

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

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

HVACR PERMIT # M11000185  
 BUILDING PERMIT #

BUILDING ADDRESS: SUITE/APT:  
 SUBDIVISION:  
 CENSUS TRACT: SECTION: AREA:  
 LOT: TAX MAP: PARCEL:  
 BLOCK: ZONE:  
 PROPERTY ID: MAP COORDINATES:  
 TYPE OF IMPROVEMENTS: USE:

OWNERS NAME Gregory & Ellen Makar  
 ADDRESS: 7217 Meadow Wood Way  
 CITY: Clarksville  
 STATE: MD ZIP CODE: 21029  
 HOME PHONE: (443) 812-4610 WORK PHONE:

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

COMPANY NAME: Dynatemp, Inc.  
 LICENSEE NAME: Thomas Hackshaw  
 ADDRESS: 12059 Tech Road  
 CITY: Silver Spring  
 STATE: MD ZIP CODE: 20904  
 PHONE: (301) 625-6500 HVACR LICENSE NO: 4803

- 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 Geothermal
- Additions and Alterations
- Heating
  - Air Conditioning
  - Heating and Air Conditioning
- 3/9/2011  
O.K.  
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>40</u>
Technology Fee (10% of Permit Fee) =	<u>4</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 =	___

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.

Thomas G. Hackshaw 2/10/11  
 SIGNATURE OF LICENSEE DATE  
Thomas G. Hackshaw  
 PRINT NAME OF LICENSEE  
holly@dynamtempvac.com  
 Email Address

**Validation**  
 Check Number: 30481  
 Cash: \_\_\_\_\_  
 Receipt Number: 232463

Make check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

WELL AND SEPTIC

