



MAYOR AND CITY COUNCIL OF LAUREL
OFFICE OF THE FIRE MARSHAL AND PERMIT SERVICES
 8103 Sandy Spring Road • Laurel, Maryland 20707-2502
 Phone: (301) 725-5300 FAX (301) 490-5068 • Web: <http://www.cityoflaurel.org>
 Email: fmops@laurel.md.us



PERMIT NO.

TYPE: USE AND OCCUPANCY				DATE OF APPLICATION:																		
LOT NO:	SUBDIVISION:	ZONING CLASS	ELECTION DISTRICT	DATE OF ISSUE:																		
BLOCK NO:	TAX ID NO.		10																			
ADDRESS OF PROPERTY:		INTENDED USE OF PROPERTY:																				
OWNER OF PROPERTY (Name & Address):		CONDITIONS/COMMENTS:																				
PHONE NUMBER:		<i>(If property use changes, a new permit is required)</i>																				
OCCUPANTS NAME (Individual/business name where applicable)																						
PHONE NUMBER:		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>APPLICANTS NAME & ADDRESS:</td> <td>Is Food Handling Involved?</td> <td>YES or NO (circle one)</td> </tr> <tr> <td></td> <td>Square Footage of Lot:</td> <td></td> </tr> <tr> <td></td> <td>Square Footage of Building:</td> <td></td> </tr> <tr> <td></td> <td>Number of Employees:</td> <td></td> </tr> <tr> <td></td> <td>Number of Parking Spaces:</td> <td></td> </tr> <tr> <td></td> <td>Hours of Operation:</td> <td></td> </tr> </table>			APPLICANTS NAME & ADDRESS:	Is Food Handling Involved?	YES or NO (circle one)		Square Footage of Lot:			Square Footage of Building:			Number of Employees:			Number of Parking Spaces:			Hours of Operation:	
APPLICANTS NAME & ADDRESS:	Is Food Handling Involved?				YES or NO (circle one)																	
	Square Footage of Lot:																					
	Square Footage of Building:																					
	Number of Employees:																					
	Number of Parking Spaces:																					
	Hours of Operation:																					
DAYTIME PHONE NUMBER:																						
CONDITIONS: (Office Use Only)																						
FEE CODE	DESCRIPTION	AMOUNT																				
APPROVED By the Office of the Fire Marshal and Permit Services:				DATE:																		
APPROVED By the Department of Economic and Community Development:				DATE:																		
This permit does not in any way relieve the owners, or any person in possession or control of the building, or any part thereof, from obtaining such other permits or licenses as may be prescribed by law for the uses or purposes for which the building is designed or intended, or from complying with any lawful order issued with the object of maintaining the building in a safe or lawful condition. The issuance of this Use & Occupancy permit does not include the approval (either express or implied) of any gas; propane gas (or the like) fixtures, storage or installation. Application must be signed by the property owner or written authorization from the property owner must be attached.																						
I hereby certify that I have the authority to make the foregoing application, that the application is correct and that the use will conform to the Zoning Ordinance and that the property will meet all applicable building codes.																						
SIGNATURE OF APPLICANT:				DATE:																		