APPENDIX D
REQUEST FOR AMENDMENT TO THE DORCHESTER COUNTY WATER AND SEWERAGE PLAN

APPENDIX D

Mail or Present Completed Application to:

REQUEST FOR AMENDMENT TO THE DORCHESTER COUNTY WATER AND SEWERAGE PLAN

	P.O. Box 007 Cambridge, MD 21613	
Α.	Type of Amendment Map Te	ĸt
	1. Map Amendment	
	a. Sewer: From	
	2. Text Amendment: Section and page number(s) to be changed:	
В.	Character of Amendment: AdditionDeletion	Change
c.	Property Identification:	*
	1. Tax Map/Block/Parcel number / /	
	2. Election District Zoning District	T '
	3. Critical Areas Yes Designation	
D.	Description and Purpose of Change	
	1. Name of Project or Subdivision	
	2. Location, including Road name	
	3. Approximate population served	
	4. Other	
E.	Estimated Design and Construction Costs	451
F.	Estimated Design/Construction Dates	b go

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Instructions:

Complete all applicable sections of this form.

A copy of the proposed revised map and/or text must be attached 2. to each application.

Sixteen (16) sets of this application, including attachments, 3. must be submitted to the Office of Planning and Zoning before it is processed.

Attach the application fee (\$125.00) to the application. 4.

Applications are accepted biannually and due no later than May 15th and November 15th.

For map amendments, the following categories apply: 6.

W1,	S1	Service	existin	g or	planned	d within	two yea	ars	
W2,	S2	Service	planned	with	in two	to five	years		
W3,	S3	Service	planned	with	in five	e to ten	years	la 4	15
No	designate	d service	e area	No s	ervice	planned	within	ten	years