



The Town of Rock Hall
21447 Rock Hall Avenue
P.O. Box 367
Rock Hall, Maryland 21661

Application for Building Permit

TYPE OF CONSTRUCTION

Modular	<input type="checkbox"/>	Repair/Replace	<input type="checkbox"/>
Mobile Home	<input type="checkbox"/>	Accessory	<input type="checkbox"/>
Pre-Engineered	<input type="checkbox"/>	Addition	<input type="checkbox"/>
Stick Built	<input type="checkbox"/>	Other	<input type="checkbox"/>

Date: _____

For Office Use Only

Application Fee: _____
Permit #: _____

PROPERTY INFORMATION

Property Location/Address: _____

Tax Map: _____ Parcel: _____ Elec. District: _____

Acres: _____ Lot: _____ Deed Ref: _____

Proposed Work: _____ Market Value of Work: \$ _____

PROPERTY OWNER INFORMATION

Property Owner Name: _____

Mailing Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

APPLICANT INFORMATION, IF DIFFERENT

Applicant Name: _____

Mailing Address: _____ City, State, Zip: _____

Phone: _____ Email: _____

SETBACKS

Front: _____ Distance to Well: _____ Tree(s) Removed: _____ sq ft

Side: _____ / _____ Distance to Septic: _____ Area of Impervious Surface: _____

Rear: _____ Distance to Mean High Tide: _____ % Slope: _____

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CONSTRUCTION INFORMATION

Unfinished Basement: _____ sq ft Finished Basement: _____ sq ft

First Floor: _____ sq ft Second Floor: _____ sq ft

Attached Garage: _____ sq ft Carport: _____ sq ft

Deck: _____ sq ft Porch: _____ sq ft

Acc. Building: _____ sq ft Height of Structure: _____ ft

Other: _____

Total Bedrooms: Existing _____ New: _____ Total Bathrooms: Existing _____ New: _____

Type of Sewage Disposal: ☐ Public
☐ Private

Improvements: ☐ Electric
☐ Plumbing
☐ HVAC
☐ Fireplace/Chimney
☐ Other: _____

Type of Water Supply: ☐ Public
☐ Private

Entrances: State ☐ New ☐ Existing
County ☐ New ☐ Existing
Town ☐ New ☐ Existing
Private ☐

Is this a Rental? ☐ YES ☐ NO

IF YES, NOTE ENCOURAGING LEAD-SAFE WORK WILL BE ADDED TO PERMIT

Is there a Cemetery on property? ☐ YES ☐ NO

IF YES, LOCATE ON SITE PLAN

CONTRACTORS

	License Number	Telephone Number
Builder		
Plumber		
Electrician		
HVAC		

I hereby Certify and agree that I am authorized to make this application; the information provided is correct; I grant Town Officials the right to enter onto the property for the purpose of inspecting the work permitted and posting notices.

Applicant's Name: _____ Phone Number: _____

Applicant's Signature: _____ Date: _____

For Office Use Only

Zone:	Floodplain:	Floodplain Elevation:	1st Floor Elevation:
Building:	Critical Area:	Sediment Control:	Zoning:
Entrance:	Wetlands:	Stormwater:	Army Corps:
Floodplain:	Water/Wastewater:	Health Dept:	Other:

Application having been made for a zoning certificate and the proposed structure and usage being in conformity with the land use ordinance of Town of Rock Hall, I hereby issue this building permit for a period of 6 months from the date hereof, contingent to:

Town Manager: _____ **Date:** _____

Zoning Administrator: _____ **Date:** _____