**FOREST CONSERVATION ORDINANCE MODIFICATION REQUEST**

<table>
<thead>
<tr>
<th>Project Name:</th>
<th>Tax Identification</th>
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<tbody>
<tr>
<td>Location:</td>
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**Tax Map**

<table>
<thead>
<tr>
<th>Block</th>
<th>Parcel</th>
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**MD Coordinates**

**ALL** information requested above must be completed by the applicant before this application will be accepted.

- Demonstrate how enforcement of this ordinance would result in unwarranted hardship.
- Describe the special conditions peculiar to the property which would cause the unwarranted hardship.
- Describe how enforcement of these rules will deprive you of rights commonly enjoyed by others in similar areas.
- Verify that the granting of a modification will not confer on you a special privilege that would be denied to other applicants.

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For Official Use Only

<table>
<thead>
<tr>
<th>Case Number:</th>
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<tr>
<td>Date:</td>
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<tr>
<td>Request for Modification Fee:</td>
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Verify that the modification request is not based upon conditions or circumstances which are the result of your own actions.

Verify that the granting of a modification will not adversely affect water quality.

The Planning Commission/City Engineer may grant a modification upon a finding that all requirements of Article 7, Section 721(b)(3)(A) and (B) of the Land Management Code are met.

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

This application will be submitted to the Maryland Department of Natural Resources which has the right and authority to initiate or intervene in any administrative, judicial, or other original proceeding or appeal concerning the approval of this modification.

Applicant’s Name:*  
____________________________________________________

If not owner, attach “Agent Authorization” letter.
Address:
____________________________________________________

Phone:  Email:
____________________________________________________

Signature:
____________________________________________________

Referred to DNR (date)
____________________________________________________

Scheduled for PC Mtg. on (date)
____________________________________________________

* The owner’s affidavit must accompany this application.