



Commercial Site Plan Redline/Revision Request and Checklist

Calvert County, Maryland, Department of Planning & Zoning
 150 Main Street, 3rd Floor, Prince Frederick, MD 20678
 Phone: (410) 535-2348, (410) 535-1600 ext. 2356
 MD Relay: (800) 735-2258, Fax: (410) 535-3092
 email: DevRev@calvertcountymd.gov

Note: All information must be completed and all items applicable on the "Detailed Site Plan Application Package Checklist" must be provided. Incomplete applications, forms, checklists, plans or other documents will result in the entire submittal package being returned to the engineer. This includes the Fee Schedule(s) and appropriate fees.

All file names should use the format: Project Name, Project Number, Version, Brief Description
 ([Lisas Kennel_CSPR-123456_Plan2_Maps](#))

Please note that site plan approval is **NOT** a permit. Following site plan approval, construction permits must be obtained for grading/clearing, building construction and signs. An occupancy permit is required for change in use.

PRIMARY PROJECT INFORMATION

To be completed by Planning & Zoning:	Date Request Submitted:	Redline Project #:	
Property Address:			
Project Name:			

SPECIFIC PARCEL INFORMATION

Tax Map #	Parcel #	Lot (if any)	Block (if any)	Section (if any)	Tax ID #
Is the property located within a Town Center?		No		Yes, please identify	
Zoning District	Critical Area		Type of Project?		Utilities
	If Yes, CA acreage:				SMECO
					BG&E
This property is part of an Agricultural District:	No	Yes, APD #:		This property is in an Historical District:	No
Total Property Acreage:				Disturbed Acreage:	
Current Deed Reference:				Current Deed Date:	

PROJECT DESCRIPTION

Please provide a **brief** description of the proposed revision:

Project Name:		Redline Project #:	
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APPLICATION HISTORY

>== Please indicate which project listed below this redline is updating.

Application Type	Case #	Resolution #	Action Date
Rezoning			
Board of Appeals			
Subdivision			
Site Plan Review			
Architectural Committee			
Historic District			
Historic Site Surveys			
Replat			
Other (specify)			
Other (specify)			

Gross subtotals of square footage area by use (See Calvert County Zoning Ordinance).

Sq. Ft. (Gross Subtotal) e.g., 6,000	Description e.g., Garden Center	ZO Reference e.g., 3-1.02

CHECKLIST

Please provide the following in PDF format for electronic submittal:

	Applicant	P&Z
1. Previously approved site plan sheet(s)		
2. Proposed changes in red on revised plan sheet(s)		
3. Detailed narrative on letterhead outlining modifications to the approved plan.		
4. This Redline Revision Request Form, SP-309, completed including original signatures .		

Redlined revision submittals will first be reviewed by the Planning Commission Administrator and/or Planner to determine extent of proposed revisions and to determine if other review agencies will need to review and approve the plan. All revisions must also be accompanied by a statement/narrative outlining the changes and their locations. Should the PCA/Planner determine the revision is significantly different from the original approved plan, he/she may re-send the project through the TEG process.

Disclaimer: While County staff will provide assistance, applicants are responsible for identifying all local, state and federal regulatory aspects of a project.

Please read the statements on the following pages and complete the appropriate authorizations.

Project Name:		Redline Project #:	
PROJECT AUTHORIZATION			
I/We the undersigned do hereby submit this application for site plan review and authorize the agent(s) listed below to act on my/our behalf. I/We also authorize and give consent to entry upon the subject property by review agencies' staff and/or board members to the extent necessary to evaluate and act upon this application. In the event the applicant withdraws this authorization to enter, this application shall be deemed withdrawn in its entirety. (If there are more than two owners, please attach Supplemental Signature Form, SD-103.)			
Primary Owner			
Primary Owner*:		Owner's Corporation (if any)	
Signature*:			Date Signed*:
Mailing Address*:			
eMail*:			Preferred Contact Method:
Phone #s:	primary*:	other:	eMail Snail Mail Phone
Property Co-owner, if applicable			
Co-Owner:		Owner's Corporation (if any)	
Signature:			Date Signed:
Mailing Address:			
eMail:			Preferred Contact Method:
Phone #s:	primary:	other:	eMail Snail Mail Phone
Primary Applicant (only if different from the owner(s))			
Primary Applicant*		Applicant's Corporation (if any):	
Signature*:			Date Signed*:
Mailing Address*:			
eMail*:			Preferred Contact Method:
Phone #s:	primary*:	other:	eMail Snail Mail Phone
Co-applicant, if applicable			
Co-Applicant		Applicant's Corporation (if any):	
Signature:			Date Signed:
Mailing Address:			
eMail:			Preferred Contact Method:
Phone #s:	primary:	other:	eMail Snail Mail Phone
Agent or Licensed Preparer			
I certify that the information, attachments and plans submitted herewith are true and correct to the best of my knowledge and ability. I file this application and will act on behalf of the owner(s) and applicant(s) listed above.			
Agent's Name*:		Agent's Corporation (if any)*:	
Signature*:			Date Signed*:
Mailing Address*:			
eMail*:			Preferred Contact Method:
Phone #s:	primary*:	other:	eMail Snail Mail Phone