



OFFICE OF THE MAYOR AND TOWN COUNCIL

TOWN OF CHESAPEAKE BEACH MISCELLANEOUS ZONING PERMIT APPLICATION

(Projects without electrical, plumbing, grading and sheds that are under 150 sq. ft.)

NAME: _____

MAILING ADDRESS:

PHONE # DAY: _____ EVENING: _____ CELL: _____

PROPERTY ADDRESS:

TYPE OF PROJECT: _____

LOCATION ON LOT: (Show dimensions of the lot and distance of project from property lines)

PROJECT DESCRIPTION: (Show size, type of materials, etc. Attach a sketch, if applicable)

BY: _____ DATE: _____

Owner/Agent Circle One

APPROVED: _____ DATE: _____ PERMIT# _____ \$ FEE _____

Planning and Zoning Administrator