



BALTIMORE COUNTY
M A R Y L A N D

JAMES T. SMITH, JR.
County Executive

TIMOTHY M. KOTROCO, *Director*
Department of Permits and
Development Management

June 24, 2008

Lovida Mallory
4900 Patterson Ave
Baltimore, MD 21207

RE: Assisted Living Facility
4900 Patterson Ave

Dear Ms. Mallory,

Please find enclosed a copy of the Planning Office's approval for your proposed Assisted Living Facility at the above address. You must now obtain a zoning use permit from the Zoning Review Office at 111 W. Chesapeake Avenue in Towson, Room 111. The office is open Monday through Friday, 8:00 AM to 4:30 PM. The fee for the use permit is \$50.00. Should you have any questions, please contact the office at 410-887-3391.

Sincerely,

Craig McGraw
Planner II
Zoning Review Office

INTER-OFFICE CORRESPONDENCE
RECOMMENDATION FORM

TO: Director, Office of Planning & Community Conservation
Attention: ALF REVIEWER
County Courts Building, Room 406
401 Bosley Avenue
Towson, MD 21204
M.S. 3402

ALF Address 4900 PATTERSON AVE

Post-It® Fax Note	7671	Date	6-24-08	# of pages	1
To	C.M. Graw	From	J. German		
Co./Dept.	Zoning	Co.	Planning		
Phone #	x3391	Phone #	x3400		
Fax #	x3048	Fax #	x5862		

FROM: Timothy M. Kotroco
Department of Permits & Development Management
M.S. 1105

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:

Print Name of Applicant: LOUIDA MALLORY Address: 4900 PATTERSON AVE Telephone Number: 410-484-6231
 Lot Address: 4900 PATTERSON AVE Election District: 3 Councilmanic District: 4 Square Feet of Lot: 8250
 Lot Location: N E W side/corner of PATTERSON & VERNON feet from N E S W corner of MT VERNON
(street) (street)
 Land Owner: COUNTRY GOLD LLC Tax Account Number: _____
 Address: 2713 ROBINDALE DR ROCKVILLE 20857 Telephone Number (202): 210-0633

CHECKLIST OF MATERIALS- (to be submitted by applicant for required compatibility 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>CM</u> Date: <u>6-22-08</u>
	YES	NO	
1. This Recommendation Form (3 copies)	/	—	
2. Permit Application (if available)	/	—	
3. Site Plan: Property (3 copies): including lot size and square feet of buildings, parking and open space - 10% lot area Statement of Compliance with Checklist Note 5.A	/	—	
4. Building Elevation Drawings (these may be waived if note 5.A. from the Zoning Use Permit Checklist can be stated on the plans)	—	—	
5. Photographs (please label all photos clearly) Adjoining Buildings, the Proposed Building, and Surrounding Neighborhood	/	—	
6. Current Zoning Classification: <u>FR DR 5.5</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: [Signature]
for the Director, Office of Planning and Community Conservation

RECEIVED
JUN 19 2008
OFFICE OF PLANNING

Date: 6/24/08
Revised 8/10/06