



DIVISION OF  
PLAN REVIEW & PERMITTING

**BUILDING PERMIT APPLICATION**

***THIS IS NOT THE ACTUAL PERMIT. PERMIT APPLICATIONS MUST BE SUBMITTED IN PERSON FOR PROCESSING BY A TECHNICIAN. THIS FORM IS TO ASSIST IN THE APPLICATION PROCESS.***

<b>JOB LOCATION</b>	<b>PARCEL</b>	<b>MAP</b>	<b>ZONING</b>
<b>TYPE OF IMPROVEMENT</b> (DWELLING, DETACHED GARAGE, DECK, FINISH BASEMENT, REMODEL, ETC.)		<b>LOT SIZE – ACREAGE</b>	
<b>PROPERTY OWNER INFORMATION</b>			
<b>PROPERTY OWNER(S)</b>		<b>TELEPHONE</b>	
<b>PROPERTY OWNER(S) ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>APPLICANT INFORMATION</b>			
<b>APPLICANT/OWNER REPRESENTATIVE</b>		<b>TELEPHONE</b>	
<b>APPLICANT/OWNER REPRESENTATIVE ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>FIELD NOTIFICATION CONTACT</b>			
<b>NAME</b>		<b>PHONE NUMBER</b>	
<b>EMAIL</b>			
<b>CONTRACTOR INFORMATION</b>			
<b>CONTRACTOR'S NAME</b>		<b>TELEPHONE</b>	
<b>CONTRACTOR'S ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>
<b>CONTRACTOR'S MD STATE HOME BUILDER'S LICENSE NO.</b> HB-	<b>CONTRACTOR'S HOME IMPROVEMENT LICENSE NO.</b> MHIC-		
<b>VALUATION OF PROJECT: \$ _____ BUILDING PERMIT FEE \$ _____ EXCISE TAX FEE \$ _____</b>			
<b>RESIDENTIAL CONSTRUCTION</b>			
<b>TOTAL FINISHED SQUARE FOOTAGE</b> (ALL HABITABLE SPACE*) (*AREA FOR LIVING, EATING, SLEEPING, COOKING)		<b>TOTAL UNFINISHED SQUARE FOOTAGE</b> (BASEMENT, PORCH/DECK, GARAGE, ETC.)	
<b>DETAILED DESCRIPTION OF RESIDENTIAL CONSTRUCTION</b>			
<p><b>EXAMPLE:</b> TWO STORY DWELLING, FULL UNFINISHED BASEMENT WITH ROUGH-IN FULL BATH, TWO-CAR ATTACHED GARAGE ON SLAB WITH FINISHED AREA ABOVE, WOODBURNING FIREPLACE IN FAMILY ROOM. DIRECT VENT GAS FIREPLACE IN LIVING ROOM, REAR DECK WITHOUT ROOF, COVERED FRONT PORCH</p>			

<b>FOUNDATION SIZE:</b>	<b>GARAGE/SHED/CARPORT SIZE:</b>	<b># OF BEDROOMS:</b>	<b>PUBLIC:EXISTING/PROPOSED</b> ___ Water ___ Sewer	<b>TYPE OF HEAT:</b> ___ Elec ___ Oil ___ Natural Gas ___ Propane
<b>EXTERIOR FINISH:</b>	<b>PORCH/DECK SIZE:</b>	<b>BATHROOMS:</b> ___ Full ___ Half	<b>PRIVATE: EXISTING/PROPOSED:</b> ___ Well ___ Septic	<b>AIR CONDITIONING:</b> ___ Y ___ N
<b>ROOF TYPE:</b>  TRUSS RAFTER	<b>CRAWL SPACE:</b> ___ YES ___ NO <b>SLAB ON GRADE</b> ___ YES ___ NO <b>BASEMENT:</b> ___ YES ___ NO <b>IF YES – FINISHED OR UNFINISHED (CIRCLE ONE)</b> <b>IF UNFINISHED WILL THERE BE A ROUGH-IN BATH?</b> ___ YES ___ NO <b>EXIT FROM BASEMENT:</b> WALK-OUT BILCO WINDOW WELL		<b>AREA ABOVE GARAGE?</b> ___ YES ___ NO <b>IF YES – FINISHED OR UNFINISHED (CIRCLE ONE)</b> <b>SQUARE FOOTAGE:</b> _____ SQ. FT. <b>OCCUPIED AS:</b> OFFICE BEDROOM STORAGE <b>OTHER:</b> _____	
<b>COMMERCIAL CONSTRUCTION</b>				
<b>DETAILED DESCRIPTION OF COMMERCIAL CONSTRUCTION:</b>				
<b>EXAMPLE:</b> CONSTRUCTION OF A 40X60 POLE BUILDING FRAME CONSTRUCTION WITH PREENGINEERED TRUSSES WITH GRAVEL BASE FOR COMMERCIAL STORAGE OF SUPPLIES FOR PROPOSED NURSERY				
<b>EXISTING USE:</b>			<b>PROPOSED USE:</b>	
<b>FOUNDATION SIZE:</b>	<b>PUBLIC: EXISTING/PROPOSED</b> ___ Water ___ Sewer	<b>PRIVATE: EXISTING/PROPOSED</b> ___ Well ___ Septic	<b>TYPE OF HEAT:</b> ___ Electric ___ Gas ___ Oil	
<b>STORIES ABOVE GRADE:</b>	<b>STORIES BELOW GRADE:</b>	<b>TOTAL STORIES:</b>	<b>SPRINKLER PROVIDED:</b> ___ YES ___ NO ___ PARTIAL	
<b>TOTAL SQUARE FT.</b>				
_____ 1 <sup>st</sup> Floor    _____ 2 <sup>nd</sup> Floor    _____ 3 <sup>rd</sup> Floor    _____ 4 <sup>th</sup> Floor    _____ 5 <sup>th</sup> Floor    _____ 6 <sup>th</sup> Floor				
<b>Applicant's Signature</b>			<b>Date</b>	
_____			_____	

Revised 11/14/2018

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