Maryland-National Capital Park and Planning Commission

2425 Reedie Drive

Wheaton, Maryland 20902

www.montgomeryplanning.org

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Effective: January 01, 2024

FEE SCHEDULE AND WORKSHEET

Application Numbers MACDDC Staff Lles Only					
Application Number: M-NCPPC Staff Use Only To be completed by the Applicant					
Applicant:	To be comple	етей бу тпе Арр	micant		
Project Name:					
Pre-Application 9	Submission (check applicable boxes)	1			
		1	#0.400.00	C	
☐ Staff Review Or			\$2,120.00	\$	
☐ Staff and Plann	ing Board Review		\$4,240.00	\$	
NRI/FSD Natural	Resources Inventory/Forest Stand	Delineation (che	ack applicable boyes)		
	resources inventory/r orest stand	Defineation (Cite			
□ NRI/FSD			\$860.00	\$	
☐ NRI/FSD Amen	dment		\$480.00	\$	
☐ NRI/FSD Recer	tification Request		\$480.00	\$	
☐ Forest Conservation Exemption Request or Recertification			\$265.00	\$	
☐ Forest Conservation Bank review			\$1,060.00	\$	
•	tion Plan (check applicable boxes)	·			
□ Single Family Residential	\$580.00 + \$210.00 per lot	# of lots	x \$210 = \$	\$	
☐ All Others	\$1,110.00 + \$310.00 per acre	# of acres	x \$310 = \$	\$	
☐ FCP Amendment without Planning Board Hearing			\$800.00	\$	
☐ FCP Amendment with Planning Board Hearing			\$1,600.00	\$	
☐ Fence installation within a conservation easement request		quest	\$145.00	\$	
			Total This Page	\$	

Administrative Subdivision Plan (check applicable boxes)

☐ Existing Place of Worship or Institutional Use*	\$3,700.00	\$
☐ Up to 5 Lots in the AR Zone or Up to 3 Lots in Any Residential Zone	\$2,650.00	\$
☐ Consolidation of Existing Lots or Parts of Lots in a Nonresidential Zone	\$4,250.00	\$
☐ BioHealth Priority Campus or Signature Business Headquarters	\$4,250.00	\$
☐ Mixed Income Housing Community	\$4,250.00	\$
☐ SPA within plan (SPA=Special Protection Area)	\$800.00	\$

<u>Preliminary Plan of Subdivision</u> (check applicable boxes)

Tremmary Flam of Subart	(c. reak appli	ioabio boxoo)				
	Residential (DUs	s=Dwelling Units)				
☐ Residential☐ 1 to 100 DUs	\$2,915.00 + \$38	·	\$385 = # of DUs	(1 to 100) \$ (over 100)	+ x	\$
☐ DUs over 100	☐ DUs over 100 \$105		\$105 = \$	\$		
☐ SPA within plan						
☐ 1 to 9 DUs	\$400.00					
☐ 10 to 50 DUs	\$800.00					\$
☐ more than 50 DUs	\$800.00 + \$20.0	0 per DU over 50	•	> 50		
	Commercial/Indu	ustrial (SF=Square				
□ Commercial						
☐ 1 to 9,999 SF	\$4,775.00 + .15	per SF	# of SF _	x	<u> </u>	¢
☐ 10,000 to 24,999SF	\$5,850.00 + .15 per SF		\$0.15 = \$			\$
☐ 25,000 SF or more	\$6,900.00 + .15	per SF				
☐ SPA within plan	\$800.00					\$
	<u>Other</u>					
☐ New Institutional/Religiou	s*	\$3,700.00				\$
☐ SPA within plan		\$800.00				\$
(SPA=Special Protection Are	ea)				•	
Preliminary Plan Amendm	<u>ents</u>					
☐ Major Amendment		Same as Preliminary Plan (enter with SPA fee)			\$	
☐ Minor Amendment		\$2,915.00		\$		
					l	
☐ APF Review Not Associate Plan (50.4.3.J)	ed with Another	\$2,915.00				\$
☐ Subdivision Regulation Waiver (50.9)		\$2,650.00 per wa	iver	# of waivers		\$
				·		
				Total	This Page	\$

Site Plan (check applicable boxes)

	Residential (DUs = Dwelling Units)		
☐ Residential			
☐ 1 to 9 Dus	\$4,775.00 + \$175.00 per DU	# of DUs x \$175 = \$	\$
☐ 10 or more DUs	\$6,350.00 + \$175.00 per DU	φ173 = φ	
☐ SPA within plan			
☐ 1 to 9 DUs	\$400.00		
☐ 10 to 50 DUs	\$800.00		\$
☐ more than 50 DUs	\$800.00 + \$20.00 per DU over 50	# of DUs > 50x \$20 = \$	
	Commercial/Industrial (SF=Square Feet)		
☐ Commercial			
☐ 1 to 9,999 SF	\$4,775.00 + .15 per SF	# of SFx \$0.15 = \$	\$
☐ 10,000 or more SF	\$6,350.00 + .15 per SF	φυ. 13 = φ	
☐ SPA within plan	\$800.00	·	\$
	Other		
☐ Institutional/Religious*	\$3,700.00		\$
☐ SPA within plan	\$800.00		\$
Site Plan Amendments			
■ Major Amendment	Same as Site Plan		\$
☐ Minor Amendment	\$2,915.00		\$
☐ SPA within Amend.	\$800.00		\$
		,	
☐ Record Plats (including minor subdivision)	\$3,200.00	Number of Plats:	\$
			Φ.
		Total This Page	\$

(SPA=Special Protection Area)

^{*}Note: Only the following uses qualify for the "Institutional" application fee schedule: dormitories; residential care facilities (any size); private ambulances or rescue; charitable philanthropic institutions; cultural institutions; family day care; group day care; day care centers; private educational institutions; private outdoor playground areas; publicly owned or operated swimming pools; and private club, service organizations.

Sketch Plan (check applicable boxes)						
Commercial/Residential Base Fee						
1 Up to 20,000 square feet \$5,300.00			\$			
☐ Greater than 20,000 square feet	\$10,600.00		\$			
Additional per SF fee						
☐ Projects 0 – 500,000 square feet (SF)	# of SFx \$0.20 = \$		\$			
☐ Projects 500,001 – 1,000,000 square feet (SF)	# of SF x \$0.25 = \$		\$			
☐ Major Amendment*	Same as Sketch Plan (enter above)		\$			
☐ Minor Amendment**	\$5,300		\$			
Total Sketch Plan Fee (sum of the above, or	Max. of \$275,000.00, whichever is less	3)	\$			
 *Major Amendment – Any request to increase density or height ** Minor Amendment – Any request to change a "Condition of Approval" or "Binding Element" that does not affect density or height 						
Project Plan Amendment (check applicable boxes)						
☐ Residential (DUs)	\$4,775.00 + \$80.00 per DU	# of DUs x \$80 = \$				
☐ Commercial (GFA)	\$4,775.00 + \$0.15 per SF	# of SF x \$.15 = \$	\$			
			\$			
□ Extensions	□ Extensions \$2,450.00					
Total Project Plan Fee (sum of the above, or \$275,000.00, whichever is less)						
Staging Allocation Request (SAR) (check applicable boxes						
☐ Residential (DUs)	# of DUsx \$1.00 = \$		\$			
□ Non-Residential (Square Feet) # of SF x \$0.01 = \$			\$			
□ Projects Not Requiring a Sketch Plan Residential & Non-Residential \$525.00						
Total SAR Fee (sum of the above)	Total SAR Fee (sum of the above)					
		Total This Page	\$			

		_		14/
BioHealth Priority Campu	ıs Plan/Signature Business Headqu		ee Schedule and able boxes)	Worksneet 5 or
□ 50,000-149,999 sq ft	 -		\$106,000.00	\$
□ 150,000-399,999 sq ft \$212,000.00				\$
☐ 400,000 sq ft and above			\$318,000.00	\$
Diallackh Drigrity Compu	Play/Cimpeture Pusiness Headqu	ortoro Dien		
Amendments	ıs Plan/Signature Business Headqu	arters Pian		
☐ Amendment with no add	itional SF		\$10,600.00	\$
☐ Amendment with 1 – 49,	999 additional SF		\$10,600.00	\$
☐ Amendment with 50,000	or more additional SF		\$53,000.00	\$
☐ 10% Deduction for project	cts in Opportunity Zones		<	\$ >
Mixed Income Housing C ☐ Residential	ommunity Plan (check applicable box Residential (DUs = Dwelling Units) \$3,200 + \$210.00 per DU	# of DUs \$210 = \$	x	\$
	Non-residential (SF=Square Feet)			
■ Non-residential				
☐ 1 to 9,999 SF	\$3,700.00 + .15 per SF	# of SF	x	\$
□ 10,000 – 24,999 SF	\$4,775.00 + .15 per SF	\$0.15 = \$		Ψ
☐ 25,000 SF or More	\$5,850.00 + .15 per SF			
Mixed Income Housing C	ommunity Plan Amendments			
☐ Additional DU's or non- residential floor area	Same as new Nixed Income Housing	g Community Plan		\$
☐ Residential with no additional DU's	\$3,200.00			\$
☐ Non-residential with no additional SF	\$3,700.00			\$

Note: The Mixed-Income Housing Community Plan fees will not qualify for a "Fee Reduction Request" because the noted fees have already been reduced in comparison to a concurrent Sketch Plan and Site Plan Review submission.

Total This Page

Credit for Concurrently Filed Plans		
☐ Credit for Preliminary and Site Plans filed concurrently <u>after</u> the approval of a Sketch Plan	A. Sketch Plan Fee \$/2 = \$(maximum credit possible) B. Portion of Sketch Plan credit not previously used \$ C. Preliminary Plan Fee \$ + Site Plan Fee \$/2 = \$ Credit equals the lesser of B or C. Credit will be	<\$ >
☐ Credit for Preliminary and Site Plan Amendments filed concurrently with a new Sketch Plan in order to take advantage of CR zoning that was applied to the property after the previous Preliminary and Site Plans were approved	applied equally to the Preliminary and Site Plans. A. Sketch Plan Fee \$ (maximum credit possible) B. Portion of Sketch Plan credit not previously used \$ (C. Preliminary Plan Fee \$ + Site Plan Fee \$ = \$ (C. Credit cannot exceed B or C. Credit will be applied equally to the Preliminary and Site Plans if possible.	<\$ >
	Total This Page	\$
	Total Fee	\$
Date Received Check No. Received by	Contact us at the phone num of the form if your application paid in installments.	