TALBOT COUNTY HISTORIC PRESERVATION COMMISSION

Historic District Work Permit Application

Application Date _____ **Requested Hearing Date** _____

Subject Property Name _____ **MHT No.** _____

Tax Map _____ **Grid** _____ Parcel _____ Lot _____

Property Address _____

Owner(s) of Record _____ **Telephone** _____

Owner's Mailing Address _____

Applicant _____ **Telephone** _____

Applicant's Mailing Address _____

Architect _____ **Telephone** _____

Architect's Mailing Address _____

Contractor _____ **Telephone** _____

Contractor's Mailing Address _____

TYPE OF WORK (Check all that apply)

( ) Visible from public way	( ) Not visible from public way	( ) Visible from water	( ) Not visible from water
( ) Fence/gate	( ) Windows/Doors	( ) Addition(s)	( ) New construction
( ) Signage	( ) Siding/trim	( ) Relocation	( ) In-kind replacement
( ) Parking/driveway	( ) Roofing/gutters, downspouts	( ) Restoration/repair	( ) Utilities
( ) Landscaping	( ) Accessory building	( ) Demolition	( ) Other

General Description of Proposed Work _____

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Tax Credits: Does the owner intend to apply for Federal or State Rehabilitation Tax Credits? ( ) yes ( ) no
If yes, has the owner met with Maryland Historical Trust staff? ( ) yes ( ) no

* (*Please note that the Talbot County Historic Preservation Commission does not guarantee approval for tax credits.)*

Historic District Work Permit Process and Application Submittal Requirements (See attached pages.)

I have read and understand the attached information regarding process and requirements in obtaining a Historic District Work Permit and this application shall not be construed as a permit to proceed with the above stated work. A certificate of approval signed by the Chair shall be issued before zoning approval for the required Talbot County building permit is granted. I understand that the Historic Preservation Commission or its agent may inspect the work in progress at such times as are reasonable to the nature and scope of the working being undertaken.

_____ _____

Signature of Owner, Applicant or Agent *Date*

This section to be completed by staff only:

This Commission has reviewed the above project and finds:

( ) Above project is approved as presented. See comments below.

( ) Above project is approved with conditions. See comments below.

( ) Above project is denied. See comments below.

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Talbot County Historic Preservation Commission Date