



# FREDERICK

PLANNING

For Official Use Only	
PC Case Number:	
Hearing Date:	
DRC Date:	
Amount Paid:	\$
Date Paid:	

## SITE PLAN APPLICATION

Please legibly print or type the following site plan application in its entirety. Incomplete applications will not be accepted. Submit the application, along with fees, and **twenty-eight (28)** copies of the site plan on or before **3:00** PM on the application deadline date. All applications will be considered for Planning Commission review unless the project is eligible for staff review subject to LMC Section 309 (a.3). Requests for staff review should be made and approved three days before the submittal deadline. One digital site plan must be submitted to [sparker@cityoffrederickmd.gov](mailto:sparker@cityoffrederickmd.gov)

<b>APPLICANT INFORMATION - OWNER'S AFFIDAVIT MUST BE SUBMITTED WITH APPLICATION.</b>	
Contact Name:	
Firm/Company:	
Address:	
Phone:	email:
<b>OWNER INFORMATION</b>	
Name:	
Firm/Company:	
Address:	
Phone:	email:
<b>DEVELOPER INFORMATION</b>	
Name:	
Firm/Company:	
Address:	
Phone:	email:

All correspondence will be sent to the applicant. If the owner also wishes to receive a copy, please check box:

<b>PROJECT INFORMATION (See Table 1102-1 of the LMC)</b>	
Project Name:	
Project Location:	
Site Size (acres):	Project Size (acres or sq. ft.):
Existing Zoning:	Existing Land Use:
Proposed # of Units: (Residential/Mixed Use)	Proposed Square Footage: (Office/Commercial/Industrial/Institutional)
<b>Project Description:</b>	

<b>FOREST CONSERVATION INFORMATION</b>					
Please answer the following yes or no questions (provide additional information where requested):					
1. This project is exempt from Forest Conservation requirements per Section 721 (7) of the Forest Conservation Ordinance? Please indicate if an exemption request has been submitted for the property, and approval date if already approved.)					
2. This project is not exempt from Forest Conservation requirements and the appropriate Forest Conservation Plan has been submitted. Please indicate FC - Case Number & approval date if already approved.)					
<b>FLOODPLAIN &amp; WETLANDS INFORMATION</b>					
Please answer the following yes or no questions (provide additional information where requested):					
1. Does the lot contain any non-tidal wetlands? : <input type="checkbox"/> Yes <input type="checkbox"/> No ▪ Note source of the information.					
2. If yes, will there be any wetland disturbance?					
3. Does the lot contain any 100-year floodplain areas? <input type="checkbox"/> Yes <input type="checkbox"/> No ▪ Note source of the information.					
4. If yes, will there be any floodplain disturbance?					
5. Has a floodplain permit application been submitted to MDE? Note Application No.					
<b>EASEMENTS AND MODIFICATIONS</b>					
Please answer the following yes or no questions (provide additional information where requested):					
1. Will any easements be required on the property? ▪ Please specify type of easement(s)					
2. If yes, are the legal agreements being submitted with this application? (Include submittal date)					
3. Will there be any need for modification to the City LMC Section 309 (m)? (Please attach an explanation of the modification(s) requested and justification.)					
<b>FEES</b>					
Type of Review	Base Fee	Fee per unit & sq. ft.	Number of Units or acres	Total Unit or Acre Fee	Total Fee
Preliminary Site Plan (Concept)*	\$1,350.00				
PC Review - Residential F.S. Plan*	\$2,000.00	+\$10.00/unit			
PC Review - Non-Residential*	\$2,000.00	+\$30.00/1,000 sf of building			
Staff Review - Per Section 309 (a3)*	\$1,600.00				
FS Plan Amend. - Staff Reapproval	50% of curr. fee				
FS Plan Amend. - PC Reapproval	50% of curr. fee				
Modification Requests	\$150.00				
Extension Requests	\$150.00				
Traffic Study					
Minor Study	\$750.00				
Major Study	\$1,500.00				
<b>*Frederick County Health Dept. \$75.00 made payable to Frederick County Health Dept.</b>					

**\*\*The digital site plan must be submitted in the form of a tiff, pdf, or jpeg. CADD files will not be accepted.**

I hereby attest that the information provided on and attached to this application is complete and correct.

\_\_\_\_\_  
Signature of Applicant/Agent

\_\_\_\_\_  
Date