

1783 Friends Way  
Camden, DE 19934  
Phone (302)697-2299  
Fax (302)697-9115

# Application for Building Permit

ACCESSORY STRUCTURES  
Call Miss Utility before you dig: 1.800.282.8555

OFFICE USE ONLY:  
RECEIVED: \_\_\_\_\_  
ISSUED: \_\_\_\_\_  
AMOUNT: \_\_\_\_\_

Map# \_\_\_\_\_

Permit# \_\_\_\_\_

Address \_\_\_\_\_ Lot No. \_\_\_\_\_ Suite \_\_\_\_\_

Applicant: \_\_\_\_\_ Phone No. \_\_\_\_\_

Owner: \_\_\_\_\_ Phone No. \_\_\_\_\_

(Address) \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone No. \_\_\_\_\_

(Address) \_\_\_\_\_

License No. \_\_\_\_\_

Applicant for Permit shall be aware the subject property may be impacted by private Deed Restrictions, Bylaws and/or Covenants that are neither under the jurisdiction of nor enforceable by the Town of Camden. However, this does not relieve the property owner from the requirement to verify, confirm, and/or maintain compliance with recorded Deed Restrictions, Bylaws, and/or Covenants (which are enforceable through the Civil Court System) nor shall Camden's approval of this permit be construed to mean that the property is in compliance with applicable Restrictions.

**NOTE: To avoid a cease and desist order, please ensure all contractors on site are licensed by the Town of Camden.**

**INSPECTIONS: 48 hour notification is required for all inspections, NO EXCEPTIONS.**

I, the undersigned, own or act as agent for the owner of the above-referenced property.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## DESCRIPTION OF PROPOSED CONSTRUCTION:

Total Cost of Improvement \$ \_\_\_\_\_

- Shed  Stick built \_\_\_\_\_ square feet  Pre-Fabricated \_\_\_\_\_ square feet  
 Anchors \_\_\_\_\_  Hurricane Straps \_\_\_\_\_  Doors \_\_\_\_\_  Concrete \_\_\_\_\_  
 Wood \_\_\_\_\_  Siding \_\_\_\_\_
- Deck \_\_\_\_\_ square feet  Wood  Composite  Other \_\_\_\_\_  
 Fence \_\_\_\_\_ linear feet  Wood  Vinyl  Chain Link
- Swimming Pool \_\_\_\_\_ square feet  Above-ground  In-ground  Temporary Seasonal  
 Liner \_\_\_\_\_  Filtration System \_\_\_\_\_  Electrical System \_\_\_\_\_
- Roof \_\_\_\_\_  Windows \_\_\_\_\_  Siding \_\_\_\_\_
- Other \_\_\_\_\_

## FOR OFFICE USE ONLY:

APPROVED: \_\_\_\_\_ REASON FOR DENIAL: \_\_\_\_\_

DENIED: \_\_\_\_\_