

	<h2 style="margin: 0;">Site Plan Review Application</h2> <h3 style="margin: 0;">Calvert County, Maryland</h3> <h3 style="margin: 0;">Department of Planning and Zoning</h3> <p style="margin: 0;">150 Main Street, Prince Frederick, MD 20678                  Phone: (410) 535- 2348 or (410) 535-1600 ext. 2356                  TDD: (410) 535-6355 Fax: (410) 414-3092                  Email: PZ@CalvertCountyMD.gov</p>
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All information must be completed and all items applicable on the attached "Site Plan Application Package Checklist" must be provided. Package preparation instructions are on the checklist. Please call Planning & Zoning with any questions about submittal requirements.

Please note that site plan approval is not a permit. Following site plan approval, construction permits must be obtained for grading/clearing, building construction and signs. An occupancy permit is required for change in use.

### PROJECT INFORMATION

- Category I Site Plan Application Submittal- According to CCZO Article 4-2.03, Category I Site Plans are "for multi-family, single-family attached (three units or more), and manufactured home communities. Institutional, local governmental, commercial, mixed use, and industrial development are also Category I site plans if any of the following criteria are met:  
 [Amended 9-21-2010]
- a. the cumulative square footage of any new construction (new buildings and additions to existing buildings) is more than 5,000 square feet; or
  - b. the vehicular traffic within an existing development project will be altered; or
  - c. the proposed development includes an automobile filling and/or service station, car wash, fast food restaurant, bank, or any use involving a drive-through/drive-up service."

- Category II Site Plan Application Submittal- According to CCZO Article 4-2.04, Category II Site Plans are "all other site plans not specified in 3a, 3b, or 3c above..."

- No fee - non-profit organization  
 \$400 - 5,000+ sq.ft. of new construction  
 \$100 - Less than 5,000 sq.ft. of new construction

Receipt Number:

If the subject of previous Concept Review, please provide the Case No.:

Project Name:

Premise Address:

### PARCEL INFORMATION

Current Deed Reference:

Current Deed Date:

Zoning District:

Town Center:

NA



Date Submitted \_\_\_\_\_

Planning & Zoning Case No. \_\_\_\_\_

Other		
Other		

**PROJECT DESCRIPTION**

Specific Type of Business:

Water:  Public  Private

Sewer:  Public  Private Septic

Gross square footage of existing building(s)	<input type="checkbox"/> N/A	
Gross square footage of new construction	<input type="checkbox"/> N/A	
Gross square footage total	<input type="checkbox"/> N/A	
Height of Building	<input type="checkbox"/> N/A	
Number of Stories	<input type="checkbox"/> N/A	
Basement/below-grade floor	<input type="checkbox"/> N/A	
Number of floors above-grading	<input type="checkbox"/> N/A	
Number of Classrooms	<input type="checkbox"/> N/A	
Enrollment number	<input type="checkbox"/> N/A	
Patron area	<input type="checkbox"/> N/A	
Largest assembly/occupant capacity	<input type="checkbox"/> N/A	
Number of employees	<input type="checkbox"/> N/A	

**CALVERT COUNTY ZONING ORDINANCE REFERENCES**

Provide the following information from the CCZO (available in the Department of Planning & Zoning, the Public Library, and online at [www.calvertcountymd.gov](http://www.calvertcountymd.gov).)

**Gross subtotals of square footage area by use**  
 [See CCZO Land Use Tables 3-1 and 3-2].

<b>Sq. ft. (Gross Subtotal)</b> <i>e.g., 6,000</i>	<b>Description</b> <i>e.g., Garden Center</i>	<b>ZO Reference</b> <i>e.g., 3-1.02</i>

Date Submitted \_\_\_\_\_

Planning & Zoning Case No. \_\_\_\_\_


**MULTI-FAMILY OR ATTACHED HOUSING**

Complete this section **only if** constructing multi-family or attached housing. Provide the following information from the CCZO (available in the Department of Planning & Zoning, the public libraries, and online at [www.calvertcountymd.gov](http://www.calvertcountymd.gov)).

Number of Dwelling Units by Type	Zoning Ordinance Reference
Density (Divide the number of units by the acreage):	
Acreage of Open Space:	

**OWNER AUTHORIZATION**

I/We the undersigned and the owners of the property described above do hereby submit this application for site plan review and authorize the agent(s) listed below to act on my/our behalf. I/We also authorize and give consent to entry upon the subject property by review agencies' staff and/or board members to the extent necessary to evaluate and act upon this application. In the event the applicant withdraws this authorization to enter, this application shall be deemed withdrawn in its entirety. (If there are more than two owners, please attach a supplemental signature form, SD-103.)

Owner's Corporation (if any):

(Print or Type) First Name:	Last Name:	
Signature:	Date:	
Mailing Address:	Email:	
City:	State:	Zip Code:
Phone:	Fax:	
(Print or Type) First Name:	Last Name:	

Date Submitted \_\_\_\_\_

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Signature:		Date:
Mailing Address:	Email:	
City:	State:	Zip Code:
Phone:	Fax:	

**APPLICANT/DEVELOPER AUTHORIZATION**

I/We the undersigned do hereby submit this application for review and authorize the agent listed below to act on my/our behalf. (If there are more than two applicants, please attach a supplemental signature form, SD-103.)

Applicant's Corporation (if any):

(Print or Type) First Name:	Last Name:	
Signature:		Date:
Mailing Address:	Email:	
City:	State:	Zip Code:
Phone:	Fax:	

(Print or Type) First Name:	Last Name:	
Signature:		Date:
Mailing Address:	Email:	
City:	State:	Zip Code:
Phone:	Fax:	

**AGENT AUTHORIZATION**

I certify that the information, attachments, and plans submitted herewith are true and correct to the best of my knowledge and ability. I file this application and will act on behalf of the owner(s) and applicant(s) listed above.

Agent's Corporation (if any):

(Print or Type) First Name:	Last Name:	
Signature:		Date:
Mailing Address:	Email:	

Date Submitted \_\_\_\_\_

Planning & Zoning Case No. \_\_\_\_\_

City:	State:	Zip Code:
Phone:	Fax:	