



Building Permit #: \_\_\_\_\_  
 Date Issued: \_\_\_\_\_

## Building Permit Application

Town of La Plata  
 305 Queen Anne Street • P.O. Box 2268  
 La Plata, MD 20646  
 Main: 301-934-8421  
 Planning: 301-934-8811  
 Fax: 301-934-3965  
[www.townoflaplata.org](http://www.townoflaplata.org)

### Property Information

**Property Address:** \_\_\_\_\_

### Contact Information

Owner	Architect/Engineer	Applicant
Name: _____	Name: _____	Name: _____
Company: _____	Company: _____	Company: _____
Address: _____	Address: _____	Address: _____
City State Zip Code	City State Zip Code	City State Zip Code
Phone: _____	Phone: _____	Phone: _____
Email: _____	Email: _____	Email: _____

### Permit Information

Project Type:	Residential	Commercial
<b>Zoning District:</b> CH <input type="checkbox"/> R-21 <input type="checkbox"/> TDX <input type="checkbox"/> CBT <input type="checkbox"/> R-10 <input type="checkbox"/> PD-AG <input type="checkbox"/> CB <input type="checkbox"/> R-8 <input type="checkbox"/> PD-ST <input type="checkbox"/> IH <input type="checkbox"/> R-5 <input type="checkbox"/> PD-HR <input type="checkbox"/> IL <input type="checkbox"/> R-3 <input type="checkbox"/> PRID <input type="checkbox"/> NCX <input type="checkbox"/>	<b>Description of Work:</b>	
<b>Subdivision:</b>	<b>Total SQ. FT.:</b>	
<b>Lot:</b>	<b>Leasable SQ. FT.:</b>	
<b>Block/Grid:</b>	<b>Setback(s) Front:</b>	<b>Side (L):</b>
<b>Parcel:</b>	<b>Side (R):</b>	<b>Rear:</b>
<b>Real Estate Tax Account #:</b>	<b>Principle Structure</b>	<b>Accessory Structure</b>
<b>Est. Construction Cost:</b>	Construction(New)	Detached Garage
<b>Proposed Use:</b>	Addition/Alteration	Shed
	Tenant Fit-Out	Deck
	Demolition	Pool
	Roof	Solar Panels
	Other:	
		<b>Temporary Structure</b>
		Tent
		Construction Trailer
		<b>Utilities</b>
		Water
		Sewer
		Electric
		Gas
	I have carefully examined and read the above application and know the same is true and correct and that in doing this work shall comply with all applicable codes and ordinances for the Town of La Plata, Charles County and the State of Maryland, whether herein specified or not. I also hereby certify that, I am the Owner of the subject property, or I have received approval to act on behalf of the property owner.	
	<b>Signature:</b>	<b>Date:</b>

### For Office Use Only

Payment Information		Approvals	Approved	Denied	Date
Permit Fee	\$	Planning			
State Fee	\$				
Inspection Fees	\$	Inspections			
Total	\$				
Check # or Cash		Treasurer: _____		Date: _____	

#### Conditions and Required Inspections:

- Preliminary     Anchor     Footing     Foundation     Wall     Slab     Load Path  
 Fire Rated Assembly     Framing     Insulation     Driveway     Final     Framing/Final Combo