



**MAYOR AND CITY COUNCIL OF LAUREL**  
**DEPARTMENT OF THE FIRE MARSHAL AND PERMIT SERVICES**

8103 Sandy Spring Road • Laurel, Maryland 20707 • (301) 725-5300 ext. 2238  
<http://www.cityoflaurel.org> • E-Mail: [FMPS@laurel.md.us](mailto:FMPS@laurel.md.us)

**PERMIT NO.**

**USE AND OCCUPANCY**

**DATE OF APPLICATION:**

<b>LOT NO:</b>	<b>SUBDIVISION:</b>	<b>ZONING CLASS</b>	<b>ELECTION DISTRICT</b>	<b>DATE OF ISSUE:</b>
<b>BLOCK NO:</b>	<b>TAX ID NO.</b>		10	

<b>ADDRESS OF PROPERTY:</b>	<b>INTENDED USE OF PROPERTY:</b>  (If property use changes, a new permit is required)
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<b>OWNER OF PROPERTY (Name &amp; Address):</b>  <b>PHONE NUMBER:</b>	<b>CONDITIONS/COMMENTS:</b>
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<b>OCCUPANTS NAME</b> (Individual/business name where applicable)  <b>PHONE NUMBER:</b>	<b>ARCHITECT'S NAME &amp; ADDRESS:</b>  <b>PHONE NUMBER:</b>
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<b>APPLICANTS NAME &amp; ADDRESS:</b>  <b>DAYTIME PHONE NUMBER &amp; EMAIL ADDRESS:</b>	<b>Is Food Handling Involved</b> Yes / No <b>Square Footage of Lot:</b> <b>Number of Employees:</b> <b>Number of Parking Space:</b> <b>Hours of Operations:</b>
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<b>CONDITIONS: (Office Use Only)</b>	
<b>FEE CODE</b>	<b>DESCRIPTION</b>
	<b>AMOUNT</b>

**APPROVED By the Department 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 do solemnly declare and affirm, under the penalties of perjury, that I, the owner, or agent of the owner authorized to perform the proposed work, hereby certify that the application and contents are true and correct, that construction will conform to all current Building, Zoning and Handicap Accessibility Code requirements and that I am authorized to make this application. I understand that issuance of this permit does not exempt the proposed work from the conditions of permits required by other agencies and that **this permit will expire six (6) months from the date of issue, if no work has begun**. If work has begun, noticeable progress must continue. All work must be completed within 18-months from the date of issue.

**PRINTED NAME & SIGNATURE OF APPLICANT & DATE SIGNED:**