

File Number: \_\_\_\_\_



**Talbot County Department of Planning and Zoning**  
215 Bay Street, Suite 2  
Easton, Maryland 21601  
410-770-8030

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### Project Activity and Status Report

Project Name: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

Project Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Tax Map: \_\_\_\_\_ Grid: \_\_\_\_\_ Parcel: \_\_\_\_\_ Lot: \_\_\_\_\_ Zoning: \_\_\_\_\_

Type of Project: *(Circle one)* Subdivision Revision Plat Site Plan

Last Approval: *(Circle one)* Sketch Preliminary Final

Agent: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Date of Last Formal Review: \_\_\_\_\_ By: *(Circle one)* TAC, PC, CRM

Last Project Status Form Submission Date: \_\_\_\_\_

Your project expires on: \_\_\_\_\_

This form must be completed and submitted to the Talbot County Department of Planning and Zoning at no more than three (3) month intervals from the date of last formal review or three (3) months from last Project Status Report as applicable. Please provide specific details of status.

Check all that apply and clarify with submission date and/or supporting details.

**Category**

**Clarify Status and Submission Date**

- |                                |       |
|--------------------------------|-------|
| _____ Stormwater Management    | _____ |
| _____ Road Plan                | _____ |
| _____ Access Approval          | _____ |
| _____ Public Sewer             | _____ |
| _____ Individual Septic System | _____ |
| _____ Shared Sanitary Facility | _____ |
| _____ Sewage Disposal Area     | _____ |
| _____ Forest Conservation      | _____ |
| _____ Board of Appeals         | _____ |
| _____ Waiver Request           | _____ |
| _____ Lot Reconfiguration      | _____ |
| _____ Critical Area Commission | _____ |
| _____ MDE Permit               | _____ |
| _____ Army Corps Permit        | _____ |
| _____ Heritage Letter          | _____ |
| _____ Other                    | _____ |

**Filing this Project Activity and Status Report does not extend the expiration of your project.**

\_\_\_\_\_  
Applicant's/Agent Signature

\_\_\_\_\_  
Date