

Pollinator-Friendly Solar Designation Initial Application

Date Submitted:

Facility Name: Proposed or Existing

Facility Address (include County):

Tax Map Information (Map, grid, parcel, etc):

Facility Acreage:

Contact Information (name, phone number, email address):

Please provide a brief description of the facility below:

*Please email a copy of this form to pprp@maryland.gov, with a copy of a pollinator habitat management plan for approval by DNR. DNR may request additional information related to the application; the applicant shall submit the requested information within 30 days of the request. Failure to submit the additional information within 30 days of the request shall result in termination of the application.