



St. Mary's County Department of Land Use and Growth Management
23150 Leonard Hall Drive, Leonardtown, Md. 20650
Phone (301) 475-4200, ext. 71500 Fax (301) 475-4672
**BOARD OF APPEALS / ADMINISTRATIVE VARIANCE
APPLICATION**



INSTRUCTIONS TO APPLICANT:

Please complete the information below prior to Board of Appeals submission. This application will be required in order to accept and process your submission. All application materials must be folded or of a size which will fit into a standard legal folder.

CONTROL NUMBER: _____ (To be completed by LUGM personnel)

PROJECT NAME: _____

PROPERTY OWNER: _____

ADDRESS: _____

PHONE #: _____ E-MAIL ADDRESS: _____

AGENT (if other than property owner): _____

ADDRESS: _____

PHONE #: _____ E-MAIL ADDRESS _____

PROPERTY LOCATION (*Street Address or Tax Identification Number*):

PARCEL IDENTIFICATION: TAX MAP: _____ GRID: _____ PARCEL: _____ LOT: _____ BLOCK: _____

ZONING: _____ C.A. OVERLAY: _____ ELECTION DISTRICT: _____ ACREAGE: _____

☐ Administrative Variance

☐ Variance

☐ Area _____

☐ Bulk _____

☐ Density _____

☐ Other _____

☐ Critical Area Administrative Variance

☐ Critical Area Variance

☐ Encroachment in 100' buffer _____

☐ Increase of Impervious Surface of _____

☐ Other _____

☐ Appeal of Administrator's Decision

☐ Conditional Use Approval

Please describe requested action:

APPLICATION SUBMISSION REQUIREMENTS:

☐ Pre-Application Conference Held with _____ on _____.
(staff) (date)

☐ Letter of Intent addressing standards

☐ Non-CA Site Plan/Plot Plan

9 Prints – BOA

3 Prints - Administrative

☐ Critical Area Site Plan/Plot Plan

9 Prints – BOA

3 Prints - Administrative

* Please show topography on all Critical Area Site Plans.

Review Fees:

- | | |
|------------------------------------|----------------------------------|
| <input type="checkbox"/> \$750 - | Conditional Use |
| <input type="checkbox"/> \$500 - | Variance/ Critical Area Variance |
| <input type="checkbox"/> \$0 - | *Appeal |
| <input type="checkbox"/> \$500 - | Administrative Variance - All |
| <input type="checkbox"/> \$670 - | Expansion of Non-Conforming Use |
| <input type="checkbox"/> \$25 each | Resubmissions |

Approvals Received:

____ Health Department (HD)
 ____ Soil Conservation District (SCD)
 ____ Critical Area (CA)
 ____ Critical Area Commission (CAC)
 ____ DPWT (if applicable)

All advertising fees to be determined; applicants will be billed. Applicants are responsible for mailing and posting costs.

Other fees may apply. See the St. Mary's County User Fee Schedule, effective July 1, 2018.

***APPEALS:** Pursuant to Section 23.1.2 of the Comprehensive Zoning Ordinance an appeal shall be filed within 30 days of the date of the action being appealed by filing an application for Board of Appeals review with St. Mary's County Government, Office of the County Attorney. An application for appeal **shall identify with specificity all grounds for the appeal**. Please state in detail your grounds for appeal. Please provide a separate written Notice of Appeal, if more space is needed.

☐ I hereby swear or affirm that I have the authority from the property owner to make this application and that this application is correct.

☐ I hereby swear or affirm that I am the property owner and that this application is correct.

Staff and Board members are hereby authorized to enter the site to view the particulars of the application.

PROPERTY OWNER/AUTHORIZED AGENT'S

SIGNATURE: _____

PRINT NAME: _____ **DATE:** _____

☐ I prefer all correspondence to be sent (circle one) U.S. Mail/Emailed/Faxed

(Fax #) _____