

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 # M11000620
 BUILDING PERMIT #
 B11000218

BUILDING ADDRESS: SUITE/APT:
 12147 Patapsco ridge rd.
 ELLICOTT CITY, MD, 21042
 SUBDIVISION:
 CENSUS TRACT: SECTION: AREA:
 LOT: TAX MAP: PARCEL:
 BLOCK: ZONE:
 PROPERTY ID: MAP COORDINATES:
 TYPE OF IMPROVEMENTS: USE:


OWNERS NAME: Dennis + Bernadette Christmas
 ADDRESS: 12147 Patapsco ridge rd
 CITY: ELLICOTT CITY
 STATE: MD ZIP CODE: 21042
 HOME PHONE: 443-610-3631 WORK PHONE:

CHECK ONE	HOW MANY
SINGLE FAMILY DWELLING ZONES <input checked="" type="checkbox"/>	<u>2</u>
SINGLE FAMILY TOWNHOUSE ZONES <input type="checkbox"/>	—
MULTI-FAMILY / HOTEL/MOTEL ROOMS <input type="checkbox"/>	—
ASSISTED LIVING HOMES (16 OR FEWER RESIDENTS) <input type="checkbox"/>	—

COMPANY NAME: Supreme Air
 LICENSEE NAME: Alexandros Koussianos
 ADDRESS:
 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

7/6/2011
 Approved 

Additions and Alterations
 Heating
 Air Conditioning
 Heating and Air Conditioning

****Replacement Geo Thermal Systems are not required; However, if a tax credit is being sought a permit is required****

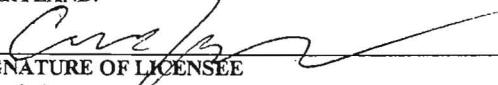
Zones

Permit Fee = # of Zones x \$40 =	<u>80</u>
Technology Fee (10% of Permit Fee) =	<u>8</u>
Plus Application Fee	<u>\$50.00</u>
Total Fees Due =	<u>138</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.


 SIGNATURE OF LICENSEE
 Alex Koussianos
 PRINT NAME OF LICENSEE
 alex@supremeairllc.com
 Email Address

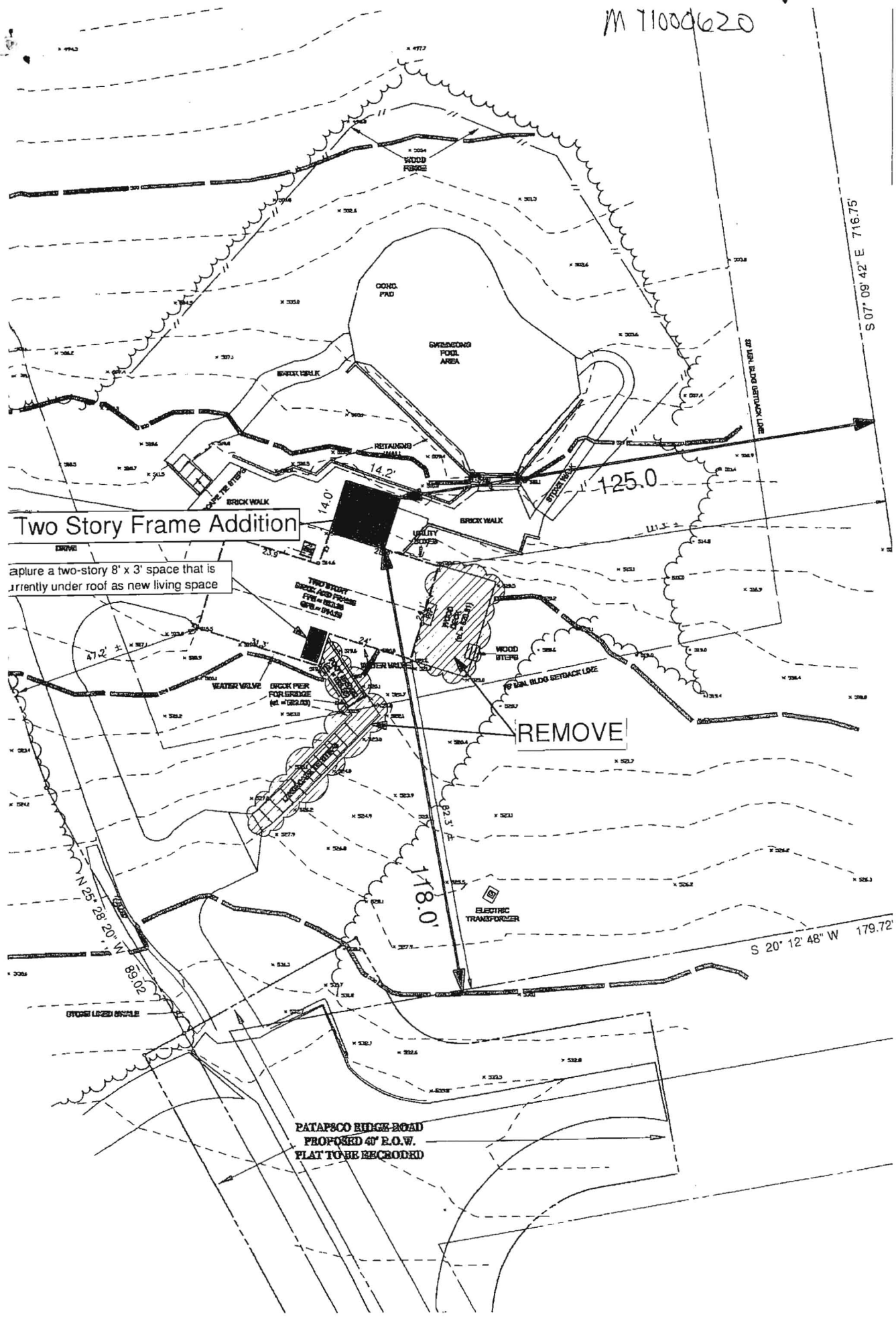
6/29/30
 DATE

Validation

Check Number: 3265
 Cash: _____
 Receipt Number: 245480

Make check payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY

M 11000620



not Plan

Scale 1" = 20'



Building Permit Application

Howard County Maryland
Department of Inspections, Licenses and Permits
3430 Court House Drive
Permits: 410-313-2455
www.howardcountymd.gov

Date Received: _____

Permit No.: B13002944

Building Address: 12147 DATAPSCO Ridge Rd
 City: _____ State: _____ Zip Code: _____
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: 3
 Tax Map: 0010 Parcel: 0266 Grid: 0002
 Zoning: _____ Map Coordinates: _____ Lot Size: 4.75

Property Owner's Name: Robert, Bernadette Chestnut
 Address: 12147 DATAPSCO Ridge Rd.
 City: MARCIOTTSVILLE State: MD Zip Code: 2104
 Phone: _____ Fax: _____
 Email: _____

Applicant's Name & Mailing Address, (if other than stated herein)
 Applicant's Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Existing Use: SFD
 Proposed Use: SAME with TANK
 Estimated Construction Cost: \$ 1000.00
 Description of Work: Install (1) 1000 UG Propane Tank And Run Gas Line To Existing Service AS per NCFASB

Contractor Company: Michel Welding & Mca. Repair
 Contact Person: Robert J Michel
 Address: 2518 Green Rd
 City: Baldwin State: MD Zip Code: 21013
 License No.: 73061
 Phone: 410 692 5446 Fax: 443 927 9357
 Email: Michel Welding @ AOL.com

Occupant or Tenant: OWNER
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Engineer/Architect Company: _____
 Responsible Design Prof.: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Commercial Building Characteristics	Residential Building Characteristics	
Height:	<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	
No. of stories:	Depth	Width
Gross area, sq. ft./floor:	1 st floor:	
	2 nd floor:	
Area of construction (sq. ft.):	Basement:	
	<input type="checkbox"/> Finished Basement	
Use group:	<input type="checkbox"/> Unfinished Basement	
	<input type="checkbox"/> Crawl Space	
<u>Construction type:</u>	<input type="checkbox"/> Slab on Grade	
<input type="checkbox"/> Reinforced Concrete	No. of Bedrooms:	
<input type="checkbox"/> Structural Steel	<u>Multi-family Dwelling</u>	
<input type="checkbox"/> Masonry	No. of efficiency units:	
<input type="checkbox"/> Wood Frame	No. of 1 BR units:	
<input type="checkbox"/> State Certified Modular	No. of 2 BR units:	
	No. of 3 BR units:	
	Other Structure:	
	Dimensions:	
<input checked="" type="checkbox"/> Roadside Tree Project Permit	Footings:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Roof:	
Roadside Tree Project Permit #	<input type="checkbox"/> State Certified Modular	
	<input type="checkbox"/> Manufactured Home	

Utilities	
<u>Water Supply</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
<u>Sewage Disposal</u>	
<input type="checkbox"/> Public	
<input checked="" type="checkbox"/> Private	
Electric: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Gas: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<u>Heating System</u>	
<input type="checkbox"/> Electric <input type="checkbox"/> Oil	
<input type="checkbox"/> Natural Gas <input checked="" type="checkbox"/> Propane Gas	
<input type="checkbox"/> Other:	
<u>Sprinkler System:</u>	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Grading Permit Number:	
Building Shell Permit Number:	

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 WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature: Robert J Michel
 Print Name: Robert J Michel SR.
 Email Address: Michel welding @ aol.com
 Date: 7/25/13
 Title/Company: OWNER

Print Name: Robert J Michel SR.
 Date: 7/25/13

Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY

FOR OFFICE USE ONLY			DPZ SETBACK INFORMATION		Filing Fee	
AGENCY	DATE	SIGNATURE OF APPROVAL	Front:	Rear:	Permit Fee	\$
State Highways					Tech Fee	\$
Building Officials			Side:		Excise Tax	\$
PSZA (Zoning)			Side St.:		PSFS	\$
PSZA (Engineering)			All minimum setbacks met? <input type="checkbox"/> Yes <input type="checkbox"/> No		Guaranty Fund	\$
Health		<u>8-21-13 B. Brown</u>	Is Entrance Permit Required? <input type="checkbox"/> Yes <input type="checkbox"/> No		Add'l per Fee	\$
Is Sediment Control approval required for issuance? <input type="checkbox"/> Yes <input type="checkbox"/> No			Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No		Total Fees	\$
<input type="checkbox"/> CONTINGENCY CONSTRUCTION START			Lot Coverage for New Town Zone:		Sub-Total Paid	\$ <u>110.00</u>
			SDP/Red-line approval date:		Balance Due	\$ <u>110.00</u>
					Check	# <u>110.00</u>

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:

B1100335

Building Address: 12147 Potomac Blvd RD
 Suite/Apt. # _____ SDP/WP/BA #: _____
 Census Tract: _____ Subdivision: _____
 Section: _____ Area: _____ Lot: _____
 Tax Map: _____ Parcel: _____ Grid: _____
 Zoning: _____ Map Coordinates: _____ Lot Size: _____

Existing Use: _____
 Proposed Use: _____
 Estimated Construction Cost: \$ 5000
 Description of Work: Install 1 propane tank

Occupant or Tenant: _____
 Was tenant space previously occupied? Yes No
 Contact Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Phone: _____ Fax: _____
 Email: _____

Property Owner's Name: Debra R. ...
 Address: 12147 Potomac Blvd RD
 City: _____ State: MD Zip Code: _____
 Home Phone: _____ Work Phone: _____
 Applicant's Name & Mailing Address, (If other than stated herein): _____
 Phone: _____ Fax: _____
 Email: _____

Contractor Company: _____
 Contact Person: Robert ...
 Address: 4987 ...
 City: _____ State: _____ Zip Code: _____
 License No.: 60187
 Phone: _____ Fax: _____
 Email: RUCO@UnitedPropane.com

Engineer/Architect Company: 443-871-5190
 Responsible Design Prof.: Pen
 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"/> <u>Roadside Tree Project Permit</u>	<input type="checkbox"/> Partial
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Other Suppression
<u>Roadside Tree Project Permit #</u>	No. of Heads:

BUILDING DESCRIPTION - RESIDENTIAL

Building Characteristics	Utilities
<input type="checkbox"/> SF Dwelling <input type="checkbox"/> SF Townhouse	<u>Water Supply</u>
<u>Depth</u> <u>Width</u>	<input type="checkbox"/> Public
1 st floor:	<input 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"/> <u>Roadside Tree Project Permit</u>
Roof:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> State Certified Modular	<u>Roadside Tree Project Permit #</u>
<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 WORK PERMITTED AND POSTING NOTICES.

Applicant's Signature _____
 Email Address _____
 Title/Company _____

Print Name _____
 Date _____

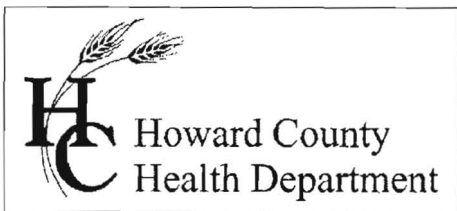
Checks Payable to: DIRECTOR OF FINANCE OF HOWARD COUNTY
 PLEASE WRITE NEATLY & LEGIBLY
 -FOR OFFICE USE ONLY-

AGENCY	DATE	SIGNATURE OF APPROVAL
State Highways		
Building Officials		
PSZA (Zoning)		
PSZA (Engineering)		
Health		
Fire Protection		

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	\$ <u>110.00</u>
Permit Fee	\$
Tech Fee	\$
Excise Tax	\$
PSFS	\$
Guaranty Fund	\$
Add'l per Fee	\$
Total Fees	\$
Sub- Total Paid	\$
Balance Due	\$

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



7178 Columbia Gateway Drive, Columbia MD 21046
Phone (410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
Website: www.hchealth.org

Peter L. Beilenson, M.D., M.P.H., Health Officer

November 21, 2011

TO: Ron Wood at United Propane
Via E-mail: Rwood@unitedpropane.com

RE: Building Plan
12147 Patapsco Ridge Road
Marriottsville, Maryland 21104
Building Permit # B11003315

Further review is contingent upon submission of a building plan showing the following:

- Well must be shown on plan or note stating location of well.
- Proposed location of propane tank must be shown and labeled.

Processing of your building permit will be placed "on hold" until the building is revised and resubmitted. If you have any questions or correspondence, I can be reached at the above address or by telephone at (410) 313-2775.

Respectfully,

Dana Bernard, REHS/RS

Bureau of Environmental Health

Development and Coordination

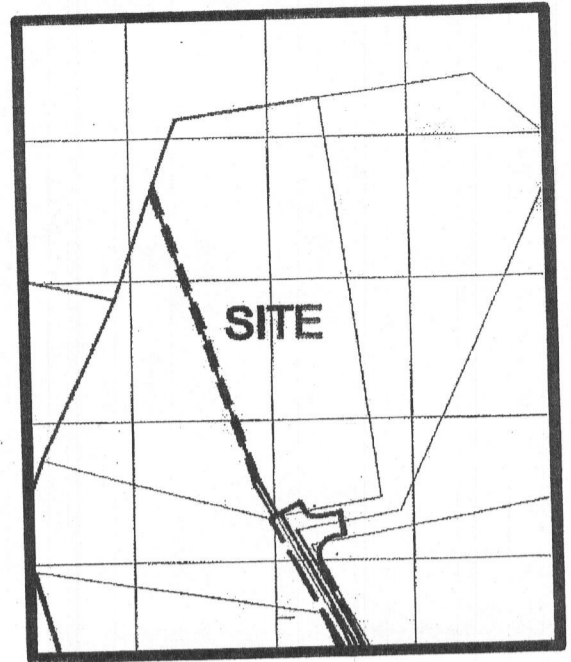
Well and Septic Program

Phone (410) 313-2775

E-mail: DBernard@howardcountymd.gov

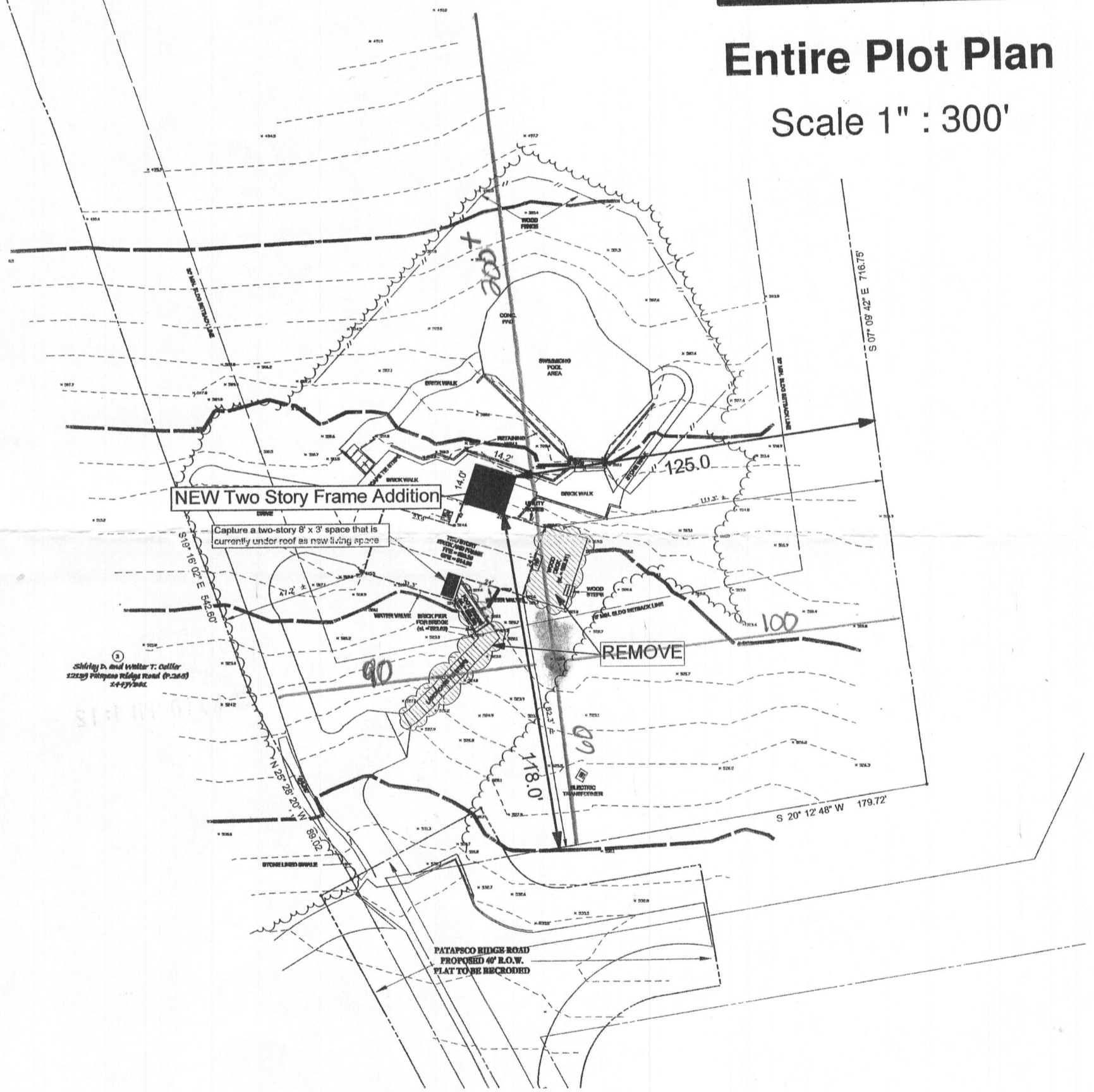
cc: Well & Septic program file

12147 Patapsco Ridge Road
218,764.5 Sq. Ft.
5.02 Acres



Entire Plot Plan

Scale 1" : 300'



SITE PLAN

SCALE 1" : 40'

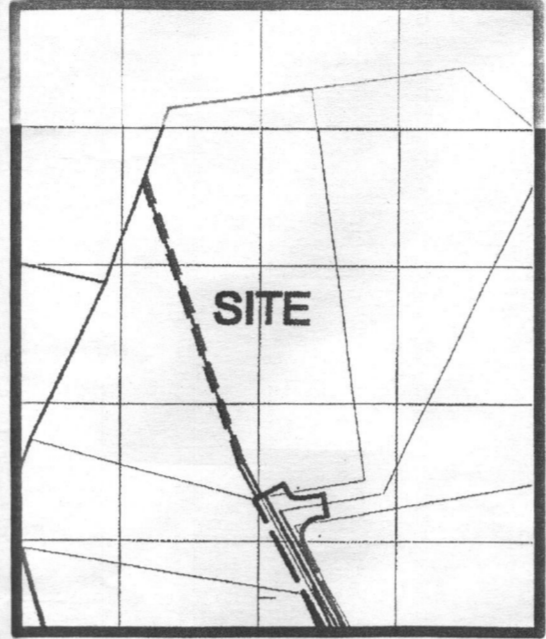
ARDO
CONTRACTING, INC.
(410) 290-9899

Christmas Project
12147 Patapsco Ridge Road
Marriottsville, MD 21104

12147 Patapsco Ridge Road
 218,764.5 Sq. Ft.
 5.02 Acres



Charles W. Horvath, Jr. and wife
 22146 Patapsco Ridge Road (P-201)
 6/9/2005



Entire Plot Plan
 Scale 1" : 300'

INDEX OF DRAWINGS	
Sheet	Contents
1	Plot Plan, Index, Notes
2	Demolition Plans
3	As-Built Plans
4	As-Built Elevations
5	New Foundation, Basement Level Plans
6	New 1st and 2nd Floor Plans
7	New Elevations
8	Steel & Framing Details, Notes
9	Cross Section of new Addition
10	Kitchen and Master Bath Details
11	Electrical Plans, Notes

Plot Plan Scale 1" : 20'

NO.	DESCRIPTION OF CHANGE:	BY	DATE

Christmas Project
 12147 Patapsco Ridge Road
 Marriotsville, MD 21104

ARDO
 CONTRACTING, INC.
 (410) 290-9899

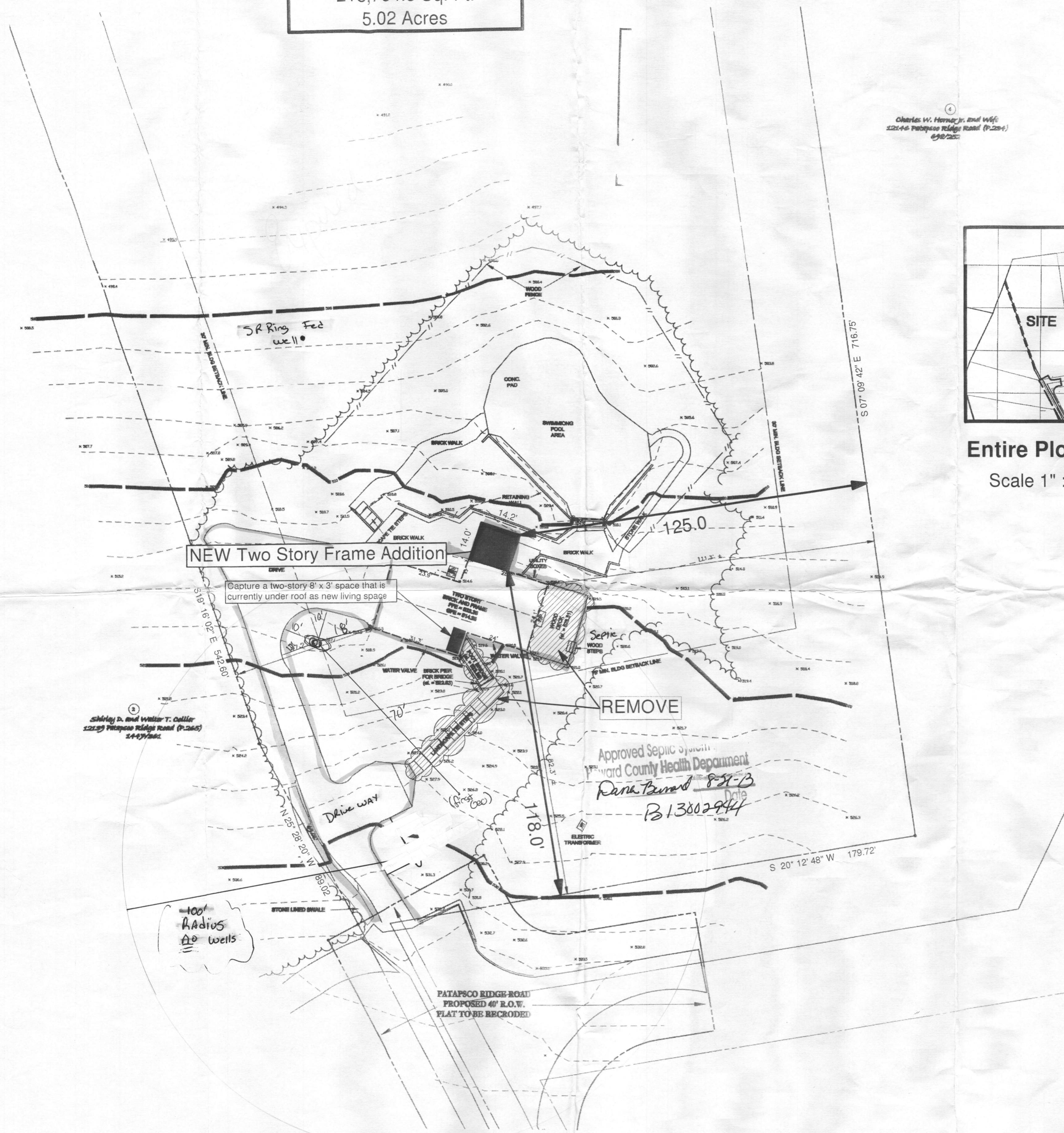
Architect's Seal:
 James F. Molinelli, Jr.
 7277-A

Print Date
 1/18/2011

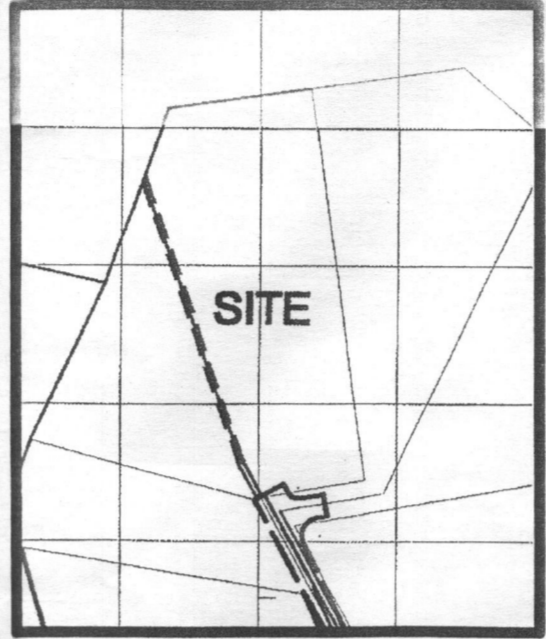
SHEET:

1

12147 Patapsco Ridge Road
 218,764.5 Sq. Ft.
 5.02 Acres



Charles W. Horvath, Jr. and wife
 12147 Patapsco Ridge Road (P-204)
 09/02/00



Entire Plot Plan
 Scale 1" : 300'

INDEX OF DRAWINGS	
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11	Electrical Plans, Notes

Plot Plan Scale 1" : 20'

NO.	DESCRIPTION OF CHANGE:	BY	DATE

Christmas Project
 12147 Patapsco Ridge Road
 Marriotsville, MD 21104

ARDO
 CONTRACTING, INC.
 (410) 290-9899

Architect's Seal:
 James F. Molinelli, Jr.
 7277-A

Print Date
 1/18/2011

SHEET:

1