



DPS

**Montgomery County
Department of Permitting Services**

255 Rockville Pike, 2nd Floor
Rockville, MD 20850-4166
Phone: 311 in Montgomery County or (240)777-0311
<http://www.montgomerycountymd.gov/permittingservices>



**Design for Life
Building Permit – Supplemental**

Sediment Control # _____ **Building AP #(s)** _____ **Demolition #** _____

A. Building Permit Address

Add'l. House #'s If building **new** townhouses: _____

House
Number _____ Street _____ City _____ Zip _____

Lot(s) _____ Block _____ Subdivision _____

B. Applicant Information

Contact ID #: _____ **Fax #:** _____ **Email:** _____

Name of Applicant _____ Daytime Phone #: _____
(Permit will be issued to Applicant)

Address _____ City _____ State _____ Zip _____

C. Contact Information

Contact ID #: _____ **Fax #:** _____ **Email:** _____

Contact Person _____ Daytime Phone # _____
(If other than Applicant)

Address _____ City _____ State _____ Zip _____

Contractor Address _____

Daytime Phone # _____

D. Proposed Work

Indicate the level of accessibility LEVEL 1 (visit-able) LEVEL 2 (live-able)

If you are proposing to add accessibility features, list the features and the anticipated cost for each feature. Permit and inspection fees may be added to the total cost.

ACCESSIBILITY FEATURE	COST
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

D. Additional Approvals

Properties located within historic districts, municipalities, HOAs (Home Owner Associations) and special taxing districts may require additional approvals beyond the required Department of Permitting Services (DPS) building permit.

E. To Be Read by the Applicant

Any information that the applicant has set forth in this application that is false or misleading may result in the rejection of the application. A condition for the issuance of this permit is that the proposed construction will comply at all times with the plans as approved by all applicable government agencies.

(Applicant's Signature)

Date

(Print Name)