

TOWN OF ELKTON
APPLICATION FOR BUILDING PERMITS
100 Railroad Avenue, Elkton, Md. 21921
Phone 410-398-4999 Fax 410-398-0128
building.zoning@elkton.org

Date: _____ Phone: _____

Applicant: _____ Email: _____

Applicant's Address: _____

Property Owner: _____ Phone: _____

Property Owner's Address: _____

Are you the Property Owner? _____ (If no, an affidavit may be required)

Company Doing Work: _____ Phone: _____

Address: _____ License #: _____

Location of Work: _____

Is the address located in the Historic District? _____

Type of Work to be Done: _____ Est. Cost: \$ _____
(Minus Mechanical, Plumbing & Electrical costs)

Check ALL that apply:

Addition: _____ Size: _____ Height: _____

Deck: _____ Size: _____ Height: _____

Demolition: _____

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

Garage: _____ Size: _____ Height: _____

Gas: _____ Please circle: **NEW OR REPLACEMENT** Fixture Count: _____

HVAC: _____ Please circle: **NEW OR REPLACEMENT** Heating: _____ Cooling: _____ Est. Cost _____

Pool: _____ Height: _____ Type: _____

Plumbing: _____ Description of Work: _____ Fixture Count: _____

Renovation: _____ Description of Work: _____ Est. Cost: \$ _____

Shed: _____ Size: _____ Height: _____ Store bought or stick built? _____

Sign: _____ Type: _____ Square Footage: _____

Other: _____

ALL ELECTRICAL APPLICATIONS AND INSPECTIONS ARE DONE THROUGH:

BAY AREA INSPECTION AGENCY **OR** **AMERICAN INSPECTION AGENCY**
Ph: 410-620-6000/www.bainspection.com **Ph: 302-292-2000/www.americaninspectionagency.com**

(For office use only)

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

Land Record # _____ Account # _____

PAYMENT DUE AT TIME OF PERMIT ISSUANCE