



LAND USE PERMIT APPLICATION

ALLEGANY COUNTY, MARYLAND

PERMIT NUMBER:

DATE APPLIED: / / 201
TIME: am / pm

APPLICANT/PROPERTY OWNER/CONTRACTOR INFORMATION

This section must be fully completed prior to application acceptance

APPLICANT *Principal Contact – Permit will be issued and mailed to the person or Company noted in this field.*

Last Name	First Name	Middle	Phone(work)
Address			Phone(home)
City	State	Zip	Phone(cellular)
Email Address		Website	

PROPERTY OWNER *APPLICANT if left blank (Note: Certificate of Occupancy, if applicable, will be forwarded to person(s) indicated within this section unless otherwise instructed.*

Last Name	First Name	Middle	Phone(work)
Address			Phone(home)
City	State	Zip	Phone(cellular)

GENERAL CONTRACTOR *PROPERTY OWNER if left blank*

Company Name:	Contact Name	Phone(work)
Address		[] HB Reg. # / [] MD MHIC #
City	State	Zip

ELECTRICAL CONTRACTOR *PROPERTY OWNER if left blank*

Company Name:	Electricians Name	Phone(work)
Address		MD Master License #
City	State	Zip

PLUMBING CONTRACTOR *PROPERTY OWNER if left blank*

Company Name:	Plumbers Name	Phone(work)
Address		MD Master License #
City	State	Zip

TYPE OF USE - Please check the appropriate description(s):

BUILDING CODES INFORMATION Circle the appropriate

LAND USE	Land Use Classification		CONSTRUCTION CLASS	Use Group					CONSTRUCTION TYPE	Type				
	<input type="checkbox"/> SINGLE FAMILY DWELLING	<input type="checkbox"/> COMMERCIAL		<input type="checkbox"/> IBC	<input type="checkbox"/> IRC	A	1	2		3	4	5	I	A
<input type="checkbox"/> MOBILE HOME	<input type="checkbox"/> INDUSTRIAL		ASSEMBLY											
<input type="checkbox"/> DUPLEX	<input type="checkbox"/> INSTITUTIONAL		BUSINESS									II	A	B
<input type="checkbox"/> ACCESSORY STRUCTURE	<input type="checkbox"/> MULTI-FAMILY DWELLING		EDUCATIONAL											
<input type="checkbox"/> ADDITION	<input type="checkbox"/> EXTRACTIVE TYPE INDUSTRY		FACTORY		1	2								
<input type="checkbox"/> AGRICULTURAL			HIGH HAZARD		1	2	3	4	5			III	A	B
<input type="checkbox"/> OTHER	<input type="checkbox"/> DEMOLITION		INSTITUTIONAL		1	2	3	4						
<input type="checkbox"/> OCCUPANCY	<input type="checkbox"/> GRADING		MERCANTILE									IV	HT	
<input type="checkbox"/> HOME OCCUPATION	<input type="checkbox"/> STORMWATER MANAGEMENT		RESIDENTIAL		1	2	3	4						
<input type="checkbox"/> SIGN	<input type="checkbox"/> FOREST HARVEST		STORAGE		1	2						V	A	B
			UTILITY & MISC.		U									

Written Description:

Estimated Value (\$):

PROJECT SCHEDULE

Project subject to Building Codes Permitting Process; Construction drawings STANDARD CONSTRUCTION PLAN ADDENDUM submitted

PROJECT SCHEDULE #1	# UNITS	FOUNDATION	<input type="checkbox"/> BASEMENT <input type="checkbox"/> CRAWLSPACE <input type="checkbox"/> SLAB <input type="checkbox"/> PIERS <input type="checkbox"/> OTHER	PROJECT SCHEDULE #2	# UNITS	FOUNDATION	<input type="checkbox"/> BASEMENT <input type="checkbox"/> CRAWLSPACE <input type="checkbox"/> SLAB <input type="checkbox"/> PIERS <input type="checkbox"/> OTHER
	WIDTH					WIDTH	
LENGTH				LENGTH			
HEIGHT		UTILITIES	<input type="checkbox"/> ELECTRIC <input type="checkbox"/> GAS <input type="checkbox"/> OIL <input type="checkbox"/> OTHER	HEIGHT		UTILITIES	<input type="checkbox"/> ELECTRIC <input type="checkbox"/> GAS <input type="checkbox"/> OIL <input type="checkbox"/> OTHER
STORIES				STORIES			
ROOMS				ROOMS			
BEDROOMS		HEATING & A.C.	<input type="checkbox"/> CENTRAL <input type="checkbox"/> BASEBOARD <input type="checkbox"/> OTHER <input type="checkbox"/> NONE	BEDROOMS		HEATING & A.C.	<input type="checkbox"/> CENTRAL <input type="checkbox"/> BASEBOARD <input type="checkbox"/> OTHER <input type="checkbox"/> NONE
BATHROOMS				BATHROOMS			
FINISHED AREA				FINISHED AREA			
UNFINISHED AREA		FIREPLACE(S)	<input type="checkbox"/> YES <input type="checkbox"/> NO	UNFINISHED AREA		FIREPLACE(S)	<input type="checkbox"/> YES <input type="checkbox"/> NO
TOTAL AREA				TOTAL AREA			
#OCCUPANTS				#OCCUPANTS			

LEGAL DESCRIPTION OF PROPERTY/ SITE INFORMATION

For assistance completing this section, please call the LDS Office

LOT -LOCATION INFORMATION			
NEAREST COMMUNITY:		LANDMARK:	
LOCATION DESCRIPTION:			
LOT -LEGAL INFORMATION		LOT - INFRASTRUCTURE INFORMATION	
Election District:	Tax Account #(s):	Access:	<input type="checkbox"/> Existing <input type="checkbox"/> Proposed <input type="checkbox"/> Other
Zoning District:	Tax Map:		<input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Other
Planning Region:	Quad:	Water:	<input type="checkbox"/> Existing <input type="checkbox"/> Proposed
Easting:	Parcel(s):	Entity:	<input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Other
Northing:	Lot #(s):	Source Name:	
FEMA FIRM Zone	Lot Size(T):	Sewerage:	<input type="checkbox"/> Existing <input type="checkbox"/> Proposed
Map ID#:	Deed, Liber/Folio:	Entity:	<input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Other
Land Use Code:	Other LUP/BOZA:	Source Name:	

BOARD OF ZONING APPEALS INFORMATION

BOZA#:	TYPE:	<input type="checkbox"/> SPECIAL EXCEPTION	<input type="checkbox"/> VARIANCE	<input type="checkbox"/> ADMINISTRATIVE ERROR	<input type="checkbox"/> OTHER
CASE NAME:	CHAPTER/SECTION/ARTICLE:				
SUBJECT:					
SUBMITTED:	HEARING:	DECISION: <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED			

SUBDIVISION INFORMATION *Plat preparation in-process*

PLAT #:	LOT OF RECORD:	<input type="checkbox"/> YES: <input type="checkbox"/> NO, PLAT REQUIRED
PLAT NAME:	TYPE:	<input type="checkbox"/> MAJOR <input type="checkbox"/> MINOR
MISC INFO:	DELTA #:	
SUBMITTED	APPROVED	AMENDED:

DEVELOPMENT PLAN INFORMATION

SITE PLAN INFO	FPM PLAN INFO
SITE PLAN#:	SITE PLAN#:
PLAN NAME:	PLAN NAME:
AREA DISTRUBED: <i>Ac / sf</i>	AREA DISTRUBED: <i>Ac / sf</i>
PLAN TYPE: <input type="checkbox"/> MAJOR	PLAN TYPE: <input type="checkbox"/> MAJOR
<input type="checkbox"/> STANDARD	<input type="checkbox"/> STANDARD
<input type="checkbox"/> MINOR	<input type="checkbox"/> MINOR
<input type="checkbox"/> N/A	<input type="checkbox"/> N/A
SUBMITTED:	SUBMITTED:
APPROVED:	APPROVED:
PERF. AGREEMENT:	ELEV. CERT.:
BOND:	FLOODWAY: <input type="checkbox"/> YES
O&M AGREEMENT:	DECL. LAND REST.

FEEES

INVOICE#	
APPLICATION	\$
BOZA	\$
ZONING CERT.	\$
CODE REVIEW	\$
INSPECTION(S)	\$
ASCD	\$
SWM WAIVER	\$
SWM REVIEW	\$
SEC REVIEW	\$
SUBDIVISION	\$
OTHER	\$
TOTAL	\$

SITE PLAN/SETBACK INFORMATION

MINOR SITE PLAN: For projects larger than 300sf, use Standard or Major Site Plan format.

	<i>Values In feet</i>	
FRONT:		
SIDE (Right):		
SIDE (Left):		
REAR:		
ALLEY/STREET:		
OTHER BUILDING(S):		
STREAM/DRAINWAY:		
HEIGHT LIMIT:		
BUFFER:		
OTHER:		
CORNER LOT:	<input type="checkbox"/> YES	
VARIANCE REQUESTED:	<input type="checkbox"/> YES	

APPLICANT'S CERTIFICATION: *I hereby agree to comply with all regulations and codes, which are applicable hereto. I further agree that any misstatement or misrepresentation of facts presented as part of this application, or change to proposal without approval of the agencies concerned, shall constitute sufficient grounds for the disapproval or revocation of the subject permit. I hereby affirm that I own the property which is the subject of this application; or that I am the duly designated representative of the property owner, and that I possess the legal authority to make this Affidavit on behalf of myself or the owner for whom I am acting. I do solemnly declare and affirm under the penalties of perjury that the contents of this Application are true and correct to the best of my knowledge, information and belief.*

APPLICANT'S SIGNATURE: _____ DATE: _____