONSTITUTE A BOUNDARY SURVEY.
- (B) THIS PLAT IS OF BENEFIT TO THE CONSUMER ONLY INSOFAR AS IT IS REQUIRED BY A LENDER OR A TITLE INSURANCE COMPANY OR ITS AGENT IN CONNECTION WITH CONTEMPLATED TRANSFER, FINANCING OR RE-FINANCING.
- (C) THIS PLAT SHOULD NOT BE RELIED UPON FOR THE ESTABLISHMENT OR LOCATION OF FENCES, GARAGES, BUILDINGS OR OTHER EXISTING OR FUTURE IMPROVEMENTS.

THIS IS TO CERTIFY THAT WE HAVE LOCATED THE IMPROVEMENTS AS SHOWN ACCORDING TO THE REGULATIONS GOVERNING THE MARYLAND STANDARDS OF PRACTICE FOR PROFESSIONAL LAND SURVEYORS; EFFECTIVE DATE MARCH 1, 1995.

NOTE: THIS PROPERTY DOES NOT LIE WITHIN THE LIMITS OF A FLOOD HAZARD AREA AS DELINEATED ON THE MAPS OF THE NATIONAL FLOOD INSURANCE PROGRAM. MAP NUMBER: 240044 0013 B ZONE-C

Leonard T. Borger 6-3-99
 REGISTERED NO. 10859 DATE

LOCATION CERTIFICATION OF
 16491 A E MULLINIX RD.



W. DUVALL & ASSOCIATES, INC.
 ENGINEERS . SURVEYORS . LAND PLANNERS
 530 EAST JOPPA ROAD
 TOWSON, MARYLAND 21204
 (410) 583-9571

4TH ELEC. DIST. HOW. CO., MD.

SCALE: 1" = 50' JUNE 2, 1999
 FILE NO. E-16104-99

L.C.#3269

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 # M11000787
 BUILDING PERMIT #

BUILDING ADDRESS: SUITE/APT:
16491 AE Mullinex rd
Woodbine, MD, 21797
 SUBDIVISION:
 CENSUS TRACT: SECTION: AREA:
 LOT: TAX MAP: PARCEL:
 BLOCK: ZONE:
 PROPERTY ID: MAP COORDINATES:
 TYPE OF IMPROVEMENTS: USE:

OWNERS NAME: Phyllis Heffner
 ADDRESS: 16491 A E Mullinex rd
 CITY: Woodbine
 STATE: MD ZIP CODE: 21797
 HOME PHONE: 410-489-2577 WORK PHONE:

| | <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: Alex Kougianos
 ADDRESS: 6203 Collinsway rd.
 CITY: Baltimore
 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
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 = 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: Alex Kougianos
 DATE: 7/28/11
 PRINT NAME OF LICENSEE: Alex Kougianos
 Email Address: alex@supremeairllc.com

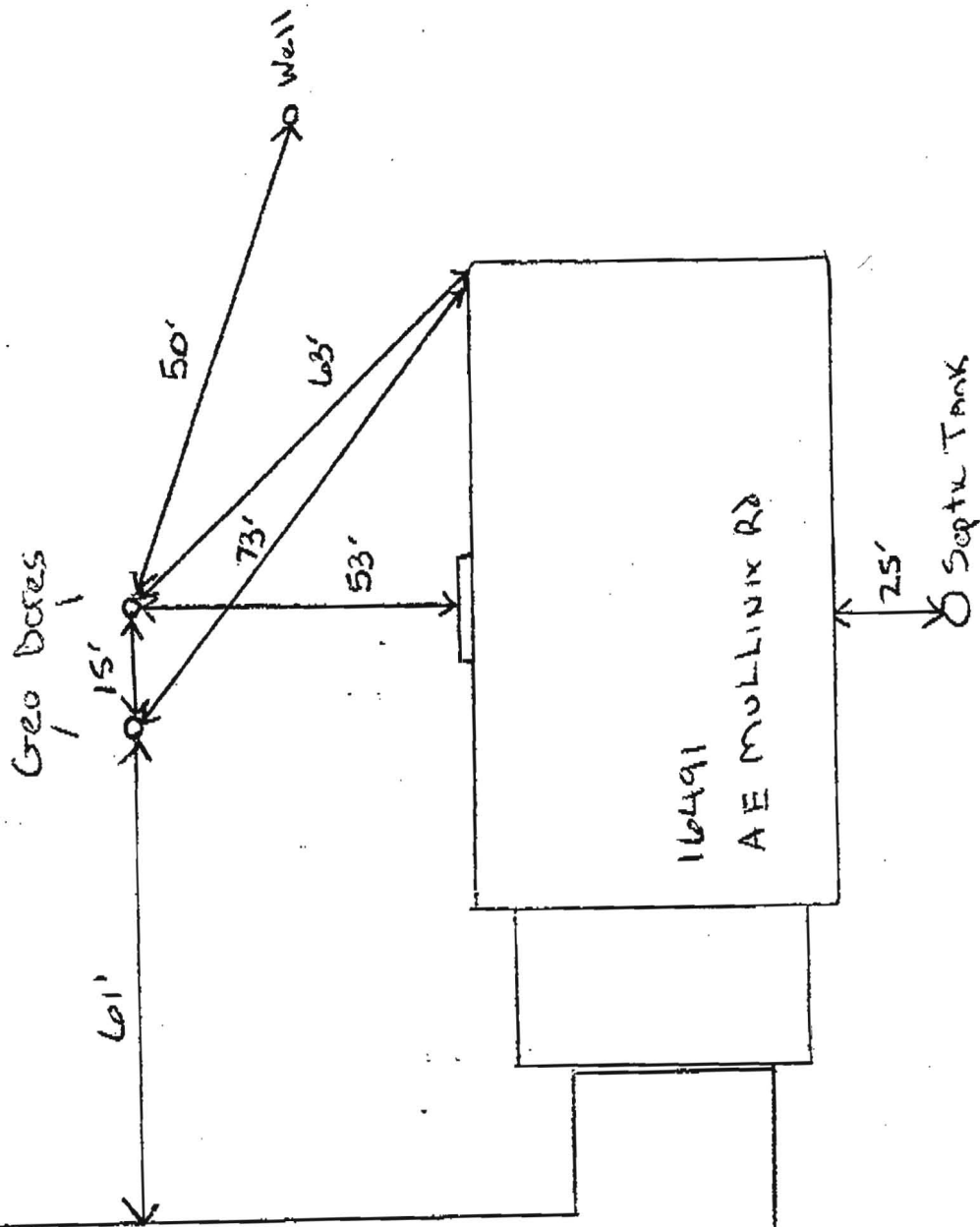
Validation
 Check Number: 3276
 Cash: —
 Receipt Number: 2489100

Make check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

well + Septic

M11000787

A E MULLINIX ROAD



A E MULLINIX ROAD

DRIVEWAY

