

Town of Dagsboro
 Commercial Building Permit Application
 33134 Main Street, P.O. Box 420
 Dagsboro, DE 19939
 302-732-3777

Permit #

Applicant	Owner	Builder
Name	Name	Name
Mail Address	Mail Address	Mail Address
City/State/Zip	City/State/Zip	City/State/Zip
Phone/Fax	Phone/Fax	Phone/Fax

Lot: _____ Subdivision: _____ Site Address: _____

Total Area of New Construction in SQ FT: _____ Tax Map Parcel#: _____

Total Lot Dimensions: Width: _____ Depth: _____ SQFT: _____

Principal Type Frame: Masonry Wood Structural Steel Reinforced Concrete Other

Type of Mechanical: Central Air Conditioning Elevator

APPLICANT MUST INCLUDE PLANS & SPECIFICATIONS

3 Hard Copies & 1 Electronic Copy (pdf)

New Commercial/Industrial Commercial Addition or Remodel Tenant Fit-Out Other

Project Value (without lot): \$ _____

Description: _____

 APPLICANT SIGNATURE

 DATE

A: NEW COMMERCIAL CONSTRUCTION:

Permit Fee:	Sq Ft Construction Cost per Current ICC Building Valuation Data X 1%	\$ _____
Water Meter Fee	Radio Read Meter	Meter Size _____ \$ _____
	Fire Suppression System	Meter Size _____ \$ _____
Water Impact Fee	\$3,000 per EDU	# of EDU's _____ \$ _____
New Service Connection Fee	\$2,600 per EDU (if done by Town of Dagsboro)	# of EDU's _____ \$ _____
Capital Improvement Impact Fee	\$2,500 per EDU	# of EDU's _____ \$ _____
Fire Dept. Impact Fee	Total Project Cost X .25%	
Amb Service Impact Fee	Total Project Cost X .25%	

Total Due \$ _____

B: ALL OTHERS

Total Cost of Improvements: _____ X 1% = \$ _____
 (\$50 Minimum Fee)

Total Due: \$ _____

Building Inspector: _____

Approved

Denied

Date Issued: _____ Permit # _____

Certificate of Occupancy Issue Date: _____