

USE PERMIT



IT IS ORDERED by the Director of the Baltimore County Department of Permits and Development Management, this 27TH of JANUARY, 2006, that 3713 SONARA ROAD (street address) should be and the same is hereby granted

permission to operate an ASSISTED LIVING FACILITY I
FOUR BEDS ONLY.

Permit No. _____

Director _____

PLNG. APPR'D: DONNELL ZEIGLER
REV 06/00

Planner's Initials JCM

mailed 1.27.06

BALTIMORE COUNTY, MARYLAND
OFFICE OF BUDGET & FINANCE
MISCELLANEOUS RECEIPT

No. 2844

DATE 1.12.06 ACCOUNT 601-006-6150

AMOUNT \$ 50.00

RECEIVED FROM: KABIR ARIORI

FOR: Ass. LUG.

DISTRIBUTION

WHITE - CASHIER PINK - AGENCY YELLOW - CUSTOMER

DATE RECEIPT
TIME RECEIPT

BUSINESS	ACTUAL	TIME	DRW
1/12/2006	1/12/2006	09:53:54	2

REG MSD2 MAIL JEVA JER
>>RECEIPT # 449402 1/12/2006 OFLN

Dept 5 528 ZONING VERIFICATION
CR NO. 002844

Recpt Tot \$50.00
\$50.00 CK \$1.00 CA
Baltimore County, Maryland

CASHIER'S VALIDATION

1/27/06

INTER-OFFICE CORRESPONDENCE
RECOMMENDATION FORM

TO: Director, Office of Planning & Community Conservation
Attention: ALF REVIEWER
County Courts Building, Room 408
401 Bosley Avenue
Towson, MD 21204
M.S. 3402

PDM ALF # _____

Permit No. (if required) B _____

FROM: Timothy M. Kotroco
Department of Permits & Development Management

RE: Assisted Living Facility I or II

Post-It [®] Fax Note	7871	Date	# of pages
To	Joe Merry	From	Danell Zeigler
Co./Dept.	Zoning	Co.	Planning
Phone #		Phone #	
Fax #	5708	Fax #	5862

This office is requesting recommendations and comments from the Office of Planning building/use permit.

MINIMUM APPLICANT SUPPLIED INFORMATION:

Print Name of Applicant: KABIR K. AROJI & OLAIDE ANOLAJA-GRIFFIN Address: _____ Telephone Number: _____
 Lot Address: 3713 SONARA ROAD Election District 2 Councilmanic District 4 Square Feet of Lot 15,835[±]
 Lot Location: N/S W/side/corner of SONARA Rd. (street) 50ft[±] feet from N/E S W corner of SAMOSSET Rd. (street)
 Land Owner: KABIR K. AROJI ET AL Tax Account Number 02-05340040
 Address: 3713 SONARA RD. PANDOLPHSTOWN MD 21133 Telephone Number (410) - 655-2933

CHECKLIST OF MATERIALS- (to be submitted by applicant for required competency and/or appearance review by the Office of Planning and Community Conservation)

TO BE FILLED IN BY ZONING REVIEW, DEPARTMENT OF PERMITS AND DEVELOPMENT MANAGEMENT ONLY!

	PROVIDED?		Accepted for filing by <u>DM</u> Date: <u>1-12-06</u>
	YES	NO	
1. This Recommendation Form (3 copies)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Permit Application (if available)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
3. Site Plan: Property (3 copies): including lot size and square feet of buildings, parking and open space - 10% lot area 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 checked="" type="checkbox"/>	
4. Building Elevation Drawings (these may be waived if note 5.A. from the Zoning Use Permit Checklist can be stated on the plans)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Photographs (please label all photos clearly) Adjoining Buildings, the Proposed Building, and Surrounding Neighborhood	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6. Current Zoning Classification: <u>DR3.5</u>			

TO BE FILLED IN BY THE OFFICE OF PLANNING ONLY!

RECOMMENDATIONS / COMMENTS:



Approval



Disapproval



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

Signed by: Danell Zeigler
for the Director, Office of Planning and Community Conservation

Date: 1/25/06

ZONING USE PERMIT
 PLAN FOR ASSISTED-LIVING FACILITY I OR II

3713 SONARA ROAD
 RANDALLSTOWN MD 21133
 2ND ELECTION DISTRICT
 OWNER: KABIR ARIORI
 ADD. #3713 SONARA ROAD
 RANDALLSTOWN MD. 21133
 DATE
 PHONE: 410-655-2933

LOT SIZE: 15,835.8502
 ZONING MAP N.E. 5F
 ZONE DR 3.5

PARKING: 2 PARKING SPACES

EXISTING FLOOR AREAS SQ. FT.
 1ST FLOOR = 1188.81 SQ.FT.

BASEMENT FOR STORAGE AND MECHANICAL
 EQUIPMENT = 843 SQ. FT.

EXISTING GARAGE = NON


OPEN SPACE: .10 X LOT AREA (15,835.85 SQ.FT.) = 1583.6 SQ.
 FT.

DENSITY/AREA CALCULATION FOR ^{FOUR} BEDS
 $2 \times 1188.81 = 2377.62 < 15,835.8502$ (LOT SIZE)

THIS BUILDING HAS NOT BEEN ORIGINALLY
 CONSTRUCTED TO ACCOMMODATE ELDERLY HOUSING
 OR AN ASSISTED LIVING FACILITY. NO CONSTRUCTION,
 RELOCATION, EXTERIOR CHANGES OR ADDITIONS OF 25
 % OR MORE IN GROUND FLOOR AREA AS IT HAS EXISTED
 FOR 5 YEARS BEFORE THE DATE OF THIS APPLICATION
 HAS OCCURRED TO THE EXTERIOR OF THE BUILDING
 THE DATE OF THIS APPLICATION HAS OCCURRED TO THE
 EXTERIOR OF THE BUILDING, NO ADDITIONS ARE
 PROPOSED.

SIGNS WILL COMPLY WITH SECTION 450 B.C.Z.R.

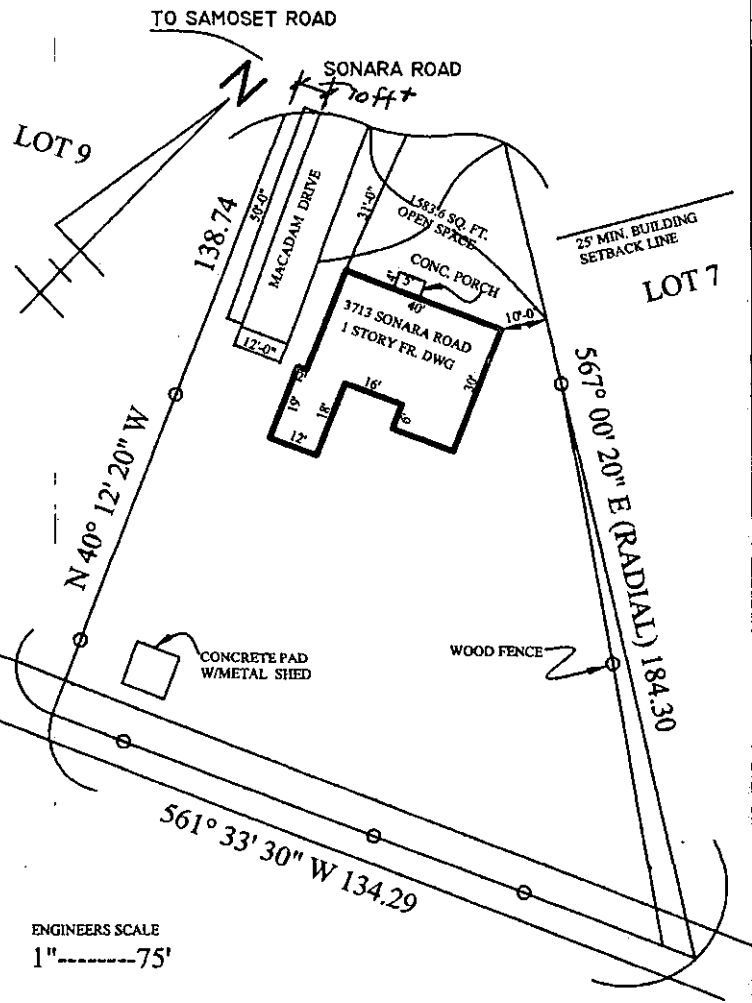
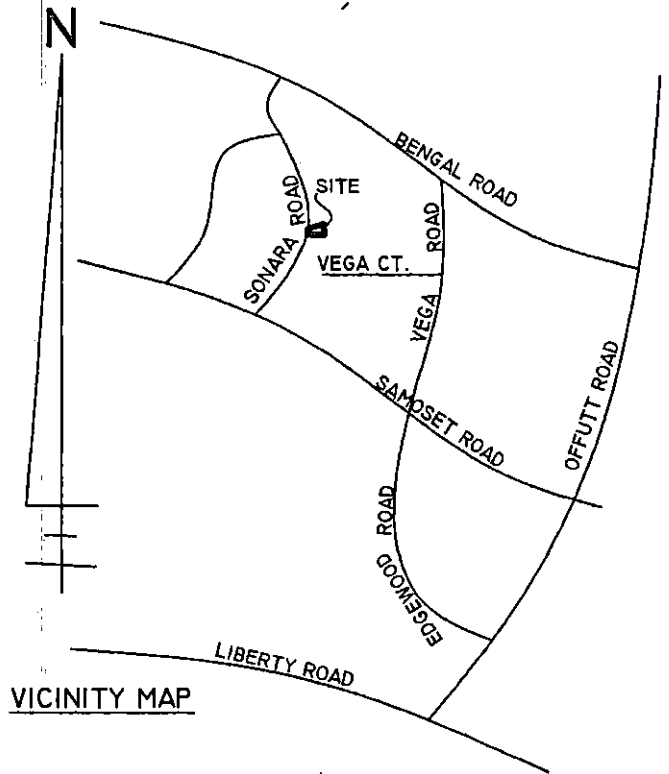
THE UNDERSIGNED (STATE IF OWNERS OR APPLICANTS)
 ARE RESPONSIBLE FOR THE ACCURACY OF THE
 INFORMATION ON THIS PLAN.

 1-12-06
 SIGNATURE DATE

KABIR K. ARIORI
 PRINTED NAME

SIGNATURE DATE

PRINTED NAME



ENGINEERS SCALE
 1" = 75'

**INTER-OFFICE CORRESPONDENCE
RECOMMENDATION FORM**

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401 Bosley Avenue
Towson, MD 21204
M.S. 3402

PDM ALF # _____

Permit No. (if required) B _____

FROM: Timothy M. Kotroco
Department of Permits & Development Management

RE: Assisted Living Facility I or II

This office is requesting recommendations and comments from the Office of Planning and Community Conservation prior to this office's approval of a building/use permit.

MINIMUM APPLICANT SUPPLIED INFORMATION:

KABIR K. AROKI \$ OLAIDE AWOLOJA - GRIFFIN
Print Name of Applicant Address Telephone Number

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Lot Location: N E S W side/corner of SONARA Rd. 500ft[±] feet from N E S W corner of SAMOSSET Rd.
(street) (street)

Land Owner: KABIR K. AROKI ET AL Tax Account Number 0205340040

Address: 3713 SONARA RD. RANDOLPHSTOWN MD 21133 Telephone Number (410) - 655-2933

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

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TO BE FILLED IN BY THE OFFICE OF PLANNING 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 Community Conservation

Date: _____

NW ~~8~~ I 2nd

077A1

3713 Nauset Place?

Randall Ridge 26/140

Lot 1 ?