

Permit# \_\_\_\_\_

Map \_\_\_\_\_  
Parcel \_\_\_\_\_  
Zoning \_\_\_\_\_

# Permit Application

Fee Paid \_\_\_\_\_  
Date Paid \_\_\_\_\_  
Historical Review \_\_\_\_\_

## Town of Denton Planning & Codes

4 N. Second St., Denton, MD 21629  
410-479-3625 Phone 410-479-3534 Fax

Critical Area  
Yes  No

Building Location: \_\_\_\_\_  
Owners' Name: \_\_\_\_\_  
Address: \_\_\_\_\_

HomePhone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
E-Mail \_\_\_\_\_

### TYPE OF WORK

- |   |                                     |  |
|---|-------------------------------------|--|
| <input type="checkbox"/> One or Two Family Dwelling   | <input type="checkbox"/> Industrial | <input type="checkbox"/> Pool            |
| <input type="checkbox"/> Multi Family Dwelling        | <input type="checkbox"/> Commercial | <input type="checkbox"/> Rehab           |
| <input type="checkbox"/> Accessory (over 200 Sq. Ft.) | <input type="checkbox"/> Additions  | <input type="checkbox"/> Demolition      |
| <input type="checkbox"/> Other _____                  | <input type="checkbox"/> Roof       | <input type="checkbox"/> Bldg. Footprint |

### IMPROVEMENTS

- |                                     |                                   |                                      |
|-------------------------------------|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Exterior | <input type="checkbox"/> HVAC        |
| <input type="checkbox"/> Plumbing   | <input type="checkbox"/> Interior | <input type="checkbox"/> Other _____ |

### CONTRACTOR

License #: \_\_\_\_\_  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

\* All commercial work requires architects/engineers as defined by Maryland State Law. \*Electrical and Plumbing contractors must obtain separate Permits from the Town and must request inspections directly from MDIA at 410-822-8300. Building permits for commercial or industrial properties will not be issued without evidence of Fire Marshall approval.

### INSPECTIONS

Construction Cost \$ \_\_\_\_\_

To schedule inspections, you must call Denton Planning and Codes 36 hours in advance at 410 479-3625.  
Failure to request an inspection, failed inspections, inspections not ready, will be billed a penalty.

1. Setbacks (prior to issuance of permit)
2. Footer (following trench excavation and prior to pouring concrete)
3. Slabs: all concrete slabs prior to pouring concrete
4. Foundation (prior to backfilling)
5. Framing/Rough-in (prior to insulation) & after plumbing, electrical roughing approval
6. Mechanical
7. Insulation (prior to closing)
8. Final Building, electrical, plumbing, zoning, and mechanical (prior to receiving Certificate of Use and Occupancy)

### FEES

 All fees include review, issuance and the six required inspections as outlined herein.

Administrative Fee (see fee schedule) \_\_\_\_\_ + Home Builder Fund \$ \_\_\_\_\_ + \$ . \_\_\_\_\_ Per Sq. Ft. \$ \_\_\_\_\_ = Total Fee \$ \_\_\_\_\_  
Total Sq. Ft. =

### LOT DIMENSIONS: (include site plans)

\_\_\_\_\_ Width \_\_\_\_\_ Frontage \_\_\_\_\_ Existing % Lot Coverage Setbacks : \_\_\_\_\_ Front \_\_\_\_\_ Rear  
\_\_\_\_\_ Depth \_\_\_\_\_ Total Area \_\_\_\_\_ Proposed % Lot Coverage Height \_\_\_\_\_ Side

### Certifications:

 That applicant hereby certifies and agrees as follows:

1. applicant is authorized to make this application;
2. the information provided is correct;
3. applicant will comply with all Town, State and Federal regulations regardless of what information is shown on attached plans and specifications;
4. applicant will perform only the work as described herein;
5. applicant grants the officials of the Town of Denton the right to enter the property for purposes of inspections & the posting of notices;
6. work must commence within 6 months of the issuance of this permit or it becomes void; and
7. all work must be completed within 18 months unless an extension is granted.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print/Type Name: \_\_\_\_\_

Planning & Codes approval: \_\_\_\_\_ Date: \_\_\_\_\_