



# Town of Berwyn Heights

5700 Berwyn Road  
Berwyn Heights, MD 20740  
Code Tel. 301-513-9331  
Town Tel. (301) 474-5000  
[www.Berwynheightsmd.gov](http://www.Berwynheightsmd.gov)

## BUILDING PERMIT APPLICATION

Town Permit: # \_\_\_\_\_  
Date Issued: \_\_\_\_\_  
Town Fee: \$ \_\_\_\_\_

- (1) PROPERTY OWNER: \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_
- (2) ADDRESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_
- (3) LOT: # \_\_\_\_\_ BLOCK: # \_\_\_\_\_
- (4) CONTRACTOR: \_\_\_\_\_ PHONE: ( ) \_\_\_\_\_
- (5) ADDRESS: \_\_\_\_\_
- (6) WORK DESCRIPTION: \_\_\_\_\_
- (7) Project Cost:  Up to \$25,000  Greater than \$25,000
- (8) COUNTY FEE: \_\_\_\_\_ COUNTY PERMIT: # \_\_\_\_\_
- (9) Will heavy equipment such as tractors, bulldozers, etc., be used on this project?  Yes  No
- (10) Will any trucks (including cement mixers) have to cross the curb to deliver materials?  Yes  No
- (11) Will the curb and/or gutter be cut for any reason?  Yes  No
- (12) Will utility work be done in the ground or in the roadway?  Yes  No

### CONDITIONS:

- 1) A copy of your County building permit application and set of plans must be submitted with each application, including building cost.
- 2) Note Building permit fees: **\$75.00** for a value of construction under **\$25,000**, and **\$125** for a building permit value of construction over **\$25,000**.
- 3) A minimum deposit of **\$250.00** may be required for each building permit issued in accordance with **Ordinance 104**, to cover damages which may occur to Town property while construction is being performed. If items #9, 10, 11, and/or 12 are "yes," a deposit will be required.
- 4) A late filing fee of **\$25.00** will be collected if construction is started before a Town permit is issued.

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. THE APPLICANT DOES HEREBY AGREE TO ABIDE BY ALL TOWN OF BERWYN HEIGHTS ORDINANCES AND TO ESTABLISH PROPER DRAINAGE AS REQUIRED BY PRINCE GEORGE'S COUNTY CODE.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

Fee Received By \_\_\_\_\_ (Signature)