



For Official Use Only	
PC Case Number:	
Hearing Date:	
DRC Date:	
Amount Paid	\$
Date Paid:	

## FINAL PLAT APPLICATION (With Preliminary Plat\*\*)

\*\*This application is to be used only for final plats that are consistent with preliminary plats previously approved by the Planning Commission.

The completed application form, supporting plans and other documentation in **PDF form ONLY**, as well as your **citizen portal account name** must be sent to [drcdigital@cityoffrederickmd.gov](mailto:drcdigital@cityoffrederickmd.gov) on or before **3:00** PM on the application deadline date. Any files that are larger may be sent via a shared link. You will need to remove your email signature image before submitting. One digital plat must be submitted to [sparker@cityoffrederickmd.gov](mailto:sparker@cityoffrederickmd.gov). Please make sure all files submitted are legible. **Incomplete applications will not be accepted.**

\*Payment of fees by credit card is preferred via our [Citizen Access Portal](#). If paying by check, the check with a copy of your application form must be received in the front vestibule planning box at 140 W. Patrick Street on or before the submittal deadline. Questions, please contact Jess Murphy at [jmurphy@cityoffrederickmd.gov](mailto:jmurphy@cityoffrederickmd.gov).

<b>APPLICANT INFORMATION –</b>	
If the owner is not the applicant, a completed Agent Authorization must accompany this application. All correspondence will be sent to the applicant.	
Contact Name:	
Firm/Company:	
Address:	
Phone:	email:
<b>OWNER INFORMATION</b>	
Name:	
Firm/Company:	
Address:	
Phone:	email:
<b>DEVELOPER INFORMATION</b>	
Name:	
Firm/Company:	
Address:	
Phone:	email:
<b>PROJECT INFORMATION</b>	
Project Name:	
Project Location:	
Site Size (acres):	Project Size (acres or sq. ft.):
Existing Zoning:	Existing Land Use:
Existing # of Lots:	Proposed Number of Lots:

Project Description:

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**ADEQUATE PUBLIC FACILITIES**

Project Name Under Which Certificates (CAPF)/Exemption Were Approved: \_\_\_\_\_

- City case # \_\_\_\_\_
- Date that the Planning Commission approved the Plan: \_\_\_\_\_

For each facility indicate if a Provisional CAPF, Final CAPF, or Exemption was granted:

- Roads: \_\_\_\_\_
- Water Line: \_\_\_\_\_
- Sewer Line: \_\_\_\_\_
- Schools: \_\_\_\_\_
  - Recording Reference for School Mitigation Fee Agreement if applicable: \_\_\_\_\_

*\*Mitigation Fee must be paid prior to recordation\**

**FOREST CONSERVATION INFORMATION**

Final Forest Conservation Case Number: \_\_\_\_\_

Have Short Term and Long Term Agreements been executed: \_\_\_\_\_ (yes/no)

- Recording References for Short Term Agreement: \_\_\_\_\_
- Recording Reference for Long Term Agreement: \_\_\_\_\_

**ENGINEERING INFORMATION**

1. Improvement Plan Information:

a. Case Number \_\_\_\_\_

b. Title: \_\_\_\_\_

c. Section and Phase: \_\_\_\_\_

d. Name of Engineering Firm: \_\_\_\_\_

2. Date of Public Works Agreement: \_\_\_\_\_

I hereby attest that the information provided on and attached to this application is complete and correct.

\_\_\_\_\_  
Signature of Applicant/Agent

\_\_\_\_\_  
Date

**FEES**

Type of Review	Base Fee	Fee per lot & Acre	Number of Units or acres	Total Unit or Acre Fee	Total Fee
Final Subdivision Plats*	\$800.00	+\$10.00/lot			
Street Abandonment/ Dedication Plat	\$400.00				
Plat Recordation	\$75.00	+\$5.00 to County Clerk			

\*Frederick County Health Dept. \$100.00 made payable to Frederick County Health Dept. Preliminary Subdivisions (\$100 per plat) made payable to Frederick County Health Dept.

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**DETACH FORM FOR FINAL PLAT RECORDATION USE ONLY**

Case No:	
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**APPLICATION FOR FINAL PLAT RECORDATION**

*To be applied for only after receiving unconditional approval of FINAL PLAT*

Submit One Paper Copy of the Signed Mylar: \_\_\_\_\_

Submit One Original Signed Mylar & Three Signed Mylar Copies: \_\_\_\_\_

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**SUBMIT FEES:**

\$75 Processing Fee: \_\_\_\_\_ Check # *(Payable to City of Frederick)*

\$5 Court Fee: \_\_\_\_\_ Check # *(Payable to Clerk of the Circuit Court)*  
(per sheet)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Received by Planning Department / Date