

THE TOWN OF
HIGHLAND BEACH, MARYLAND- est. 1893

Fee Received
Application # _____
Date _____

APPLICATION FOR ZONING APPROVAL

Complete all applicable spaces. Submit the following with \$25 fee payable to:
the Town of Highland Beach. Attach site plan with building elevations. Both must be drawn to scale.

Job location Lot # _____ Block # _____ Street Address _____

Lot size: Width _____ X _____ Depth _____ = Total lot area _____

OWNER INFORMATION

NAME _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE(S) _____

TYPE OF PROPOSED WORK: NEW ADDITION ALTERATION

DESCRIPTION OF PROPOSED WORK _____

Total dimensions of proposed completed work. *Include carports, garages, decks, porches, etc.*

Building Footprint: Width _____ X Length _____ = _____ Sq.ft.

HEIGHT/ Number of stories _____

SETBACKS: FRONT _____ RIGHT SIDE _____ LEFT SIDE _____ REAR _____

CORNER LOT YES NO

The applicant(s) certify and agree as follows: (1) that he/she is authorized to make this application. (2) that all information is correct. (3) that he or she will comply with all regulations of Anne Arundel County and Highland Beach that are applicable thereto; (4) that he/she will perform no work on this property not specifically described in this application; (5) that he/she grants County and Highland Beach officials the right to access the property for the purposes of inspecting the work permitted and posting notices in conformance with R2 and Anne Arundel County and Highland Beach Codes. I UNDERSTAND THAT UPON APPROVAL OF THIS ZONING APPLICATION, I MUST OBTAIN ALL REQUIRED ANNE ARUNDEL COUNTY BUILDING PERMIT(S)

SIGNED _____
Owner, Agent

PRINT NAME _____

HIGHLAND BEACH DOES NOT ENFORCE RESTRICTIVE COVENANTS
NOTE: ZONING APPLICATIONS EXPIRE ONE YEAR FROM DATE OF APPROVAL

APPROVAL DATE _____ EXPIRATION DATE _____