

Howard County Department of Planning and Zoning
APPLICATION FOR PETITIONING THE HOWARD COUNTY PLANNING BOARD
FOR RENAMING OF A STREET OR HIGHWAY IN HOWARD COUNTY, MARYLAND

Application is hereby made for approval by the Howard County Planning Board for the renaming of a street or highway in Howard County, Maryland, in accordance with Section 16.400 of the Howard County Code. The Planning Board is authorized to name or rename any public street or highway at the request of one or more residents or property owners of such street or highway provided that ninety percent (90%) of the residents or owners living on or owning property on the street or highway agree, **in writing**, with the proposed street name change. **Without such written agreement, no street or highway name shall be changed by the Planning Board.**

Existing Street Name: _____

Proposed Street Names: (provide at least 3 names in order of preference to obtain approval from the US Postal Service, the Howard County Fire Department and the 9-1-1 center)
 [Please Print]

- | | |
|----------|----------|
| 1) _____ | 5) _____ |
| 2) _____ | 6) _____ |
| 3) _____ | 7) _____ |
| 4) _____ | 8) _____ |

Location of Street: (general description in relation to nearest existing public road intersection)

Tax Map _____ *Election District* _____

Reference to Applicable Plans: _____
 [Subdivision/Project Name and File No]

Statement of Support for above request: (state specifically the justifications and need for the street renaming)

Applicant/Community Representative

 (Name)

 (Address)

 (City, State, Zip)

 (Phone) _____ (Fax)

 (email)

Engineer/Surveyor or Legal Counsel (if any)

 (Name)

 (Address)

 (City, State, Zip)

 (Phone) _____ (Fax)

 (email)

APPLICATION REQUIREMENTS

Submission of an application for renaming of a street or highway will require completion of all the following items at the time of the initial submittal to ensure acceptance of the application for processing. Applications found to be incomplete will not be processed.

1. Number of Copies Required to Initiate Processing
Three (3) copies of detailed plot plan/subdivision plan for the entire length of street or highway to be renamed in accordance with the attached plot plan checklist.

2. Petition Requirement
The street renaming petition must contain the signature approval of ninety percent (90%) of the property owners living on or owning property on the affected street or highway before the application can be submitted to the County for processing.

3. Fees
The street renaming application fee shall be in accordance with the adopted fee schedule. All checks shall be made payable to the Director of Finance. Applications will not be accepted for processing until all the fees have been paid.

4. Legal Notice of Planning Board Public Hearing
Notice of the Planning Board public hearing shall be published in accordance with Section 16.400 of the Howard County Code. The advertising notice will be prepared by the Department of Planning and Zoning. The responsibility for having it published in 2 local newspapers at least 30 days prior to the hearing and the cost of advertising is to be borne by the Petitioner.

5. Certification of Applicant
The undersigned hereby certifies that the information supplied herewith is correct and complete and further confirms that the application requirements indicated above are understood.

(Signature of Applicant/Community Representative)

(Date)

For Department of Planning and Zoning Use Only

Existing Street Name: _____

Application Requirements

Indicate Yes, No or N/A

- ___ DPZ application and checklist are complete
- ___ Required number of plans are provided (3 copies of plans are required).....
- ___ Required signature approval from 90% of the residents is provided.....

Fee Computation

Fee

Street renaming change application fee**\$200.00**
 Certified letter fee (___ x \$15 per affected property owner)

TOTAL

Certification

Cash Receipt No. _____ Amount _____
SAP Acct 1000000000-3000-3000000000-PWPW000000000000-432530
 Check issued by _____
 ___ Street renaming application is accepted for processing
 ___ Application is rejected
 Reason _____

(DPZ Staff Signature)

(Date)

Howard County Department of Planning and Zoning
PLOT PLAN CHECKLIST FOR STREET RENAMING APPLICATION

The following checklist is to serve as a guide in preparing the street renaming plot plan for submittal. The plot plan accompanying the application shall be accurate and complete for the entire length of the street or highway to be renamed. The application form must be accompanied by three (3) copies of a detailed plot plan/subdivision plan for all street renaming requests and showing the following information:

Legend:	<u>✓</u>	Information Provided	<u>X</u>	Information Not Provided, Justification Attached
	<u>NA</u>	Not Applicable		

- _____ 1. Indicate the subject street or highway by heavy line showing the outline boundary of the street in its entirety with all the lots or parcels of land along the street shown as dashed lines.
- _____ 2. Identify all lots or parcels of land adjacent to the subject street by address and lot or parcel number designation.
- _____ 3. North arrow.
- _____ 4. Scale of plan shall not be smaller than 1"=200' with a larger scale used for higher density land uses. In all cases the plot plan will be neat, clear and legible.
- _____ 5. Subdivision name, section and recording references, if applicable.
- _____ 6. Any existing or proposed building(s), structures, points of access, topography, natural features, and other objects and/or uses adjacent to the subject street which may be relevant to the application.
- _____ 7. Election District in which the subject street is located.
- _____ 8. Tax Map number on which the subject street is located.
- _____ 9. Name and local community in which the subject street is located.
- _____ 10. Name and mailing address of applicant/petitioner or community representative.
- _____ 11. Name and mailing address of attorney, surveyor or engineer, if any.

For additional information, call 410-313-2350, or address inquiries to:

Kent Sheubrooks, Chief
 Department of Planning and Zoning
 Division of Land Development
 3430 Court House Drive
 Ellicott City, MD 21043

PETITION FOR RENAMING OF A STREET OR HIGHWAY IN HOWARD COUNTY, MARYLAND

I/We the undersigned fee simple owner(s) and residents of the subject street, hereby approve of the renaming of _____ to _____ in accordance with Section 16.400 of the Howard County Code. This petition must contain the signature approval of ninety percent (90%) of the property owners living on or owning property on the affected street or highway before the application will be accepted for processing by the Department of Planning and Zoning of Howard County.

Number of affected property owners _____
Number of affected property owners in agreement _____

PLEASE PRINT (Requirement is 90%)

1. Name _____
Address _____

(phone) _____ (email) _____

(signature) _____ (date) _____

2. Name _____
Address _____

(phone) _____ (email) _____

(signature) _____ (date) _____

3. Name _____
Address _____

(phone) _____ (email) _____

(signature) _____ (date) _____

4. Name _____
Address _____

(phone) _____ (email) _____

(signature) _____ (date) _____

5. Name _____
Address _____

(phone) _____ (email) _____

(signature) _____ (date) _____

6. Name _____
Address _____

(phone) _____ (email) _____

(signature) _____ (date) _____

7.	Name Address	_____	_____
		_____	_____
		(phone)	(email)
		_____	_____
		(signature)	(date)
8.	Name Address	_____	_____
		_____	_____
		(phone)	(email)
		_____	_____
		(signature)	(date)
9.	Name Address	_____	_____
		_____	_____
		(phone)	(email)
		_____	_____
		(signature)	(date)
10.	Name Address	_____	_____
		_____	_____
		(phone)	(email)
		_____	_____
		(signature)	(date)
11.	Name Address	_____	_____
		_____	_____
		(phone)	(email)
		_____	_____
		(signature)	(date)
12.	Name Address	_____	_____
		_____	_____
		(phone)	(email)
		_____	_____
		(signature)	(date)
13.	Name Address	_____	_____
		_____	_____
		(phone)	(email)
		_____	_____
		(signature)	(date)
14.	Name Address	_____	_____
		_____	_____
		(phone)	(email)
		_____	_____
		(signature)	(date)

Note: Please attach additional completed sheets if necessary.