

DPZ Office Use only:

Case No Date Filed

(410) 313-2350

Zoning Permit Special Farm Uses

Property Information	1:					
Address/Street (Only):						
Tax Map Number:	Grid:		Parcel(s):		Lot(s):	
Total Size Farm:	Acres:					
Property is zoned: RC	RR	R-ED	R-20	R-12	R-SC	
Owner Information						
Owner Name:						
Mailing address:						
City:	St	ate:	Zip	Code:		
hone: Email:						
Value-Added Agricultu Value-Added Agricultu Value-Added Agricultu Sales Farm Stand (Less than Farm Stand (300 squar Pick-Your-Own Enterp	ural Processing ural Processing 300 square fee e feet or larger	with On-Si	te (Food Hub	Supported Agriculture (CSA) demy and Stable	
Representative Inform	nation:					
Name:	_	.,				
Phone: Association with Owner:	En	nail:				

Explanation of the Justification for the Requested Zoning Perrequested use as listed in Section 128.0.I or 128.0.O, as applicable as you can on this page and then continue on an attached sheet.)	
Signatures	
8	
	_ Date:
Owner: Owner (2):	
Owner:	_ Date:
Owner: Owner (2):	_ Date:
Owner:Owner (2):Additional owner signature? X the box to the left and attach a	_ Date: separate signature page.
Owner (2): Additional owner signature? X the box to the left and attach a Representative Signature:	_ Date: separate signature page. Date:
Owner (2): Additional owner signature? X the box to the left and attach a Representative Signature: FEE: \$25.00 (payable to Director of Finance) ***********************************	_ Date: separate signature page. Date:
Owner (2):	_ Date: separate signature page. Date:
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