



Permit Number: \_\_\_\_\_

**Talbot County Office of Planning and Permits**  
215 Bay Street, Suite 2  
Easton, Maryland 21601  
410-770-6840

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**Building Permit/Zoning Certificate Application**

**Type of Construction:**                      Residential                      Commercial                      Agricultural

**Project Description:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Fees Paid:</b>	Building Permit.....	\$	_____	.00
	Zoning Fee.....	\$	_____	<b>35.00</b>
	Flood Plain Surcharge .....	\$	_____	.00
	Other.....	\$	_____	.00
<b>Total Fees Paid:</b>	.....	\$	_____	.00

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**Property Owner:**

Name: \_\_\_\_\_  
Mail Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

**Contractor:**

Name: \_\_\_\_\_  
Mail Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
MHIC # \_\_\_\_\_ MHBR #: \_\_\_\_\_ MDE #: \_\_\_\_\_

**Applicant:**

Name: \_\_\_\_\_  
Mail Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

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**Property Information:**

Zoning: \_\_\_\_\_ Acres: \_\_\_\_\_ Map: \_\_\_\_\_ Grid: \_\_\_\_\_ Parcel: \_\_\_\_\_ Lot: \_\_\_\_\_ Section: \_\_\_\_\_  
Tax Identification Number: \_\_\_\_\_  
Subdivision Name: \_\_\_\_\_  
Location of Project (Physical/911 Address): \_\_\_\_\_  
\_\_\_\_\_

Road Frontage: \_\_\_\_\_ Longest Depth (front to rear): \_\_\_\_\_ Water Frontage (tidal): \_\_\_\_\_  
Flood Zone: \_\_\_\_\_ Exempt from Flood Zone compliance? **Yes / No**

**Setbacks:**

Proposed: Front: \_\_\_\_\_ Side: \_\_\_\_\_ Side: \_\_\_\_\_ Rear: \_\_\_\_\_ MHW: \_\_\_\_\_  
Required: Front: \_\_\_\_\_ Side: \_\_\_\_\_ Side: \_\_\_\_\_ Rear: \_\_\_\_\_ MHW: \_\_\_\_\_

**Type of Construction: (Circle One) Site built / Pre-engineered / Manufactured / Modular**

**Dimensions**

Width (ft): \_\_\_\_\_ Length (ft): \_\_\_\_\_ Height (ft): \_\_\_\_\_ No Stories: \_\_\_\_\_

Heated Area SF: \_\_\_\_\_ Plan Area SF (footprint): \_\_\_\_\_ Non-Heated Area SF: \_\_\_\_\_

Total number of bedrooms: \_\_\_\_\_ Total number of bathrooms: \_\_\_\_\_

**Sub-Contractor Information**

Electrical Permit Required: Yes / No Contractor License #: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Plumbing Permit Required: Yes / No Contractor License #: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Mechanical/HVAC Permit Required: Yes / No Contractor License #: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Type of Heat: \_\_\_\_\_

Fuel Gas Permit Required: Yes / No Contractor License #: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Fire Sprinklers Required: Yes / No

**Sanitary Facilities:** (Please Circle) Water: On Site / Public Sewer: On Site / Public

**Value of Construction:** \$ \_\_\_\_\_

**Office Use Only:**

Approvals: Building Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

Health Department: \_\_\_\_\_ Date: \_\_\_\_\_

Planning Office: \_\_\_\_\_ Date: \_\_\_\_\_

Department of Public Works: \_\_\_\_\_ Date: \_\_\_\_\_

Comments/Special Conditions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Applicant's Certification:** By completing this application the applicant hereby certifies as follows: (1) I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as their agent; (2) That the information in this application and construction documents provides full disclosure and a complete description of the project; and (3) That the information contained in the application and construction documents is in compliance with all applicable covenants and or deed restrictions.

If a permit is issued the applicant further certifies as follows; (1) That I will comply with all applicable codes of Talbot County and the State of Maryland; (2) That I will perform no work on the above property not specifically included in this application and construction documents; and, (3) That County Officials shall have authority to enter areas covered by such permit to enforce the codes applicable to such permit.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_