

File No. \_\_\_\_\_ Amount of Fee Paid: \$ \_\_\_\_\_ Date: \_\_\_\_\_  
Check# / Cash \_\_\_\_\_ Received by: \_\_\_\_\_

Amount of Fee Paid for Sq Footage: \$ \_\_\_\_\_ Check# / Cash \_\_\_\_\_

**APPLICATION FOR ZONING CERTIFICATE**  
**CHESAPEAKE CITY PLANNING & ZONING COMMISSION**

*The application must be filed ten [10] days before to be placed on that meetings' agenda.  
The Planning Commission regularly meets on the first Wednesday of the month.*

Property Owner or Agent (printed) \_\_\_\_\_

NOTE: Agent shall provide a letter from the owner authorizing that they may act on his behalf.

Address: Street \_\_\_\_\_ Town \_\_\_\_\_ State: \_\_\_\_\_ ZIP \_\_\_\_\_

Phone: [D] \_\_\_\_\_ [C] \_\_\_\_\_ FAX \_\_\_\_\_ email \_\_\_\_\_

Property Address \_\_\_\_\_ City: \_\_\_\_\_ State : \_\_\_\_\_ ZIP \_\_\_\_\_

Developer or Contractor: \_\_\_\_\_ Co. Rep. \_\_\_\_\_

Address: Street \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_ ZIP \_\_\_\_\_

Phone: \_\_\_\_\_ [C] \_\_\_\_\_ FAX \_\_\_\_\_ email \_\_\_\_\_

Tax Map: \_\_\_\_\_ Grid: \_\_\_\_\_ Parcel: \_\_\_\_\_ Lot: \_\_\_\_\_ Zoned: \_\_\_\_\_

Contractor MD License # \_\_\_\_\_ Expires \_\_\_\_\_ Insurance \_\_\_\_\_

**\* ATTACH A COPY OF CONTRACTOR'S LICENSE AND WC INSURANCE**

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**Type of Permit being applied for**  
[Circle one or more for all work to be conducted]

\*Addition \*Building Change of Use Demolition Fence/Wall Grading Maintenance \*Renovation  
Sign \*Porch \*Deck \* Shed

Sub-division (Appendix A attached) Zoning Change (Explain reason for change) From \_\_\_\_\_ To \_\_\_\_\_

\*Square Footage: \_\_\_\_\_ Calculated at .15 per square foot for Residential and .25 per square foot for Commercial Fee to be collected at time of permit issuance.

Critical Area: NO: \_\_\_\_\_ Yes: \_\_\_\_\_ Designation: \_\_\_\_\_  
10% \_\_\_\_\_

Flood Plain: NO: \_\_\_\_\_ Yes: \_\_\_\_\_ Zone \_\_\_\_\_

Trees to be Removed: NO: \_\_\_\_\_ Yes: \_\_\_\_\_ Number to be removed: \_\_\_\_\_

Scope of Work: \_\_\_\_\_

\_\_\_\_\_

