

**City of College Park Advisory Planning Commission  
 4500 Knox Road • College Park • Maryland 20740-3390  
 Telephone: (240) 487-3538 • Facsimile: (301) 887-0558**

**FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE**

Application No: \_\_\_\_\_  
 APC Review:  Planning Director Review   
 Informational Mailing Sent: \_\_\_\_\_  
 Acceptance Date: \_\_\_\_\_  
 Filing Fee: \_\_\_\_\_  
 No. of Signs Posted/Date: \_\_\_\_\_

Case Reviewer: \_\_\_\_\_  
 APC Hearing Date: \_\_\_\_\_  
 City Council Meeting Date: \_\_\_\_\_  
 City Council Hearing Date (if appealed) \_\_\_\_\_  
 Final Action/Date: \_\_\_\_\_

**APPLICATION TYPE**

- |  |   |
|--|---|
| <input type="checkbox"/> Revision of Certified Nonconforming Use   | <input type="checkbox"/> Departure from Design and/or Landscaping Standards |
| <input type="checkbox"/> Certification of Nonconforming Use  | <input type="checkbox"/> Departure from Parking and/or Loading Spaces       |
| <input type="checkbox"/> Minor Change to Special Exception Site Plan   | <input type="checkbox"/> Departure from Sign Design Standards               |
| <input type="checkbox"/> Specific Change to Special Exception Site Plan  |   |
| <input type="checkbox"/> Gas Station <input type="checkbox"/> Drive-in or Fast Food <input type="checkbox"/> Other _____ |   |

**PROPERTY DESCRIPTION**

|                                  |                               |                        |
|----------------------------------|-------------------------------|------------------------|
| Property Address, if applicable: |                               |                        |
| Geographic Location of Property: |                               |                        |
| Proposed Use of Property:        |                               |                        |
| Total Area/SF:                   | City Council District:        | No. of dwelling units: |
| Current Zone:                    | Existing Lots/Blocks/Parcels: |                        |

Please list and provide copies of resolutions of previously approved applications affecting the subject property.

|   |  |
|---|--|
| Applicant Name, Address, Phone & E-mail | Owner Name, Address, Phone & E-mail: (if same as applicant, please indicate) |
|---|--|

**SIGNATURE**

Signature (Sign where appropriate; attach additional signatures if necessary)

\_\_\_\_\_  
*Owner's Signature* *Date*

\_\_\_\_\_  
*Contract Purchaser's Signature (if applicable)* *Date*