



**Town of North East, Maryland**  
**Application for Commercial Occupation License / Use Permit**  
**Procedures and Instructions**

1. The following must be either mailed to the Office of Planning and Zoning, P.O. Box 528, North East, Maryland 21901-0528 OR dropped off at the North East Town Hall, 106 South Main Street:
  - ✓ Commercial Occupation License/Use Permit Application
  - ✓ Floor plan
  - ✓ Copy of State/County License, received, to date
  - ✓ \$35.00 fee paid by cash or check. The Planning Office does not accept credit card pmts.

Acceptance of Application by staff DOES NOT indicate application approval. Incomplete applications will cause delays in processing.

Please be advised: It is the responsibility of the applicant and the property owner to:

- 1) Call and confirm with Cecil County Office of Permits and Inspections, whether their department needs anything for the proposed use to take place. Phone number 410-996-5235. If so, you will need to go to the Cecil County Office of Permits and Inspections, 200 Chesapeake Boulevard, Elkton, Maryland 21921 to obtain necessary permits, prior to opening.
- 2) Call and confirm with Cecil County Licensing Department 410-996-5380 whether a State of Maryland Business License is required prior to opening the business. If so, you will need to go to the Cecil County Courthouse, 129 East Main Street, Elkton, Maryland 21921 - Licensing Department - to obtain a State of Maryland Business License.

**APPLICATION FOR COMMERCIAL OCCUPATION  
 LICENSE/USE PERMIT  
 TOWN OF NORTH EAST, MARYLAND 21901-0528  
 P.O. BOX 528/106 South Main Street  
 Phone (410)287-5801 x 107 / Fax (410) 287-8267**

Application Number: _____
Received by: _____
Date Received: _____

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**PART 1. APPLICANT INFORMATION**                      Owner \_\_\_\_\_ Representative \_\_\_\_\_

APPLICANT NAME – (PLEASE PRINT CLEARLY): \_\_\_\_\_

APPLICANT ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

**PART 2. PROPERTY INFORMATION**

PROPERTY OWNER NAME – (PLEASE PRINT CLEARLY): \_\_\_\_\_

PROPERTY OWNER ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

EXISTING USE OF PROPERTY: \_\_\_\_\_

**PART 3. NEW BUSINESS INFORMATION**

NAME OF NEW BUSINESS: \_\_\_\_\_

ADDRESS OF NEW BUSINESS PROPERTY: \_\_\_\_\_

TAX MAP # \_\_\_\_\_ PARCEL # \_\_\_\_\_ LOT # \_\_\_\_\_

SQUARE FOOTAGE TO BE UTILIZED FOR NEW BUSINESS: \_\_\_\_\_

**Proposed Use:**

- |                                              |                                                               |
|----------------------------------------------|---------------------------------------------------------------|
| <input type="checkbox"/> ASSEMBLY            | (CHURCH, THEATER, RESTAURANT, ETC.) OTHER:                    |
| <input type="checkbox"/> BUSINESS            | (PROFESSIONAL OFFICE SPACE, INSURANCE OFFICE, ETC.) OTHER:    |
| <input type="checkbox"/> EDUCATIONAL         | (SCHOOL, DAYCARE, ETC.) OTHER:                                |
| <input type="checkbox"/> FACTORY/ INDUSTRIAL | (WAREHOUSE, MANUFACTURING, CROSS DOCK, ETC.) OTHER:           |
| <input type="checkbox"/> HAZARDOUS           | (FUELING STATION, CHEMICAL STORAGE, ETC.) OTHER:              |
| <input type="checkbox"/> HEALTHCARE          | (HOSPITAL, NURSING HOME, CLINIC, ETC.) OTHER:                 |
| <input type="checkbox"/> HOSPITALITY         | (BED AND BREAKFAST, HOTEL, ETC.) OTHER:                       |
| <input type="checkbox"/> RETAIL              | (ANTIQUÉ SHOP, GIFT SHOP, CLOTHING STORE, FLORIST, ETC.)      |
| <input type="checkbox"/> TEMPORARY           | (ITINERANT, SEASONAL, ETC.)                                   |
| <input type="checkbox"/> FOOD                | (SPECIALTY, COFFEE SHOP, BAKERY, ICE CREAM, CAFÉ, RESTAURANT) |
| <input type="checkbox"/> OTHER               |                                                               |
| <input type="checkbox"/> HOME-BASED BUSINESS | ___ TYPE 1    ___ TYPE 2                                      |

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DESCRIPTION OF NEW BUSINESS (Please be specific; only uses that are outlined by the applicant  
in this section will be permitted.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROPOSED LAYOUT OF BUSINESS: (Please attach a floorplan)

DAYS OF OPERATION: \_\_\_\_\_

HOURS OF OPERATION: \_\_\_\_\_

IF YOU ARE PROPOSING A RESTAURANT, WHAT IS THE PROPOSED SEATING CAPACITY?: \_\_\_\_ N/A

IF YOU ARE PROPOSING A RESTURANT, WILL YOU SEEK AN ALCOHOLIC BEVERAGE LICENSE? \_\_\_\_ N/A

IS PARKING PROVIDED WITH THE PROPOSED USE? YES / NO  
(If not, indicate where patrons will park.) \_\_\_\_\_

HOW MANY PARKING SPACES HAVE BEEN DESIGNATED FOR YOUR BUSINESS?: \_\_\_\_\_

WILL SIGNS BE USED IN CONJUNCTION WITH THE NEW BUSINESS?: YES / NO

WILL GRAND OPENING SIGNS BE USED IN CONJUNCTION WITH THE NEW BUSINESS? YES / NO

WILL THERE BE ANY OUTDOOR STORAGE OR OUTDOOR ACTIVITY ASSOCIATED WITH YOUR  
BUSINESS?: YES / NO (If yes, please attach a description of proposed outdoor storage/  
activity.)

WILL THE PROPOSED USE REQUIRE COUNTY, STATE, OR FEDERAL PERMITS? YES / NO  
(If yes, please explain and give the status of each permit.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE OF PROPERTY OWNER: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

CURRENT ZONING DISTRICT: \_\_\_\_\_

IS PROPOSED USE PERMITTED?

- Yes, by right.
- Yes, by special exception
- Yes, as a continued, non-conforming use
- No

SECTION OF ORDINANCE THAT PERMITS THIS USE: \_\_\_\_\_

PLANNING COMMISSION APPROVAL REQUIRED FOR THIS USE? YES / NO

IF YES, WHEN WAS APPROVAL GRANTED? \_\_\_\_\_

BOARD OF APPEALS APPROVAL REQUIRED FOR THIS USE? YES / NO

IF YES, WHEN WAS APPROVAL GRANTED? \_\_\_\_\_

DO ANY OF THE FOLLOWING REGULATIONS APPLY?:

- Floodplain
- Critical Area
- parking requirements

Approval is applicable to the use outlined on this application and on the attached approval letter from the Town of North East. It shall be noted that the use shall not be converted or changed from what was submitted on original application without prior authorization from the Town of North East and the Cecil County Department of Permits and Inspections.

Sign Installation: No signs shall be installed to advertise this business without first obtaining an approved sign authorization from the Town of North East.

\_\_\_\_\_  
TOWN APPROVAL

\_\_\_\_\_  
DATE



## **Town of North East, Maryland DISCLOSURE**

The Town of North East sincerely thanks you and appreciates your vision and investment regarding this project.

As you move forward with the Town's Construction/Zoning Authorization or Commercial Occupation License process and subsequently submitting permit applications to Cecil County, please be advised that additional County, State and Federal agencies, and their applicable codes and regulations, may have review authority over this project. These agency requirements may apply depending on the scope and nature of the project and are separate from Towns permit and conditions of approval.

Upon Town approval the applicant shall apply for a Cecil County Building permit or Change of Use permit, whichever is applicable. The following reviews may be required upon submitting the applicable application to Cecil County:

### **Fire Marshal Review – Fire Suppression Systems / Fire Protection Systems:**

If your project includes new construction, significant renovation, or a change in use, fire suppression requirements may be required and the applicant/property owner may be required to provide engineered fire suppression system drawings. These drawings must be reviewed and approved by the Fire Marshal.

In the event the Fire Marshal requires a water service line over 1 inch in diameter, engineered plans shall be required. Please contact the North East Town Hall Planning Office for additional information as these plans shall require review by the Towns Engineer prior to the required pre-construction meeting.

For example, if your project involves a commercial build-out, change of occupancy, or expansion of an existing structure, sprinkler or fire alarm system upgrades may be required. Any required system modifications will require coordinated approvals prior to installation.

### **Cecil County Plumbing Code**

All plumbing work shall comply with all applicable Cecil County plumbing regulations and codes, including but not limited to new installations, restroom additions or modifications, commercial kitchen hookups, and water/sewer connections associated with this project.

### **Cecil County Electrical Code**

All electrical work shall comply with all applicable Cecil County electrical regulations and codes. This includes new service connections, panel upgrades, lighting, equipment power requirements, and any electrical modifications associated with this project.

### **Heating, Ventilation, and Air Conditioning (HVAC)**

All HVAC systems shall comply with all applicable Cecil County HVAC regulations and codes. Depending on the project, engineered HVAC designs may be required for new systems, system replacements, or major alterations associated with this project.

**Erosion and Sediment Control**

Projects involving ground disturbance may require review and approval of erosion and sediment control measures. For example, if your project includes land excavation, grading, clearing, demolition, or site preparation activities, you may be required to submit erosion and sediment control plans for review. Approval shall be required prior to commencing work.

**Stormwater Management**

Stormwater management requirements may apply based on the size, scope, and impervious surface impact of your project. This may include requirements for stormwater facilities, runoff mitigation, or compliance with State and County stormwater regulations. Projects increasing paved surfaces, rooftops, or overall site runoff may require engineered stormwater design and approval prior to commencing work.

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I acknowledge that the above referenced agencies and requirements may have review authority and additional requirements for this project.

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Property Owner Signature

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Date