

Application for Historic Use Permit – Town of Brookeville, MD

Note: All of the information below must be included before the review of the application will begin.

Application is hereby made for a Conditional Use under the Zoning Ordinance for the Town of Brookeville as follows:

Applicant Name(s): _____

Applicant's Street Address. _____

City _____ State _____ Zip _____

Applicant's present legal interest in above property: (check one)

Owner (including joint ownership) Lessee Tenant other than lessee

Contract Purchaser Other (Describe below)

Owner of property Name: _____

Owner's Street Address. _____

City _____ State _____ Zip _____

Historic Use Permit Property Street address: _____

Proposed Use _____

Zoning Ordinance classification for proposed use:

<p>Professional and business office</p> <p><input type="checkbox"/> Doctors office</p> <p><input type="checkbox"/> Lawyers Office</p> <p><input type="checkbox"/> Accountants Office</p> <p><input type="checkbox"/> Insurance Agents Office</p> <p><input type="checkbox"/> Investment Advisors Office</p> <p><input type="checkbox"/> Plumbing Companies Office</p> <p><input type="checkbox"/> Real Estate Companies Office</p>	<p>Restricted Historic Retail</p> <p><input type="checkbox"/> Antique Store</p> <p><input type="checkbox"/> Art or Art Supply Store</p> <p><input type="checkbox"/> Book Store</p> <p><input type="checkbox"/> Craft or Craft Supply Store</p> <p><input type="checkbox"/> Picture Framing Store</p> <p><input type="checkbox"/> Gift Store</p>
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Intended number of employees/workers: _____

Number of daily visitors/clients/students: _____

Hours of operation: _____

Will the proposed use utilize equipment or any process which may create noise, vibration, glare, fumes, odors or electrical or electronic interference detectable beyond the walls of the structure?

Description of any proposed signage (which may not be illuminated and up to an aggregate total of twenty (20) square feet

List of the owners name & address of all properties adjoining and confronting the subject property listed in the records of the Maryland State Department of Assessments and Taxation.

Attachments: In addition to paper copies, applicants must submit, with their applications, electronic copies of all the materials required below.

1. Please attach a parking plan that demonstrates how the property will accommodate the proposed use of the property.

2. Proof of ownership or authorization to proceed (If the applicant is not the owner of the property involved, the lease, rental agreement, contract to purchase, or written authorization to proceed on government land, by which applicant's legal right to prosecute the Application is established)

3. If exterior changes are proposed, plans of the proposed development showing:
 - a. footprints, ground-floor layout, and heights of all buildings and structures;
 - b. layout of all sidewalks, trails, paths, roadways, parking, loading, and bicycle storage areas;
 - c. rough grading;
 - d. landscaping and lighting;

I have read the instructions below of this form, and am filing herewith all of the required accompanying information. I hereby affirm that all of the statements and information contained in or filed with this Application are true and correct.

_____ Date: _____
Signature of Applicant (s)

Printed Name (s)

_____ _____
Cell Phone Number Email Address