

Building/Zoning Document Request Form Town of Ocean City

Date of Request: _____

Applicant's Name: _____

Phone Number: _____

Applicant's Address: _____

Email Address: _____

Describe your request using dates, specific information sought, names, addresses, etc.:

You may fax your completed form to the permit office: 410-289-8705 or drop it by the permitting office at City Hall, 301 Baltimore Avenue, second floor

Form of Response:

- Visual Use of Scanned Document** – Dedicated Monitor Available - free
- CD of information Sought** - \$10.00 each (*Subject to MD. Sales tax*)
- Paper Copies** – \$.50 per page 11"x17"; \$.25 per page 8.5"x11" (*Subject to MD. Sales tax*)
- Email** – Email file size under 10MB per message; over 10MB, consider the cd

Method of Delivery

- Pick Up Cd or Paper Copies in Permit Office** (You will be notified by staff)
- Mail to address indicated above** (requires pre-payment of copies and postage)

Your request will be completed as soon as possible, normally, within 30 days. All requests are subject to the provisions of the Maryland Public Information Act.

Staff is not responsible for finding specific information in files or on plans.

No outside cd or thumb drives will be allowed to copy documents - for security reasons.

If the request requires more than two hours to research and compile, you will be charged for the employee's time, at their hourly rate, after the first two hours (30-minute minimum, at half hour intervals). For an extensive request, a 25% deposit will be required prior to researching.

Cell Phone photos of documents are allowable.

_____: Applicant's Signature