



DATE PROCESSED: _____
PERMIT #: _____
CLERK: _____

**BUILDING PERMIT APPLICATION
 RESIDENTIAL ACCESSORY STRUCTURES**

**Detached Garage, Detached Structure w/Living Space, Pole Barn, Shed, Deck, Storage Building, Porch, Slab, Patio, Carport,
 Fence over 7ft., Lean-to, Gazebo, Pergola, Pool House, Retaining Wall, Ground Mounted Solar, Pavilion, Etc**

**If The Property Is Located Within Any Incorporated Town Limits You MUST Include Your Approved Zoning Certificate/Construction
 Authorization When Submitting Your Application. See The Attached Check List For Guidance**

<p>Property Owner(s) Information: Name(s) _____ Mailing Address _____ City _____ State _____ Zip Code _____ Phone # _____ Other #: _____</p> <p>Person to contact when permit is approved: Name: _____ Phone: _____ Email _____</p>	<p>Who is doing the WORK? <input type="checkbox"/> Owner <input type="checkbox"/> Contractor If Contractor the following information is required: Company Name _____ License Holder is: _____ Maryland MHIC License # _____ Exp. Date: _____ Mailing Address _____ City _____ State _____ Zip Code _____ Phone # _____ Email _____</p>
Property Type: Primary Residence? <input type="checkbox"/> Yes <input type="checkbox"/> No Rental Property? <input type="checkbox"/> Yes <input type="checkbox"/> No Resale Property? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Who is applying for Permit? <input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Contractor <input type="checkbox"/> Representative of Owner <input type="checkbox"/> Representative of Contractor Name _____ Contact # _____ If property owner(s)/contractor not applying then Letter(s) of Permission from owner(s) & contractors will be required prior to issuance of the approved permit. Information regarding letters of permission(s) refer to submittal check list or contact our office	

PROPERTY INFORMATION WHERE STRUCTURE IS TO BE BUILT

Link To Maryland Tax Assessment Page http://sdat.dat.maryland.gov/RealProperty is Helpful to Fill Out Required Property Account Information Property Account Tax ID# (8 digit #) District# _____ Account# _____ Location/Street: _____ City: _____ Subdivision: _____ Lot #: _____ Tax Map#: _____ Grid#: _____ Parcel#: _____

OFFICIAL USE ONLY: DIVISION OF PERMITS & INSPECTIONS

*Perform Hansen Property Search for Related Permits. Ex: Shell, Renewal, Expired, Voided, New Owner, Etc.

*New owner or completed permit is NOT a renewal

OFFICIAL USE ONLY: THIS SECTION TO BE COMPLETED BY DEVELOPMENT PLANS REVIEW ONLY

**Verify Property Address for Critical Area/Forest Retention/Flood Plain And Any Related Records
 When Reviewing Site Plans For Applicant.**

WATER SOURCE? Artesian; Town; Private Community System; Onsite Well: Existing New

WASTEWATER SOURCE County; Town; Private Community System; Onsite Septic: Existing New

*****COOL SPRING DEVELOPMENT REQUIRES WASTEWATER INSPECTION*****

GRADING /WASTEWATER

Grading Permit required? No Yes Permit # _____ Approvers Initials _____

Waste Water Permit required? No Yes Permit # _____ Approvers Initials _____

COMPLETE THE FOLLOWING INFORMATION

What Is The Estimated Cost Of Construction? _____ Is there an existing Sprinkler System? No Yes

Is This A Rebuild Due To Loss? No Yes If Yes What Was The Cause: _____ Date Of Loss? _____

Are You Installing Basement/Foundation? No Yes; If Yes Type(s)? Crawl; Full; Slab; Piers

Are You Building On Existing Basement/Foundation? No Yes; If Yes Type(s)? Crawl; Full; Slab; Piers

BUILDING SCOPE OF WORK MUST MIRROR BUILDING PLANS SUBMITTED

DESCRIBE SCOPE OF WORK: _____

ONLY FILL IN THE INFORMATION IN THIS SECTION THAT PERTAINS TO WHAT YOU ARE APPLYING FOR

DETACHED GARAGE/POLE BUILDING/STORAGE BUILDING/SHED: 1st floor _____ Sq Ft; 2nd Floor _____ Sq Ft.

If has 2nd Floor is it Accessible by? (Check one): Stairs* Pull Down Stairs Access Opening Portable Ladder

*If 2nd Floor what will it be used as? Storage; In-Law Suite/Apt; Recreation Rm;

Other Explain: _____

IN-LAW SUITE/APARTMENT _____ Sq Ft; # of BEDRMS _____; #FULL BATHRMS _____; #HALF BATHRMS _____

List all Rooms within In-Law Suite/Apartment: _____

Is the In-Law Suite/Apartment for a Family Member or Rental

CARPORT _____ SQ FT DECK _____ SQ FT GAZEBO _____ SQ FT LEAN-TO _____ SQ FT

PATIO _____ SQ FT PAVILION _____ SQ FT PERGOLA _____ SQ FT POOL HOUSE: _____ SQ FT

PORCH _____ SQ FT ROOF OVER _____ SQ FT SLAB _____ SQ FT SUNROOM _____ SQ FT

GROUND MOUNTED SOLAR PANELS: _____ Sq Ft; # of Panels: _____

FENCE: (Only required if any part of the fence is over 7 ft High) Height: _____ Ft. _____ Length

RETAINING WALL: How many? _____ Fill In the Length/Width/Height for each retaining wall

_____ Length _____ Width _____ Height; _____ Length _____ Width _____ Height; _____ Length _____ Width _____ Height

BASEMENT/FOUNDATION ONLY: _____ Sq Ft;

OTHER - ITEM NOT LISTED DESCRIBE: _____ WHAT IS THE SQ FT: _____

******WHAT IS THE TOTAL SQUARE FOOTAGE OF PROJECT: _____ Sq Ft**

THIS INFORMATION MUST BE COMPLETED FOR ALL PERMIT TYPES

Will there be ELECTRIC? No Yes

Will there be PLUMBING? No Yes; If yes list fixtures being installed: _____

Will there be HVACR? No *Yes * Type of Heat? _____ (ex.Gas/Oil/Propane/Electric/ Geothermal)

PROPERTIES BEDROOM/BATHROOM INFORMATION MUST BE COMPLETED FOR ALL PERMIT TYPES

	CURRENTLY ON PROPERTY	#NEW	#FUTURE BATH ROUGH IN	IF APT/INLAW SUITE # OF	TOTAL # ON SITE AT COMPLETION OF PROJECT
BEDROOMS					
FULL BATHROOMS					
HALF BATHROOMS					

I UNDERSTAND AND ACKNOWLEDGE THAT WORK CANNOT BEGIN UNTIL APPROVED PERMIT IS ISSUED

Applicant Print Name _____

Signature of Applicant _____

Date _____

CECIL COUNTY GOVERNMENT
Department of Land Use & Development Services
Division of Permits & Inspections
200 Chesapeake Boulevard, Suite 2200, Elkton, MD 21921

BUILDING PERMIT APPLICATION INFORMATION AND SUBMITTAL CHECKLIST
Permits Are Taken Monday-Friday 8:00am-3:30pm
Permits Must Be Applied For And Picked Up In Person

ALL PERMITS GO THROUGH AN APPROVAL PROCESS.
THE PERMIT SCOPE OF WORK DICTATES WHICH DEPARTMENTS WOULD HAVE TO APPROVE THE PERMIT

1. **Tax Assessment** page is helpful to fill out property information on application <http://sdat.dat.maryland.gov/RealProperty>. If the property owner(s) listed on this application do not correspond with what is currently on the Maryland Tax Assessment Page we will need a copy of the signed deed or settlement papers.
2. If property is within the incorporated Town limits of [Cecilton](#), [Chesapeake City](#), [Charlestown](#), [North East](#), [Perryville](#), [Port Deposit](#) their approval is required **prior** to you applying for a County Building Permit. Contact the appropriate Town for information and approval process. Town approval documentation must be presented when applying for your permit. We do not govern properties within the ***Incorporate Limits Of The Town of Elkton*** 410-398-4999 or ***Rising Sun*** 410-658-5353.
3. **Contractor must be licensed. Verify by visiting Maryland Home Improvement Website:** www.dlir.state.md.us/license/mhic or contact them at 410-230-6309 or Toll Free 1-888-218-5925
4. **BUILDING PLANS:** Two (2) copies of building plan(s) – Three (3) copies if in Town of Charlestown. Questions regarding Building Plans contact our office to speak with Plans Reviewer for building codes and plans submittal requirements.
5. **SITE PLANS:** Three (3) copies of a site plan, indicating the location of the project for which you are applying, location of all other structures and the location of well and septic if applicable. Questions regarding property lines, setbacks and regulations regarding approval for where and what is allowed to be built on your property contact the [Division of Planning & Zoning](#) regarding their requirements. They can also assist you in obtaining site plans. 410-996-5220
6. **LAND USE & DEVELOPMENT SERVICES**
Development Plans Review - The development plans review division evaluates grading permits, storm water management plans, and infrastructure plans (i.e. roads, storm drains, water, and wastewater). If Grading permit required it must be issued prior to applying for your building permit. **Contact the [Development Plans Review](#) regarding their requirements. 410-996-5225.**
Planning & Zoning - P&Z coordinates major and minor subdivision review, administers the forest conservation act, oversees the Chesapeake Bay Critical Area and floodplain management programs, and ensures that all land use activity is done in conformance with the Cecil County Zoning Ordinance. In general, P&Z ensures that the goals and objectives of the County's Comprehensive Plan are implemented. Contact the [Division of Planning & Zoning](#) regarding their requirements. **410-996-5220**
7. **Health Department** – Contact the [Environmental Health Department](#) regarding Well, Sanitary, Food Service, etc. regulations & requirements. Office: (410)996-5160. Their Departmental approval is required prior to issuance of a permit and the certificate of occupancy.
8. **Who may apply:** The owner(s) of the property whose names are on the deed, a licensed contractor with a contract signed by the owner(s) for work for which he is applying or a letter of permission from the owner(s). If the owner(s) of the property nor the contractor are applying for the permit then a **Letter of Permission** will be required for those that are applying on behalf of the owner(s) and the contractor hired to do the work.
Letters of Permission: If the property is in the name of a company or corporation the letter of permission must be on company/corporation letterhead and signed by the owner(s) or authorized person for the company. If a representative is applying for the contractor that was hired by the owner(s) they must submit a letter of permission on Contractors letterhead signed by the license holder to apply and pick up permits on their behalf.
9. **A \$30.00 non-refundable application fee will be required at time of application which is deducted from the cost of the permit fee.** Payment may be made by **cash, check, money order** or **certain credit cards**. There is a third party convenience/transaction fee when paying via credit card.