

Town of Dagsboro
 Commercial Building Permit Application
 33134 Main Street, PO Box 420
 Dagsboro, DE 19939
 302-732-3777

Permit # _____

Applicant	Owner	Builder
Name	Name	Name
Mail Address	Mail Address	Mail Address
City/State/Zip	City/State/Zip	City/State/Zip
Phone/Fax	Phone/Fax	Phone/Fax

Lot: _____ Subdivision: _____ Site Address: _____

Total Area of New Construction in SQ FT: _____ Parcel #: _____

Total Lot Dimensions: Width: _____ Depth: _____ SQFT: _____

Principal Type Frame: Masonry Wood Structural Steel Reinforced Concrete Other

Type of Mechanical: Central Air Conditioning Elevator

APPLICANT MUST INCLUDE PLANS & SPECIFICATIONS

New Commercial/Industrial Commercial Addition or Remodel Tenant Fit-Out Other

Project Value (without lot): \$ _____

Description: _____

APPLICANT SIGNATURE _____

DATE _____

Permit Fee:	Total Cost of Construction X 1.25%	
Water Meter	Radio Read Meter	Meter Size _____ \$ _____
Water Impact Fee	\$3,000 per EDU	
Public Service Impact Fee	\$1,500 per EDU	
Fire Dept. Impact Fee	Total Project Cost X .25%	
Amb Service Impact Fee	Total Project Cost X .25%	

Total Due: \$ _____

Building Inspector: _____

Approved

Denied

Date Issued: _____ Permit # _____

Certificate of Occupancy Issue Date: _____