

# CITY OF FROSTBURG

## BUILDING PERMIT APPLICATION



DEPARTMENT OF COMMUNITY DEVELOPMENT

CITY HALL

59 E. MAIN STREET, P.O. BOX 440

FROSTBURG, MARYLAND 21532

### **Applicant Information**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_

### **Property Owner Information**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_

### **Builder/Contractor Information** *If property owner, State of Maryland Affirmation of Landowner MUST be attached*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/St/Zip: \_\_\_\_\_

MHBR No: \_\_\_\_\_ MHIC No: \_\_\_\_\_

### **Project Information**

Project Address or Location: \_\_\_\_\_

Primary Structure      Accessory Structure | Building Use: \_\_\_\_\_

Description: \_\_\_\_\_

Dimensions: \_\_\_\_\_ Square footage: \_\_\_\_\_ Height: \_\_\_\_\_

Area Disturbed: \_\_\_\_\_ No. of Units: \_\_\_\_\_ No. of Stories: \_\_\_\_\_

No. of Rooms: \_\_\_\_\_ No. of Bathrooms: \_\_\_\_\_ No. of Bedrooms: \_\_\_\_\_ Basement: Y / N

Water      Sewer      Electric | Estimated Value: \$ \_\_\_\_\_ *for Allegany County Assessment Office use*

### **Setback Information**

Front: \_\_\_\_\_ Rear: \_\_\_\_\_ Left: \_\_\_\_\_ Right: \_\_\_\_\_ Other: \_\_\_\_\_

Setback from Alley: \_\_\_\_\_ Stream/Drainway: \_\_\_\_\_ Buildings: \_\_\_\_\_

Other Setback Information: \_\_\_\_\_ Corner Lot

### **Property Information** *Attach Maryland Real Property Search data sheet to complete application*

Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Lot: \_\_\_\_\_ Tax Account ID: \_\_\_\_\_

Lot Size: \_\_\_\_\_ Zoning District: \_\_\_\_\_ Election District: \_\_\_\_\_ Historic District: Y / N FEMA Zone: \_\_\_\_\_

Subdivision Name: \_\_\_\_\_ Plat No.: \_\_\_\_\_

Comments:

TO BE COMPLETED BY CITY

**Board of Zoning Appeals Information**

**BOZA Case No.:** \_\_\_\_\_

Submission Date: \_\_\_\_\_

Hearing Date: \_\_\_\_\_

Case Name: \_\_\_\_\_

Subject: \_\_\_\_\_

Type:      Special Exception      Variance      Administrative Error      Other: \_\_\_\_\_

BOZA Decision:              APPROVED              DENIED              Date: \_\_\_\_\_

**Approval Checklist**

Check if Required	Approval Agencies	Approval Date	Approved by
PLAN REVIEW	City/MEGCO Inspections		
SEDIMENT & EROSION CONTROL	Allegany Soil Conservation District		
UTILITIES/STREETS	City Public Works Dept.		
PLANNING	Frostburg Planning Commission		
STORMWATER	City/ACSD		
SUBDIVISION	City		
ADA	City		
FIRE MARSHAL	Md. State Fire Marshal		
FOOD SERVICE	Allegany Co. Health Dept.		

**Building Inspection Checklist**

Check if Required	Approval Date	Approved by
FOOTING		
FOUNDATION		
FRAMING		
ELECTRIC SERVICE		
PLUMBING/SPRINKLER SERVICE		
ELECTRIC ROUGH-IN		
PLUMBING ROUGH-IN		
SPRINKLER ROUGH-IN		
ELECTRIC FINAL		
PLUMBING FINAL		
SPRINKLER FINAL		
INSULATION/CLOSE-IN		
FINAL/OCCUPANCY		

<b>Fees:</b>	
Application Fee:	\$ _____
Permit Fee:	\$ _____
Water Tap Fee:	\$ _____
Water Meter:	\$ _____
Sewer Tap Fee:	\$ _____
Plan Review Fee:	\$ _____
Inspection/Codes Fee:	\$ _____
SWM Review Fee:	\$ _____
Other:	\$ _____
<b>Total:</b>	<b>\$ _____</b>
Date Fees Paid: _____	
Payment Method:	Check      Cash
Check #'s: _____	

*I hereby agree to comply with all regulations and codes which are applicable hereto, and further agree than any misstatement or misrepresentation of the 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. It is my responsibility to relocate any and all utilities that may be located upon the proposed construction site at my expense. **No roof, sump, or surface drains are to be connected to the sanitary sewer system.***

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

FOR CITY USE ONLY

Application Date: \_\_\_\_\_ Taken by: \_\_\_\_\_ Status: \_\_\_\_\_

Permit Issue Date: \_\_\_\_\_ Issued by: \_\_\_\_\_

Certificate of Occupancy Issue Date: \_\_\_\_\_

PERMIT NO.