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## STAGING ALLOCATION REQUEST FORM

M-NCPPC Staff Use Only

SAR Number <b>SAR</b> _____	Lead Reviewer _____
Date Final Application Received _____	Planning Board Date _____

**An application will not be accepted for review unless all required information is provided. If an item requires more space, attach a separate sheet.**

**Plan Name** (most recently approved): \_\_\_\_\_

**Approval Requested:**

Planning Board Level

Staff Level

Associated with M-NCPPC Approved Plan

SAR Exemption

Building Permit Only\*

No-Net Draw on Capacity

\*Provide Property Tax ID \_\_\_\_\_

Development Plan Approvals Pre-Date Sector Plan Approval

**Previous Plan Approvals:** (enter information, if applicable)

Sketch Plan:

Number \_\_\_\_\_ Name \_\_\_\_\_

Preliminary Plan:

Number \_\_\_\_\_ Name \_\_\_\_\_

Site Plan Name:

Number \_\_\_\_\_ Name \_\_\_\_\_

Does Site Plan cover the entire Preliminary Plan property boundary?  Yes  No

Other Plans:

\_\_\_\_\_  
\_\_\_\_\_

**Applicant:** (  Owner or  Owner's Designee - check applicable; written verification required if not the owner.)

\_\_\_\_\_  
Contact Person \_\_\_\_\_ Company Name \_\_\_\_\_

\_\_\_\_\_  
Street Address \_\_\_\_\_

\_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_  
Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_ E-mail \_\_\_\_\_

Use page 5 to provide additional contacts' information, if desired.

Demolition Credit Plan\* \_\_\_\_\_  
 Number

**Demolition Credit Accounting Worksheet – Dwelling Units**

Existing DU Approved for Demolition   
 DU

**Buildings Actually Demolished\*\***

	Demo Permit #	Street #	Prefix	Street Name	Street Type	Suffix	Residential Sq.Ft.	DU
1.								DU
2.								DU
3.								DU
4.								DU
5.								DU
6.								DU
7.								DU
								DU
							<b>Total Res Sq.Ft.</b>	<b>Total DU</b>

**Previously Taken Demolition Credits**

1.		
2.	SAR Number	DU
3.	SAR Number	DU
4.	SAR Number	DU
5.	SAR Number	DU
6.	SAR Number	DU
7.	SAR Number	DU
	SAR Number	DU
		<b>Total DU</b>

Remaining Balance   
 Proposed Demo Credits to be taken with this SAR  DU  
 Remaining Balance should this SAR be Allocated  DU  
 DU

\*If the Site Plan covers less than the Preliminary Plan boundary, use the Preliminary Plan.

\*\*Attach proof of demolition if credit taken.

**Demolition Credit Accounting Worksheet – Non-Residential Square Feet**

Existing Non-Residential Sq.Ft. Approved for Demolition

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Buildings Actually Demolished\*\*

1.							Sq.Ft.
	<i>Demo Permit #</i>	<i>Street #</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>	Sq.Ft.
2.							Sq.Ft.
	<i>Demo Permit #</i>	<i>Street #</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>	Sq.Ft.
3.							Sq.Ft.
	<i>Demo Permit #</i>	<i>Street #</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>	Sq.Ft.
4.							Sq.Ft.
	<i>Demo Permit #</i>	<i>Street #</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>	Sq.Ft.
5.							Sq.Ft.
	<i>Demo Permit #</i>	<i>Street #</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>	Sq.Ft.
6.							Sq.Ft.
	<i>Demo Permit #</i>	<i>Street #</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>	Sq.Ft.
7.							Sq.Ft.
	<i>Demo Permit #</i>	<i>Street #</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>	Sq.Ft.

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**Total Sq.Ft.**

Previously Taken Demolition Credits

1.		
	<i>SAR Number</i>	Sq.Ft.
2.		Sq.Ft.
	<i>SAR Number</i>	Sq.Ft.
3.		Sq.Ft.
	<i>SAR Number</i>	Sq.Ft.
4.		Sq.Ft.
	<i>SAR Number</i>	Sq.Ft.
5.		Sq.Ft.
	<i>SAR Number</i>	Sq.Ft.
6.		Sq.Ft.
	<i>SAR Number</i>	Sq.Ft.
7.		Sq.Ft.
	<i>SAR Number</i>	Sq.Ft.

--

**Total Sq.Ft.**

Remaining Balance

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Proposed Demo Credits to be taken with this SAR

Sq.Ft.
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Remaining Balance should this SAR be Allocated

Sq.Ft.
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Sq.Ft.

\*\* Attach proof of demolition if credit taken.

**Addresses for buildings(s) associated with the SAR**

<b>A.</b>	<i>Street Number</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>
<b>B.</b>	<i>Street Number</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>
<b>C.</b>	<i>Street Number</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>
<b>D.</b>	<i>Street Number</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>
<b>E.</b>	<i>Street Number</i>	<i>Prefix</i>	<i>Street Name</i>	<i>Street Type</i>	<i>Suffix</i>

**Allocation Worksheet**

**I. Dwelling Units**

	Building A.	Building B.	Building C.	Building D.	Building E.	<b>SAR Total</b>
a. Requested Residential Sq.Ft.						
b. Requested DU						
c. MPDU Approved						
d. MPDU Credit						
e. Demolition Credit Applied						
f. Net Allocation						

**II. Non-Residential Square Feet**

	A.	B.	C.	D.	E.	<b>SAR Total</b>
a. Requested						
b. Demolition Credit Applied						
c. Net Allocation						

*Applicant hereby acknowledges that he/she  is the sole owner of the subject property, or  is otherwise legally authorized to represent the owner(s) (written verification provided), that all required information for the submission of a Staging Allocation Request has been included in this application, and that to the best of his/her knowledge, information, and reasonable belief, the information and data are accurate.*

**Signature of Applicant(s)** (Owner or Owner's Representative)

\_\_\_\_\_

*Signature*

\_\_\_\_\_

*Date*

\_\_\_\_\_

*Name (Type or Print)*

**Owner** (If Applicant is a representative or contract purchaser, list owner here)

Name		Contact Person	
Street Address			
City		State	Zip Code
Telephone Number	Fax Number	E-mail	

**Architect**

Name		Contact Person	
Street Address			
City		State	Zip Code
Telephone Number	Fax Number	E-mail	

**Engineer**

Name		Contact Person	
Street Address			
City		State	Zip Code
Telephone Number	Fax Number	E-mail	

**Attorney**

Name		Contact Person	
Street Address			
City		State	Zip Code
Telephone Number	Fax Number	E-mail	

**Other:** \_\_\_\_\_

Name		Contact Person	
Street Address			
City		State	Zip Code
Telephone Number	Fax Number	E-mail	

## Checklist

**This application may be submitted by appointment only. Please contact the DARC Intake Section at 301-495-4611 to schedule an appointment. The following items are required to be included in the application. See Submission Requirements for more details about the items below.**

1. General Information
  - 1.1 Completed application form and checklist.
  - 1.2 Fee schedule and application fee.
2. Supporting Drawings and Documents
  - 2.1 Building Location Plan Drawing
    - a. Plan base is the most recently approved development plan
    - b. Buildings included in the SAR are highlighted
    - c. Address of each building included in the SAR is noted on the plan drawing
  - 2.2 All Demolition Permits for Demolition Credit taken
  - 2.3 Photos or other evidence to verify that all buildings for which Demolition Credit Taken have been demolished
  - 2.4 Copy of the Planning Board resolution approving any plans associated with the SAR (preliminary, site, etc.)
  - 2.5 Written verification that applicant (if not the property owner) is legally authorized to submit this application on behalf of a property owner, if applicable.

No. Copies	Applicant	M-NCPPC Staff
1		
1		
1		
1ea		
1ea		
1ea		
1		