



## TOWN OF CHESAPEAKE BEACH ZONING PERMIT APPLICATION

Permit #: _____
Issued: _____
Fee Paid: Yes / No

### PROPERTY INFORMATION

**SEE ATTACHED FEE SCHEDULE**

Property Street Address: \_\_\_\_\_  
 Property Tax ID#: \_\_\_\_\_  
 Specific Use of Property: \_\_\_\_\_

Water: Well      Municipal      Sewerage: Septic System      ☐ Municipal      ☐

Is the above address within the floodplain?      \_\_\_\_ Yes \_\_\_\_ No, In the Critical Area \_\_\_\_ Yes \_\_\_\_ No  
 (If in Critical Area, please complete page 2 of this application)

### Property Owner Information

Name: \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Day phone \_\_\_\_\_  
 E-mail \_\_\_\_\_

### Applicant Information

Name: \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Day phone \_\_\_\_\_  
 E-mail \_\_\_\_\_

Description of Proposed Work: Please submit four (4) hard copies of the proposed site plan and one (1) electronic copy with this application and a Grading Exemption Form for any project that involves grading.

### Signature of Owner or Authorized Agent

By signing below, I certify and agree as follows: (1) I am authorized to make this application; (2) all information provided is correct; (3) I will comply with all regulations of the Town of Chesapeake Beach which are applicable hereto; (4) I will perform only the work specifically described in this application and my submitted site plan; (5) I grant Town officials the right to enter onto the property for the purpose of evaluating my plan, inspecting the work permitted and posting notices if applicable; (6) I understand that if I choose to appeal, my appeal shall be in writing stating the grounds for appeal and shall be filed with the Board of Zoning Appeals within 30 calendar days of the date of issuance, decision, determination or order and that the right to appeal is waived if not timely filed.

Owner or Authorized Agent: (print) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR TOWN USE ONLY:

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Final Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Planning & Zoning Administrator

Is there a supplemental condition letter or notice to applicant:      \_\_\_\_ Yes \_\_\_\_ No

Is this a application for Use & Occupancy:      \_\_\_\_ Yes \_\_\_\_ No

Is there a requirement for Public Works to review prior to breaking ground:      \_\_\_\_ Yes \_\_\_\_ No

If marked yes, the Public Works Administrator must provide approval prior to breaking ground:

Final Approval Public Works Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

## Critical Area Lot Coverage Worksheet with Zoning Permit

Completion of this form is required for all projects within the Critical Area. If mitigation of any form is required, it shall be noted and/or shown on the site plan. For mitigation in the form of vegetative planting, the site plan or a separate landscape plan must show the location for the proposed planting and include a table that shows the species of the plants and number of each species. Additional information may be required. This form shall accompany a site plan and other relevant plan that shows the proposed work.

### Property Information

Property Address: \_\_\_\_\_  
Critical Area Designation: Circle one: IDA, LDA, RCA  
Within the 100-foot buffer? \_\_\_\_ Yes, \_\_\_\_ No

Total Site Area (square footage): \_\_\_\_\_  
Zoning District: \_\_\_\_\_

### Lot Coverage Calculations

EXISTING CONDITIONS (square footage)		PROPOSED CONDITIONS (square footage)	
1. Main Building	_____	Main Building	_____
2. Accessory Structures	_____	Accessory Structures	_____
3. Driveway/Parking	_____	Driveway/Parking	_____
4. Walkways	_____	Walkways	_____
5. Patios	_____	Patios	_____
6. Other	_____	Other	_____
Total Square footage	_____	Total Square footage	_____
Percentage of Total Site Area	_____	Percentage of Total Site Area	_____

### Will trees be removed in the Critical Area?

\_\_\_\_ Yes \_\_\_\_ No      If yes, please indicate location and number on the site plan.

### Certification

I certify these statements to be true and accurate and hereby grant the Town of Chesapeake Beach official permission to enter my property to review the plan and conduct inspections.

Owner / Authorized Agent: (print) \_\_\_\_\_  
Signature: \_\_\_\_\_

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### WHAT IS LOT COVERAGE? The following is counted toward lot coverage:

Area coverage by buildings and structures, accessory structures, (e.g. sheds, garages, swimming pools), parking areas, driveways, walkways, patios, or roads. Area covered by gravel, stone, shells, impermeable decking, pavers, or any man-made impervious material. Lot coverage does not include a fence or wall, less than one foot in width, a walkway in the Buffer or expanded buffer including a stairway that provides direct access to a pier, a wood mulch pathway, or a deck with gaps to allow water to pass freely.