

TOWN OF LAUREL PLANNING & ZONING APPLICATION

Please make an appointment with the Building Official to discuss this application.
Please provide a scaled site survey for the subject property
Please provide the following information and the Non-Refundable fee made payable to "Town of Laurel".

This application must be signed by the property owner.

Type of Request: <input type="checkbox"/> Special Use Request (\$500.00) <input type="checkbox"/> Minor Subdivision (\$500.00) <input type="checkbox"/> Major Subdivision (\$2,000 plus other associated costs) <input type="checkbox"/> Zoning Change (\$2,000)		Explanation of Request: _____ _____ _____ _____ _____ _____	
Subject Property Address: _____ _____		_____ _____ _____	
Property Owner's Name		Applicant's Name: (If other than owner)	
Mailing Address: _____ _____		Mailing Address: _____ _____	
Phone #	Mobile #	Phone #	Mobile #
Email:		Email:	
Property Owner's Authorization: I _____, the property owner, hereby grant the Town of Laurel and its agent permission to enter the above referenced property Before the and after the request to verify the information on this application and perform inspections at any reasonable time. Signature: _____ Date: _____			

Town of Laurel Use Only – Review Worksheet

Payment Type:	Submission Deadline:	Meeting Date:	Zoning:
	Tax Map & Parcel #		

Financial Good Standing Reviewed By: _____ **Date:** _____

Application Reviewed & Approved By: _____ **Date:** _____