

TOWN OF ELKTON
APPLICATION FOR BUILDING PERMITS

Date: _____ Home Ph.: _____ Work Ph.: _____ Cell Ph.: _____

Property Owner's Name: _____

Property Owner's Address: _____

Name of Applicant: _____

Address of Applicant: _____

Company/Person doing work: _____ License #: _____

Address: _____

Location of Work: _____

Type of Work to be Done: _____ Estimated Cost: _____

Addition: _____ Size: _____ Sketch: _____ Height: _____

Deck: _____ Size: _____ Sketch: _____ Height: _____

Fence: _____ Total Linear Footage: _____ Type: _____ Height: _____

Garage: _____ Size: _____ Sketch: _____ Height: _____

Gas: _____ Fixture count: _____ Description of work: _____

HVAC: _____ Estimated cost: _____ Description of work: _____

New Dwelling: _____ Size: _____ Sketch: _____

Pool: _____ Size: _____ Sketch: _____ Height: _____

Plumbing: _____ Fixture count: _____ Description of work: _____

Renovation: _____ Size: _____ Sketch: _____

Shed: _____ Size: _____ Sketch: _____ Height: _____

Sign: _____ Size: _____ Sketch: _____ Wording: _____

***Historic Area Work: Demolition: _____ Renovation: _____ Addition: _____ Cosmetic: _____

(For Office Use Only)

Map #: _____ Parcel #: _____ Lot: _____ Zone: _____

Land Record #: _____ Account #: _____