## **CITY OF ABERDEEN**

BUILDING PERMIT AND

ZONING CERTIFICATE

Permit Date

L o						Water Meter Fee			Water/Sewer Capital Imp. Fe				Sediment Control Fee						
c a	Job Location																		
t i	Subdivision										Lot # So		ection #		Plat # Cen		sus Tract #		
o n	Election Dist. Index				Land Use N						Block		Parce		l A		Acreage Lot Size		
	Property Owner				Property Owner Address										Prop. Owner Phone				
O w n e	Applicant					olicant Ad	dress							App	licant	Phone			
														• • •					
r	Contractor				Contractor Address										Phone MHIC i			MHIC#	
D e s c r i p	Description of Work												# Pla	ns S	Submi	tted	C	onst. Cost	
	Basement Size 1 <sup>st</sup> Floor Size 2 <sup>nd</sup>					Floor Size 3 <sup>rd</sup> Floor Size				Garage Size Car				port Size Fireplace					
													•						
	Exterior Finish Shed Size			ize	Deck / Pore		ch Size I		Н	Height		#	# of Stories		# o		of B	of Bedrooms	
i o	# Full Baths		# Half Baths Pub		olic Sewer Publi		c Water C		Gas	s I		Electric	ic Typ		e of Heat		F	Air Cond.	
Z o n i n g	Zoning District	Board	d of Appeals Ref	New Bl	dg	Addition	Alteration	n	Other			A PERM							
							DATE OF ISSUE UNLESS WORK IS STARTED AND DILIGENTLY PURSUED.  AGENCY  NAMES												
	Type of Structure Description									APPRO	VALS NAMES DAT						DATE		
	Lot Width		Elevation							WATE	R and								
					SIGNS				HEA	HEALTH DEPT.									
	Front Yard Setback	k R	Rear Yard Setback		Sign S	Size	Sign Type		/pe	SEDIN	TROL								
	Right Side Yard		Left side Yard							PLA REV BLDC	IEW								
	Setback		Setback		ngth of	Road Frontage			FINAL INSP.  ELECRTIC										
	ZONING CERTIFICATION FOR THIS PERMIT IS APPROVED ON THIS										INSP. B.ING								
	I have carefully ex	kamin		applicatio	on and	the same	is true and	l co		FINAL	and								
	to the best of my knowledge and belief. In doing this work, all provisions of the Harford County Codes and laws of the State of Maryland will be complied with,										ANCY AL OVAL								
	whether specified or not. I will notify the Department of Inspections, Licenses and Permits twenty four (24) hours in advance, when I am ready for inspections. No work																		
	will be concealed until approved. Consent is given for the entry of authorized inspections until the job has received a Certificate of Occupancy.																		
	SIGNATURE					DATE													
	Special Conditions																		