



City of Rockville
Dept. of Community Planning & Development Serv.
 Inspections Services Division
 111 Maryland Ave. • Rockville, MD 20850-2364 • 240-314-8240

Application Date: _____
 Building Permit Number BLD20 ____ - ____
 Use Permit # _____
 Variance/Special exception required? Yes No
 Application No.: _____

Commercial Building Permit Application

PLEASE PRINT CLEARLY OR TYPE	PROPERTY ADDRESS			
	NUMBER & STREET	SUITE	TENANT	
APPLICANT	NAME	MAILING ADDRESS — NUMBER, STREET, CITY, STATE, AND ZIP CODE		TELEPHONE NUMBER
	LAST			
	FIRST			
ARCHITECT	COMPANY			
	LAST FIRST	MD State Reg. #		
CONTRACTOR	COMPANY			
	LAST FIRST	MD State Lic. # Exp. Date		
STRUCTURAL ENGINEER	COMPANY			
	LAST FIRST	MD State Reg. #		
PROPERTY OWNER	COMPANY			
	LAST FIRST			

PROVIDE INFORMATION REQUESTED. INCOMPLETE APPLICATIONS CANNOT BE PROCESSED

TYPE OF IMPROVEMENT

- New Structure
- Addition
- Tenant Layout
- Fire Damage Repair
- Demolition (Interior)
- Demolition of Entire Structure
- Other _____
Description of Job _____

PRINCIPAL TYPE OF FRAME

- Masonry
- Wood Frame
- Structural Steel
- Reinforced Concrete
- Other _____

TYPE OF USE

- Amusement, Recreational
- Church
- Industrial
- Parking garage
- Service Station, Repair Garage
- Hospital, Institutional
- Office, Bank, Professional
- Public Utility
- School
- Stores, mercantile
- Restaurant
- Laboratory
- Describe Other: _____

BUILDING OWNERSHIP

- PVT Private-taxable
- PVE Private-tax exempt
- FED Public-Federal
- ST Public-State
- CO Public-County
- CTY Public-City
- OTH Other

TYPE OF CONSTRUCTION PER

BUILDING CODE:
 1 ___ 2 ___ 3 ___ 4 ___ 5 ___

USE GROUP PER BUILDING CODE:

FIRE PROTECTION FEATURES

- Sprinklers: Complete Partial None
- Standpipes: Yes No
- Fire Alarm: Yes No

OTHER REQUIRED PERMITS:

- Plumbing
- Mechanical (includes Ductwork)
- Electrical
- Occupancy
- Health-Restaurant, etc.
- Sign
- Fire Protection
- Mechanical-Gas

SETBACKS

Front: _____ ft.
 Left: _____ ft.
 Right: _____ ft.
 Side Street: _____ ft.
 Rear: _____ ft.

BUILDING

Width: _____ ft.
 Depth: _____ ft.
 Height: _____ ft.
 Stories above grade: _____ ft.
 Stories below grade: _____ ft.

AREAS

Total Floor: _____ sf.
 Sq. Ft. Roof: _____ sf.
 Under Constr: _____ sf.

ESTIMATED COST

General Construction: \$ _____
 Electric: \$ _____
 Plumbing: \$ _____
 Mechanical Heating-A/C: \$ _____
 Total: \$ _____

TYPE OF HEAT?

Gas, Elect., Oil
 Will new ductwork be installed? Yes No

COMMERCIAL BUILDING PERMIT APPLICATIONS MUST BE ACCOMPANIED BY ALL REQUIRED TRADE PERMIT APPLICATIONS. PERMITS NOT PICKED UP WITHIN SIXTY (60) DAYS FROM DATE OF APPROVAL WILL BE VOIDED, AND PLANS DISCARDED.

I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the construction shall conform to the regulations in the Building Code, the Zoning Ordinance, all other codes and regulations or private building restrictions, if any, which may be imposed on the above property by deed. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. I have read and understood the "Permit Conditions" listed on the back of this page.

Signature (of Owner or Authorized Agent) _____

Address _____

Printed Name _____

Company Name _____

FEES ARE NON-REFUNDABLE
See Permit Conditions on Reverse Side