

ZONING USE PERMIT

PLAN FOR CLASS "A" ASSISTED LIVING FACILITY OWNED

By AND LOCATED AT:

MARIE G. FERNELIS

8411 MAYMEADOW COURT

BALTIMORE, MD 21244

(410) 486-3793

PLAN DATE PROPOSED: 11/30/00

LOT 15 BLOCK A MAYFIELD

2ND ELECT. DISTRICT

ZONING MAP N/W-6H ZONE DR: 5.5

LOT SIZE 10,269 sq. ft. OR 0.24 ACRES

PROPOSED 5 ALF BEDS

PARKING PROPOSED FOR 4 CARS: AS SHOWN ON THE PLAN

DENSITY CALCULATION: DR 5.5 - 5 RESIDENTS/BEDS = 10,000 sq. ft
EXISTING FLOOR: 1ST FLOOR AND BASEMENT

ROOMS: 967.63 sq. ft (BED ROOMS + KITCHEN + BATH ROOMS + L/D ROOMS)

BASEMENT: 1040 sq. ft (RECREATION ROOM + LAUNDRY ROOM + HEATER/FURN.)

"This building has not been originally constructed to accommodate elderly housing or an assisted living facility. No reconstruction, relocation, (exterior) changes or additions (of 25% or more in ground floor area) to the exterior of the building (beyond the enclosure of a porch or the addition of an exterior stairway) have occurred within five years of the date of this permit application".

M.G.F.

I, MARIE G. FERNELIS, UNDERSIGNED AS SOLE RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION ON THIS PLAN, BE IT EXISTING OR PROPOSED

Marie G. Fernelis

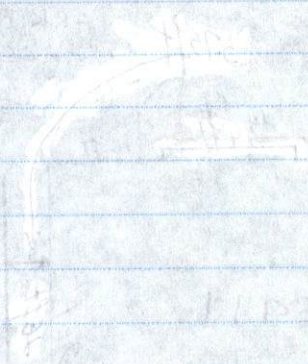
11/30/00

ABC

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61.3
38.7

BALTIMORE COUNTY, MARYLAND
OFFICE OF BUDGET & FINANCE
MISCELLANEOUS RECEIPT

No.

85622

DATE 11/30/00 ACCOUNT 20016150

AMOUNT \$ 40.00

RECEIVED FROM: JAMES FRANCOIS

FOR: ALF APPLICATION

DISTRIBUTION

WHITE - CASHIER

PINK - AGENCY

YELLOW - CUSTOMER

PAID RECEIPT

PAYMENT	ACTUAL	TIME
11/30/2000	11/30/2000	14:02:22
REC M503	CASHIER LWIL LDM	DRWNR 3
Dept 5	528 ZONING VERIFICATION	
Receipt # 154470		OFLN
CR NO. 085622		

Receipt Tot 40.00
40.00 CK .00 CA
Baltimore County, Maryland

CASHIER'S VALIDATION

INTER-OFFICE CORRESPONDENCE
 RECOMMENDATION FORM
 410 887 3391

TO: Director, Office of Planning and Zoning
 Attention: Ervin McDaniel
 County Courts Building, Room 406
 401 Bosley Avenue
 Towson, MD 21204

ZADM ALF # _____
 Permit No. (if required) B _____

FROM: Arnold Jablon, Director, Zoning Administration & Development Management

RE: Assisted Living Facility (Class "A")

Pursuant to Section 432.5.B (Baltimore County Zoning Regulations) effective February 25, 1994, this office is requesting recommendations and comments from the Office of Planning and Zoning prior to this office's approval of a building/use permit.

MINIMUM APPLICANT SUPPLIED INFORMATION:

Print Name of Applicant: MARIE G. FERNELIS Address: 8411 MAY MEADOW COURT BALT. MD 21244 Telephone Number: (410) 486-3793
 Lot Address: 8411 MAY MEADOW COURT Election District: 2 Councilmanic District: 2 Square Feet: 10,269 sq. ft.
 Lot Location: NE SW side/corner of MAY MEADOW COURT, 540 feet from NE SW corner of COURTLEIGH DRIVE
 (street) (street)
 Land Owner: MARIE G. FERNELIS Tax Account Number: 02-13-855550
 Address: 8411 MAY MEADOW COURT Telephone Number: (410) 486-3793

CHECKLIST OF MATERIALS- (to be submitted by applicant for required *compatibility* and/or *appearance* review by the Office of Planning and Zoning)

TO BE FILLED IN BY THE OFFICE OF ZONING ADMINISTRATION AND DEVELOPMENT MANAGEMENT ONLY!

	PROVIDED?		Accepted for filing by Date: <u>11/30/00</u> <i>CTR</i>
	YES	NO	
X 1. This Recommendation Form (3 copies)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Permit Application (If available)	<input type="checkbox"/>	<input type="checkbox"/>	
X 3. Site Plan Property (3 copies): including lot size and square feet of buildings, parking and open space - minimum 500 square	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
✓ Topo Map (2 copies): available in Room 206, County Office Building - (please label site clearly)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
✓ Statement as to whether or not building has been enlarged by 25% or more in the last five (5) years	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
✓ 4. Building Elevation Drawings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
X 5. Photographs (please label all photos clearly) LABEL ON BACK Adjoining Buildings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Surrounding Neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	
6. Current Zoning Classification: <u>DR 5.5</u>	<input type="checkbox"/>	<input type="checkbox"/>	

TO BE FILLED IN BY THE OFFICE OF PLANNING AND ZONING ONLY!

RECOMMENDATIONS / COMMENTS:

Approval Disapproval Approval conditioned on required modifications of the application to conform with the following recommendations:

Signed by: _____
 for the Director, Office of Planning and Zoning

Date: _____