



City of Cumberland

Department of Community Development ▪ 57 N. Liberty Street ▪ Cumberland, MD 21502 ▪ www.cumberlandmd.gov
301-722-2000., ext. 5600 ▪ Fax 301-759-6432 ▪ complaints@cumberlandmd.gov

OP # _____

OCCUPANCY PERMIT APPLICATION - Residential

New Occupancy Conversion to: increase decrease number of units

Project Location _____ Tax ID # _____ - _____
This # is found on your deed or by visiting www.date.stat.md.us / Property Search
If several property ID #s are involved please reference all accounts

APPLICANT: Name _____ Phone _____
Address _____ Fax _____

Previous Approved Use of Building/Space/Lot (if conversion) _____

Proposed Use _____

Attach a Scaled Floor Plan with scale legend (sample available)

- All Room Sizes
- Label Previous and Proposed Room Use
- Window and Floor Locations and Sizes (clear opening)
- Distances to Main Exit Area
- Outside Dimensions of Structure
- Number of Stories
- Existing Handicap Accommodations

Also label if you have:

- Exit Signs
- Emergency Lights
- Fire Extinguishers
- Sprinkler System

Attach a Scaled Site Plan showing all the following if applicable: (sample available)

- Off-Street Parking Area including ingress /egress, parking layout, and note parallel/perpendicular parking spaces width and length
- Building Footprint
- Lighting

Complete Building Permit application if any construction will take place on the property. (\$25 fee plus \$4/thousand)*

Complete Plumbing and/or Electrical Permit application(s) if applicable. (no fee)

A non-refundable Residential Occupancy Permit Filing Fee of \$15.00 is payable upon application.

A final walk through is required after all construction work is completed and the residence(s) is(are) in move-in condition. A 24-48 hour notice is required for scheduling this appointment.

Schedule an inspection of the final project with a City Code Compliance Officer, 301-759-6455 or 301-759-6659.

Do not begin work until an approval is received from the City of Cumberland.
A signed, stamped form is required for application to be considered approved.
This will be sent to you upon approval by the department manager or designated representative.

Applicant's Signature: _____ Date: _____