

Zoning Certificate of Use

Transfer

Application

Current Certificate of Use No. _____ Date: _____

Name/Ownership Change:

Trade Name From: _____

Trade Name To: _____

Owner/Operator From: _____

Owner/Operator To: _____

Mailing Address for Certificate _____

Email address: _____

☐ *Please check here if you would like the Certificate mailed otherwise all Certificates will be emailed to the email address provided.*

Business Location Address:

Business Phone: _____ Home Phone: _____

Type of Business: _____

Anne Arundel County Property Tax Account No.: _____ - _____ - _____

Area Usage: _____

Zoning Certificate of Use issued is based upon the above

If you have any questions concerning the above, please call or write:

Anne Arundel County

Office of Planning and Zoning

Zoning Enforcement Division

2664 Riva Road, P.O. Box 6675

Annapolis, MD 21401

410-222-7446

***Note: Zoning Enforcement may require additional information including site plans.**