



COMMERCIAL ACCESSORY

Making Application for a Commercial Accessory Permit

COMMERCIAL ACCESSORIES include, but are not limited to:

- Signs (Permanent or Temporary) (*Link to Attach G*)
- Fences
- Sheds
- Construction or Temporary Trailers

PERMIT APPLICATION

All projects must be submitted with a Building Permit application that must be completed by either the owner or their authorized agent. If the permit applicant is not the owner of the property where the work is to be done, the applicant must provide a notarized affidavit allowing them to act as the authorized agent of the owner. At the time of plan submittal, all permit application information must be accurately completed.

PLANS SUBMITTAL

Five (5) identical sets of construction documents (plans and specifications) and six (6) site plans approved by the City Engineer and Planning Commission, respectively, are required for permit submittal. State licensing laws require that all construction documents are signed, sealed, and dated by an architect or engineer licensed in the State of Maryland before they are submitted for review.

NOTE: For work at a cost of over \$5,000, State licensing laws require that certain construction documents be signed, sealed, and dated by an architect or engineer licensed in the State of Maryland before they are submitted for review. http://mlis.state.md.us/cgi-win/web_statutes.exe?gbo&3-103

PLAN REVIEW AND PERMIT PROCESS

On average, the review process is less than 4 weeks. For clarification or additional information for a specific project, call (301) 600-3829 to speak with the Permits Coordinator or visit the Building Department 140 W. Patrick Street.

PERMIT FEES

Shed	\$128
Fence	\$128
Sign/Permanent	\$128
Sign/Temporary	\$64
Temporary Trailer	\$128
Other Miscellaneous	\$128



The City of Frederick, Maryland
Building Department
 140 W. Patrick St., Frederick MD 21701 / 301-600-3812 / FAX 301-600-3826
 www.cityoffrederick.com
BUILDING / ZONING PERMIT APPLICATION

COMMERCIAL ACCESSORY

FOR OFFICE USE ONLY

App. No.: _____

App. Type Code: _____

Tax ID: 02- _____

App. Date: _____

SECTION 1 – Complete in its entirety. Application will NOT be accepted unless all spaces are FULLY completed.

Location of Work	Address: _____	Unit #:	Bldg #:
	Subdivision: _____	Lot #:	Zoning:
	Proposed Tenant Name: _____	Previous Tenant Name: _____	

Applicant	Contact Person: _____		
	Applicant/Contractor Name: _____		
	Address: _____		
	Phone No: _____	FAX: _____	E-Mail: _____

IMPROVEMENT COST: \$ _____ (Do NOT include plumbing, electric, land)

Yes No **Public Right-of-Way** Will any work associated with this permit be performed within the City's Right-of-Way?
 Is Public Works Agreement & Surety in Place? No Yes **If YES**, provide Grading/Public Improvement Permit # _____

Description of Work	Brief description of work to be performed:		

	Sq. Ft. of Building: _____	Sq. Ft. of Work: _____	Is Building Sprinklered? <input type="checkbox"/> Yes <input type="checkbox"/> No
	IBC Occupancy Type: _____		IBC Construction Type: _____

Signs	Linear Ft. of Building Frontage: _____	Total Sq. Ft. of all Existing Signage: _____	
	Number of Signs Proposed: _____	Proposed Sign/s: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary	
	<u>Type Sign (Wall, Banner, Scroll Freestanding, other)</u>	<u>Dimensions</u>	<u>Height (if Freestanding)</u>
	1. _____	_____	_____
	2. _____	_____	_____
	3. _____	_____	_____

Fences	Type Fence: _____		
	Fence Height: _____	Number of Gates: _____	Gate Size: _____

Sheds	Total Sq. Footage: _____	Height of Shed: _____	Shed Structure: <input type="checkbox"/> Kit <input type="checkbox"/> Pre-Built <input type="checkbox"/> Stick Built
	(Note: Footing required if over 150 sq.ft.)		

Other	Final Site Plan* # _____	Date Approved: _____
	*(Note: Application will be denied if copy of unconditionally approved site plan is not submitted with the permit application)	
	Is Property located in the Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No	HPC Case # _____
	Is Property located in the Flood Plain? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is Property owned by Frederick County? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is this a Food Service Facility? <input type="checkbox"/> Yes <input type="checkbox"/> No	Water Service Contract: <input type="checkbox"/> Yes (Contract # _____) <input type="checkbox"/> No	

Applicant/Owner Initial: _____ Date: _____

FOR OFFICE USE ONLY

App No.: _____

COMMERCIAL ACCESSORY
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APPLICANT/OWNER CERTIFICATION: The Applicant/Owner hereby certifies and agrees as follows:

That I am the owner, or authorized by the owner to act in their behalf as the owner's agent to make this Application. That the information given herein is true and correct and that all work being done under this application will comply with all applicable Federal, State and Local regulations. That work will be in accordance with and as indicated on the approved site and building plans, review comments, agreements, specifications, etc. unless otherwise approved by the Division Manager of the Building Department. That the Division Manager of the Building Department can revoke the building permit or stop work being done under the building permit for non-compliance with this agreement in part or in whole. Please be advised if the Building Permit is revoked **all fees are non-refundable and non-transferable**. I further understand and agree that plans will be reviewed, inspections made and occupancy certificates issued, however, I assume ultimate responsibility for compliance of all codes, regulations, etc.

***PROPERTY OWNER SIGNATURE:** _____
***PROVIDE NOTARIZED AFFIDAVIT FROM PROPERTY OWNER if signed by anyone other than Property Owner**

Property Owner Name: _____ Date: _____

Mailing Address: _____

Phone No.: _____ Fax No.: _____

E-mail Address: _____

105.3.2 Time limitation of application. An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

SECTION II (For Office Use Only)

Building Permit Fee: \$ _____
Fire Code Review Fee: \$ _____
Other _____ \$ _____

Date Paid: _____ Rec'd by: _____
Date Paid: _____ Rec'd by: _____
Date Paid: _____ Rec'd by: _____
Date Paid: _____ Rec'd by: _____
Date Paid: _____ Rec'd by: _____
Date Paid: _____ Rec'd by: _____

Frederick County Fees:

Excise Tax: \$ _____ Receipt Due
Impact Fee: \$ _____ Receipt Due

Date Rec'd: _____ Rec'd by: _____
Date Rec'd: _____ Rec'd by: _____

SECTION III (For Staff Use Only)

Review Comments: (please write legibly) Revised Site Plan Attached Revised Construction Plan Attached
 Fee Calculations Attached _____

Reviewed By: _____ APPROVAL DATE: _____

Building (Blue) Planning (Green) Engineering (Salmon) Fire Code Review (Yellow) Other _____ Other _____

Applicant/Owner Initial: _____ Date: _____