



# Mayor & Council of Berlin

10 William Street, Berlin, Maryland 21811  
Phone 410-641-2770 Fax 410-641-2316  
www.berlinmd.gov



## BUILDING PERMIT APPLICATION

DATE: \_\_\_\_\_ MAP/PARCEL#: \_\_\_\_\_ ESTIMATED COST: \$ \_\_\_\_\_ PERMIT # \_\_\_\_\_

LOCATION ADDRESS: \_\_\_\_\_ ZONING: \_\_\_\_\_ TYPE OF CONSTRUCTION: \_\_\_\_\_

BRIEF DESCRIPTION OF WORK: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

SIGNATURE OF OWNER/APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

OWNER/APPLICANT PHONE NUMBER: \_\_\_\_\_ ALTERNATE PHONE NUMBER: \_\_\_\_\_

**Construction plan(s) and site plan(s) must be submitted as part of this application. Any deviation from approved plans must be authorized by the Town. It is the responsibility of the owner/applicant to schedule all required inspections.**

**The cost of the actual Water and Sewer connection is billed separately to include time and materials.**

**This permit authorizes the contractor to construct only within the building envelope as indicated on the submitted site plan. This permit DOES NOT provide authorization to construct or install utilities within Town rights-of-way or easements.**

### FOR OFFICE USE ONLY

DATE APPLICATION RECEIVED: \_\_\_\_\_ DATE APPLICATION ISSUED: \_\_\_\_\_ DATE PAID: \_\_\_\_\_

#### FEES:

	AMOUNT
PERMIT REVIEW	\$ _____
PERMIT	\$ _____
IMPACT	\$ _____
SEWER SPECIAL CONNECTION	\$ _____
WATER SPECIAL CONNECTION	\$ _____
OTHER	\$ _____
TOTAL	\$ _____

#### APPROVALS REQUIRED:

	REVIEWED BY	DATE
WATER DEPARTMENT	_____	_____
WASTEWATER DEPARTMENT	_____	_____
STORMWATER MANAGEMENT	_____	_____
PUBLIC WORKS DEPARTMENT	_____	_____
ELECTRIC DEPARTMENT	_____	_____
PLANNING AND ZONING	_____	_____
PLAN REVIEWER/INSPECTOR	_____	_____