

Town of Preston
PO Box 91
105 Backlanding Road
Preston, MD 21655

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Email: Prestonmanager@comcast.net

APPLICATION FOR NEW BUSINESS OCCUPANCY

Date: _____

Business Address: _____

Parcel Number: _____ Lot Size: _____

Zoning Type: _____

Property Owner Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

E-mail Address: _____

Business Tenant Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

E-mail Address: _____

Description of Proposed Business: _____

Proposed Date of Occupancy: _____

Signature of Applicant: _____ Printed Name: _____

Address if Different From Above

I will comply with all the codes of the Town of Preston and the State of Maryland which are applicable. I will perform no work on the above property without making the appropriate applications and acquiring the required permits. The Town Officials shall have the authority to enter areas covered by this application prior to the issuance of the Certification of Occupancy.

Official Use:

Former Tenant/Owner – Vacating Date & Use: _____

Comments: _____

Approvals:

Commissioners/Town Mgr: _____

P & Z: _____

Fire Marshall: _____

MDIA: _____

Yes Approved

Not Approved

Not Applicable