

Howard County Department of Planning and Zoning
Division of Land Development

**APPLICATION FOR MINOR RESIDENTIAL STRUCTURES
AND ADDITIONS IN THE NEW TOWN, MXD, PSC AND PGCC
ZONING DISTRICTS FOR CONCEPT SITE DEVELOPMENT PLAN
OR AMENDED SITE DEVELOPMENT PLAN APPROVAL**

Date Submitted/Accepted _____ DPZ File Number _____

Application is hereby made for approval by the Howard County Planning Board of the accompanying Concept Site Development Plan or Amended Site Development Plan in accordance with adopted Planning Board procedures for minor residential structures or additions per Sections 125.0, 126.0, 127.0 and 127.1 of the Howard County Zoning Regulations.

Original Site Development Plan File Number: (if applicable) _____

Original Approval Date: _____

I. Site Description

Location of Property: _____
(Street address)

(Village or Subdivision Name)

(Section)

(Area)

(Lot/Parcel No.)

(Tax Map No.)

(Grid/Block No.)

(Election District)

(Total Area of Property)

(Zoning)

Land Use Classification: _____

Type or Use of Structure: _____

Required Setback: Front _____ Side _____ Rear _____

Applicable Final Development Plan No. FDP-_____ Proposed Lot Coverage: _____ Sq. Ft.
and _____ %

II. Request for Bulk Requirement Infringement

Provide a brief description of the bulk requirement infringements submitted for Planning Board approval:

III. **Justification** (if additional space is needed for justification, please attach to this application)

Statement of Support for the above request:

Justification must be specific to the subject property. The justification provided by the applicant should include all factors which rationalize or substantiate the request in accordance with the following criteria:

- a. Summarize any extraordinary hardships or practical difficulties which may result from strict compliance with the final development plan (FDP), MXD, PSC or PGCC development criteria requirements.
- b. Substantiate that approval of the request will not be detrimental to the public interests and will not alter the essential character of the neighborhood or district in which the lot is located.
- c. Confirm that approval of the request will not nullify the intent of the FDP, MXD, PSC or PGCC development criteria requirements and the request is the minimum infringement necessary to afford relief.

IV. **Plan Exhibit Checklist**

The application must be accompanied by fourteen (14) copies of a detailed plot plan of the property along with fourteen (14) copies of the application form. The detailed plot plan should indicate the following information relevant to the request:

Legend: <input checked="" type="checkbox"/> Information Provided	<input checked="" type="checkbox"/> Information Not Provided, Justification Attached
<input type="checkbox"/> <u>NA</u> Not Applicable	

- 1. Property line bearings and distances for the subject property with the area size.
- 2. North arrow.
- 3. Existing zoning of subject property and adjoining properties.
- 4. Scale of plan.
- 5. Any existing or proposed building(s), structures, driveways, easements, points of access, topography, natural features, and other objects and/or uses on subject property which may be relevant to the application.
- 6. Same as (5) above, if any, of adjoining properties which may be required in the proper examination of the application.
- 7. Delineation of all existing public roads.
- 8. Approximate delineation of floodplain, streams or wetland areas, if applicable.
- 9. Dimension the location of all existing and proposed structures, decks, pools, additions, etc. located on site to all property lines and the public road right-of-way lines.
- 10. Provide a detail/elevation of the existing and proposed structures and clearly dimension the heights of all buildings or additions from the average adjoining ground elevation.
- 11. Provide the square foot area for all existing structures, decks, porches, sheds, etc. and any proposed additions for lot coverage calculations.
- 12. Reference the approved site development plan, if applicable.
- 13. Any additional information to allow proper evaluation, i.e. the location of adjacent dwellings, environmentally sensitive areas, etc.

V. **Fees**

The fees required to be paid with submission of this application and posters shall be in accordance with the adopted Department of Planning and Zoning (DPZ) fee schedule. Checks shall be made payable to the *Director of Finance*. **The application will not be accepted for processing until the fee has been paid.**

VI. **Documents Required to Initiate Processing**

- a. Completed application form. [14 copies]
- b. Application fee.
- c. Fourteen (14) copies of a detailed plot plan of existing and proposed structures, with reference when applicable to the approved Site Development Plan.
- d. Village or Architectural Review Committee approval letter is recommended, but not required.
- e. **Please be advised that all plan application submissions are ACCEPTED BY APPOINTMENT ONLY. All plan submission appointments must be scheduled with the Division of Land Development at (410) 313-2350.**

VII. **Posting Requirements**

The subject property shall be posted with the time and date of the Planning Board public meeting for a period of time not less than fifteen (15) days prior to the meeting. Posters will be prepared by the DPZ and are to be erected and maintained by the applicant. The number of posters required shall be determined by the DPZ.

VIII. **Owners Certification**

The undersigned hereby certifies the information supplied herewith is correct and complete, confirms that the regulations and policies as referenced to in the attached are understood and authorizes periodic on-site inspections by the Howard County Subdivision Review Committee agencies. *** If the applicant is the owner's agent, written documentation from the owner granting that authority is required.**

(Signature of Property Owner) (Fee Simple Owner only) *

(Print Name)

(Date)

Owner's authorization attached

OWNER (Fee Simple Only):

SURVEYOR/OTHER CONSULTANT:

(Name)

(Name)

(Address)

(Address)

(City, State, Zip Code)

(City, State, Zip Code)

(Telephone)

(Fax)

(Telephone)

(Fax)

(E-Mail) _____

(E-Mail) _____

Contact Person: _____

Contact Person: _____

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(For DPZ Use Only)**

Project Name _____	DPZ File Number _____
DPZ Plan Reviewer _____	Submission Date _____
Plan Consultant Representative _____	Time _____

I. Application Requirements Indicate Yes, No or N/A

Application is complete..... _____

Required number of plans and applications are provided _____

a. ___ Plans (14)

b. ___ Applications and any support materials (14)

II. Fee Computation

Variance Hearing Fee \$175.00

Poster fee: (___ \$25 per poster)

TOTAL _____

III. Certification

Cash Receipt No. _____
SAP Acct 1000000000-3000-3000000000-PWPW000000000000-432530

Check issued by _____

___ Application is accepted for processing.

___ Application is rejected.

Reason: _____

___ Resubmission accepted for processing. Date _____ Staff Initials _____

___ SRC meeting date/comments due date.

Comments/Notes _____
