



Montgomery County Planning Department
 Maryland-National Capital Park and Planning Commission

Effective: January 29, 2021

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 Wheaton, Maryland 20902

www.montgomeryplanning.org

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SUBDIVISION REGULATION WAIVER REQUEST

M-NCPPC Staff Use Only			
File Number	SRW- _____	Fee (attach worksheet) Fee	_____
Date Application Received DRC	_____	Received by MCPB	_____
Meeting Date	_____	Hearing Date	_____

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

Proposed Subdivision Name: _____ Acres _____ Sq. Ft. _____

200 scale Base Map # _____ Tax Map # _____ Special Protection Area _____

Property Tax Account Number(s) associated with the plan (8 digits)

- A. _____ B. _____ C. _____ D. _____ E. _____
 F. _____ G. _____ H. _____ I. _____ J. _____

Location: (Complete either A or B)

A. On _____, _____ feet _____ of _____
Street Name (N,S,E,W etc.) Nearest Intersecting Street

B. _____ quadrant, intersection of _____ and _____
(N,S,E,W etc.) Street Name Street Name

Subdivision Information: (Complete either A, if located within a recorded subdivision, or B)

C. Lot _____ Block _____ Subdivision _____

D. Parcel _____ Liber _____ Folio _____; Parcel _____ Liber _____ Folio _____; Parcel _____ Liber _____ Folio _____

Applicant (Owner, Owner's Representative, or Contract Purchaser (written verification required if not the owner))

Name Contact Person

Street Address

City State Zip Code

Telephone Number Fax Number E-mail

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

Supplementary Information:

Justification statement for waiver request: Attached

Are there any legal restrictions applicable to this property other than those shown on this plan?*

If yes, please describe (attach supplemental information, if needed):

*MNCPPC does not enforce easements and any other private legal agreements.

Has the applicant had any pre-submission meetings with M-NCPCC staff? Yes No

Name of Staff: _____ Date of meeting(s): _____ (Submit minutes)

Is the property in the Locational Atlas and Index of Historic Sites? Yes No

Is the property in the Master Plan for Historic Preservation? Yes No

Is the property in an incorporated municipality? Yes, _____ No

Is the property in a special taxing district? Yes, _____ No

Existing Sewer and Water Categories:

Existing Service Category: Sewer _____ Water _____ Pending Service Category: Sewer _____ Water _____

Proposed Sanitary Systems: Public Water Public Sewer Well Septic

Applicant hereby certifies that he/she is the sole owner of the subject property, is otherwise legally authorized to represent the owner(s) (written verification provided), or is a contract purchaser authorized to submit this application by the property owner (written verification provided).

Signature of Applicant (Owner, Owner's Representative or Contract Purchaser)

Signature

Date

Name

Checklist

Initial Applications: submit only 2 copies of relevant items below

1. General Submission

- 1.1 Application form and checklist.....
- 1.2 Complete fee schedule and worksheet
- 1.3 Notice List prepared in conformance with the Manual of Development Review Procedures on printer labels and paper copy of labels.....
- 1.4 Statement of Justification to support approval of the subject application

2. Plan Drawings

- 2.1 Concept drawings , including vicinity map, location of property, north arrow, scale (folded copies).....
- 2.2 CD with PDF of plan drawings.....

No. Copies	Engineer/ Surveyor	M-NCPCC Staff
1		
1		
2 sets of labels & 1 paper copy		
20		
40		
1		

The engineer, surveyor or plan preparer hereby certifies that all required information for the submission of a pre-application concept plan 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 Engineer, Surveyor or Plan Preparer

Signature

Date

Name (Type or Print)