

# USE PERMIT



IT IS ORDERED by the Director of the Baltimore County Department of Permits and Development Management, this 14<sup>th</sup> of OCTOBER, 2010, that 4 GREENBRUSH CT., 21244 should be and the same is hereby granted  
(street address)

permission to operate a ASSISTED LIVING FACILITY I  
(NO MORE THAN 4 BEDS)

59574  
Permit No.

*Janet Kotroco*  
Director

Planner's Initials D.T.

9/24/10

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 4 Green Brush Ct.

Post-It* Fax Note	7671	Date	9.28.10	# of pages	1
To	Donna Thompson	From	J. Nugent		
Co./Dept.	POM-Zoning	Co.	Planning		
Phone #	X3391	Phone #	X3480		
Fax #	X3048	Fax #	X5862		

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

RE: Assisted Living Facility I or II.

X 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: EDNA ISAAC Address: 4 GREEN BRUSH CT. Telephone Number: 410-922-0959  
 Lot Address: 4 GREEN BRUSH CT. Election District: 2 Councilmanic District: 4 Square Feet of Lot: 2857  
 Lot Location: N E S W side/corner of W/S GREEN BRUSH CT 100 feet from N E S W corner of SOUTH GREEN RD  
 (street) (street)  
 Land Owner: MUNA SAFIE HARRIS Tax Account Number: 22-00-09465  
 Address: 4656 LAKE VISTA CIRCLE Telephone Number ( ) 445-982-0025

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 D.T. Date: <u>9/2/10</u> RECEIPT: 59514
	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>D.R. 55</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:

RECEIVED

SEP 29 2010

OFFICE OF PLANNING

Signed by: [Signature]  
for the Director, Office of Planning and Community Conservation

Date: 9/24/10

9/24/10

INTER-OFFICE CORRESPONDENCE  
RECOMMENDATION FORM

Director, Office of Planning & Community Conservation  
Attention: ALF REVIEWER  
County Courts Building, Room 406  
401 Bosley Avenue  
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ALF Address 4 Green Brush Ct.

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Department of Permits & Development Management  
M.S. 1105

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Co./Dept.	POM-Zoning	Co.	Planning		
Phone #	X3391	Phone #	X3450		
Fax #	X3048	Fax #	X5802		

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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: EDNA ISAAC Address: 4 GREEN BRUSH CT. Telephone Number: 410-922-0959  
 Lot Address: 4 GREEN BRUSH CT. Election District: 2 Councilmanic District: 4 Square Feet of Lot: 7857  
 Lot Location: N E S W side/corner of W/S GREEN BRUSH CT 100 feet from N E S W corner of SEVENBORN RD  
 (street) (street)  
 Land Owner: MUM SAFIE HARRIS Tax Account Number: 22-00-09465  
 Address: 4656 LAKE VISTA CIRCLE Telephone Number ( ) 445-982-0025

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

	PROVIDED?		Accepted for filing by D.T. Date: <u>9/2/10</u> Receipt: <u>59574</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	✓	—	
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Approval  Disapproval  Approval conditioned on required modifications of the application to conform with the following recommendations:

RECEIVED

SEP - 2010

OFFICE OF PLANNING

Signed by: [Signature]  
for the Director, Office of Planning and Community Conservation

Date: 9/29/10

**INTER-OFFICE CORRESPONDENCE  
RECOMMENDATION FORM**

**J:** 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 4 Green Brush Ct.  
Permit No. (if required) B \_\_\_\_\_

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Department of Permits & Development Management  
M.S. 1105

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**MINIMUM APPLICANT SUPPLIED INFORMATION:**

Print Name of Applicant EDNA ISAAC Address 4 GREEN BRUSH CT. Telephone Number 410-922-0959  
Lot Address 4 GREEN BRUSH CT. Election District 2 Councilmanic District 4 Square Feet of Lot 2357  
Lot Location: N E S W/side/corner of W/S GREENBRUSH ST 100 feet from N E S W corner of SOUTHGREEN RD  
(street) (street)  
Land Owner: MUNA SAFIE HARRIS Tax Account Number 22-00-09465  
Address: 4656 LAKE VISTA CIRCLE Telephone Number ( 1 ) 443-982-0075

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>D.T.</u> Date: <u>9/3/10</u>
	YES	NO	
1) This Recommendation Form (3 copies)	✓	—	
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3) Site Plan: Property (3 copies): including lot size and square feet of buildings, parking and open space - 10% lot area	✓	—	
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6. Current Zoning Classification: <u>D.R. 55</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: \_\_\_\_\_  
for the Director, Office of Planning and Community Conservation

Date: \_\_\_\_\_

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RECOMMENDATION FORM**

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EDNA ISAAC 4 GREEN BRUSH CT. 410-922-0959  
Print Name of Applicant Address Telephone Number

4 GREEN BRUSH CT. Election District 2 Councilmanic District 4 Square Feet of Lot 7357  
Lot Address

Lot Location: N E S W/side/corner of W/S GREEN BRUSH ST 100 feet from N E SW corner of SOUTH GREEN RD  
(street) (street)

Land Owner: MUNA SAFIE HARRIS Tax Account Number 22-00-09465

Address: 4656 LAKE VISTA CIRCLE Telephone Number ( 1 ) 443-982-0075

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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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>D.R. 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: \_\_\_\_\_  
for the Director, Office of Planning and Community Conservation

Date: \_\_\_\_\_

Zoning use permit  
 Plan for assisted living facility (I or II)

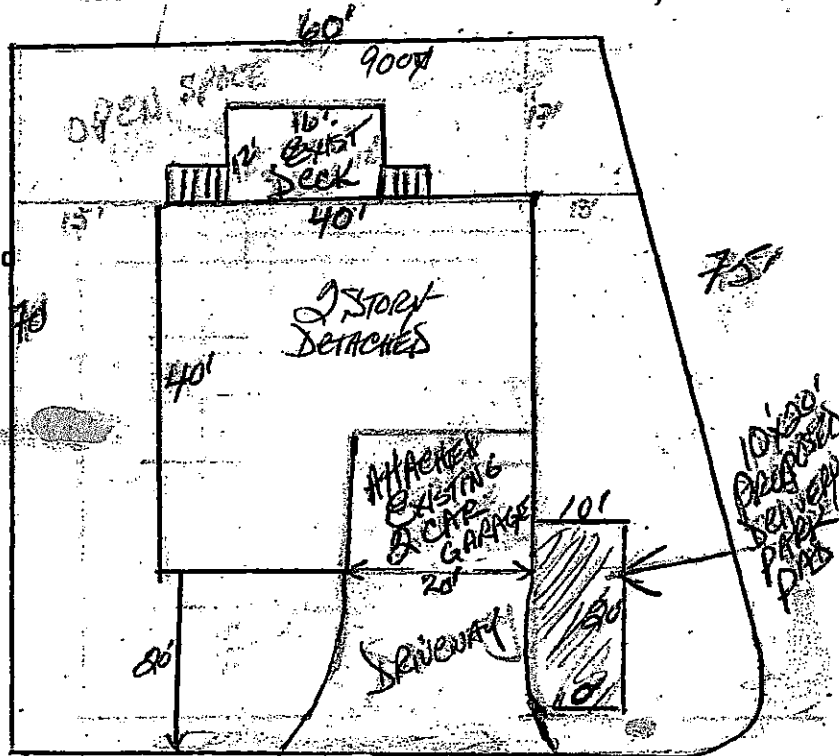
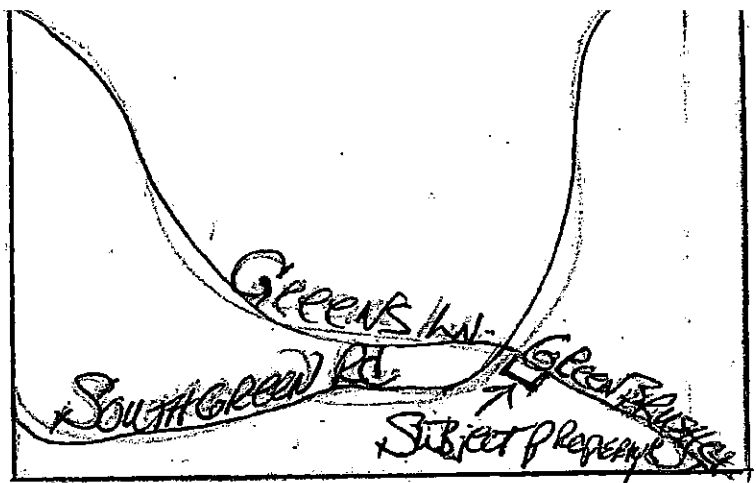
#4 Greenbrush Ct  
 Baltimore County MD 21244-1381  
 2nd election district  
 Owner: Muna Saffie Harris  
 Add # 4656 Lake Vista Circle  
 Date: 9/02/2010 (plan date)  
 Applicant: Edna Isaac  
 4 greenbrush ct  
 Lot size: 7357sq ft  
 Zoning map: O17103  
 Zone: DR 5.5

Parking 1 space for each 3 beds = 2 spaces required

Existing floor areas sq ft  
 1st floor = 945 sq ft  
 2nd floor = 945 sq ft  
 Basement for storage and *mech. Rm 945 ft<sup>2</sup>*  
 Total 2835 sq ft  
 Existing garage = 400 sq ft (2 car garage)

open space .10 x lot area (7357 sq ft) = 735.7sq ft

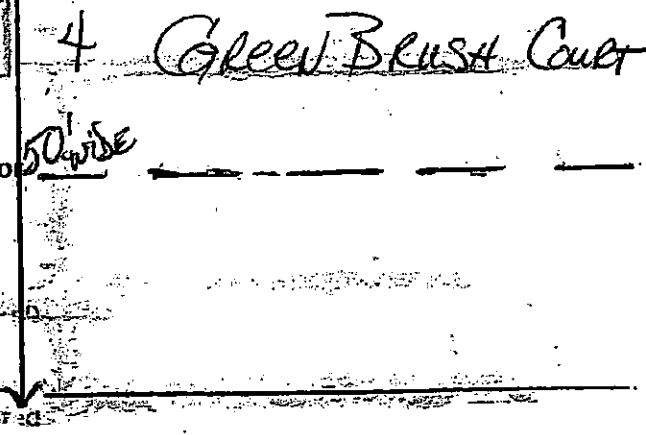
for more than 4 beds see the density chart  
 show calculations in this area on your plan



This building has not been originally constructed to accommodate elderly housing or an assisted living facility. The building has not been constructed in the past five (5) years. No reconstruction, relocation (exterior) changes or additions (of 25% or more based on ground floor area as of five (5) years before the date of this application) to the exterior of the building have occurred. No additions are proposed to exceed this limit for five (5) years from the date of this application.

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.

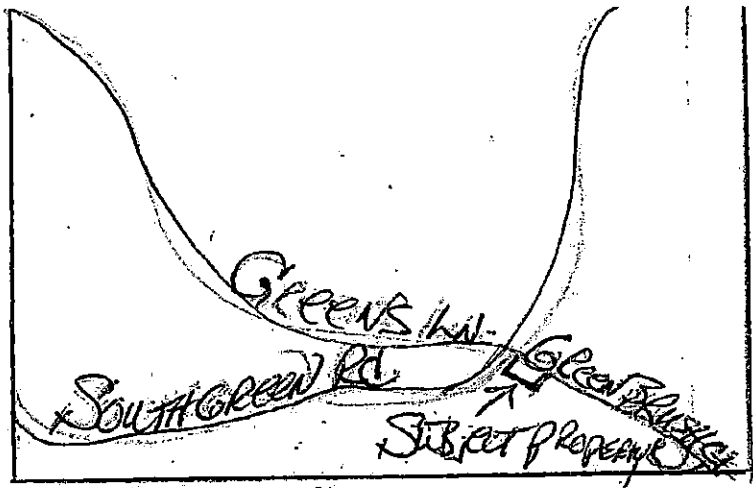
*Edna Isaac-Coleman* 9/3/2010  
 Signature EDNA ISAAC-COLEMAN Date 9/3/2010  
*Tammy Seay*  
 Signature TAMMY SEAY Date 9/3/2010



SCALE 1" = 20'

Zoning use permit  
 Plan for assisted living facility **Dr II**

#4 Greenbrush Ct  
 Baltimore County MD 21244-1381  
 2nd election district  
 Owner: Muna Saffie Harris  
 Add # 4656 Lake Vista Circle  
 Date: 9/02/2010 (plan date)  
 Applicant: Edna Isaac  
 4 greenbrush ct  
 Lot size: 7357sq ft  
 Zoning map: 077B3  
 Zone: DR 5.5

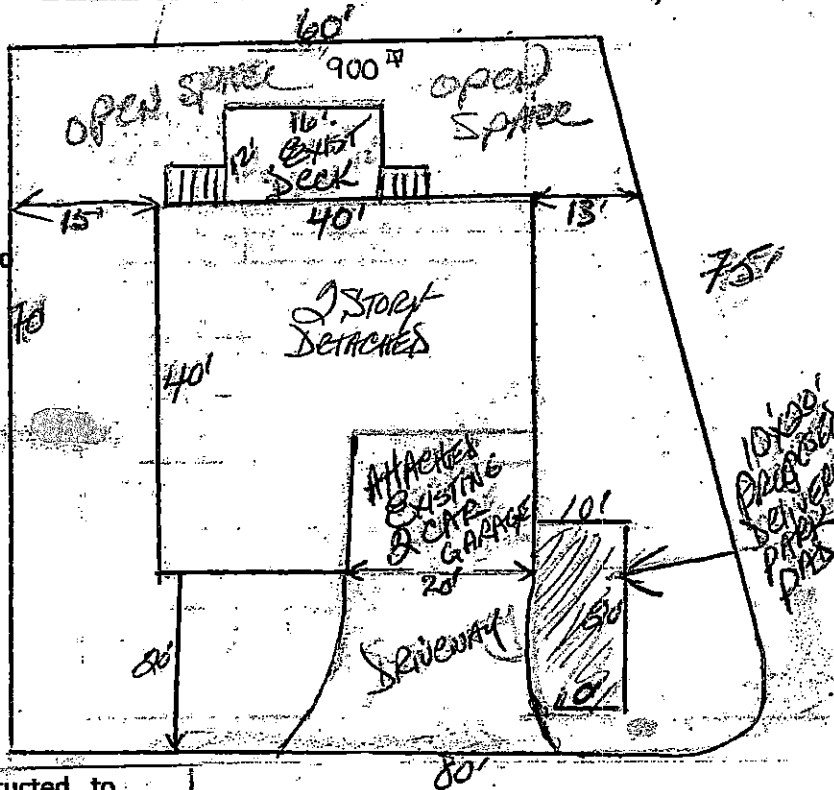


Parking 1 space for each 3 beds = 2 spaces required

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 2nd floor = 945 sq ft  
 Basement for storage and ~~area~~ *area: Rm 945 ft*  
 Total 2835 sq ft  
 Existing garage = 400 sq ft (2 car garage)

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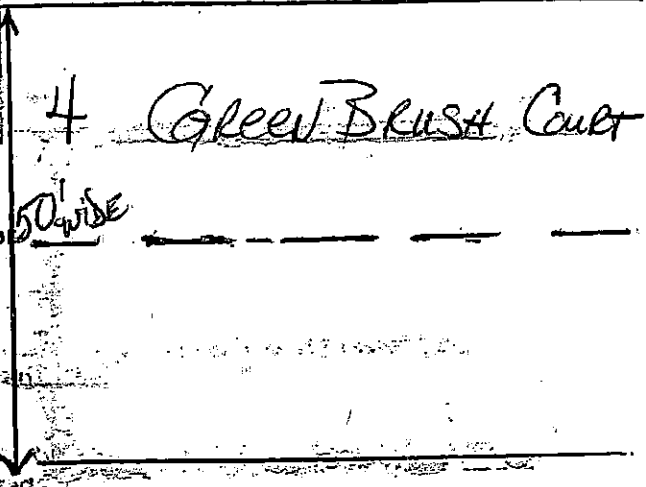
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 The undersigned (state if owners or applicants) are responsible for the accuracy of the information on this plan.

*X Edna Isaac-Coleman* 9/3/2010  
 Signature EDNA ISAAC-COLEMAN Date 9/3/2010  
*Tammy Seay* 9/3/2010  
 Signature TAMMY SEAY Date \_\_\_\_\_



SCALE 1" = 20'

4 Greenbrush Court  
Windsor Mill, MD 21244

September 1, 2010

ATTN: Neighbors

We, are proposing to have an assistant living care (1 – 4), with staff of two people full time in our existing home. All of the four persons are already living here for over two years.

Please sign your name, address and phone number. We are in support of the project. This letter is for zoning purposes only. We are thanking you in advance.

Sincerely,

Dr. Edna Isaac-Coleman  
Dr. Isaac - *W*

*Tammy Seay*  
Tammy Seay

Signature of Neighbor: *Walter B. Orem*  
Address: *6 Greenbrush Court*  
Phone number: *410 905 1693*

*Sworn to before me and subscribed in my Presence  
This 1st day of September, 2010.*

*Joyce Sanders*  
Notary Public

JOYCE SANDERS  
NOTARY PUBLIC STATE OF MARYLAND  
My Commission Expires 8/24/14

4 Greenbrush Court  
Windsor Mill, MD 21244

September 1, 2010

ATTN: Neighbors

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Please sign your name, address and phone number. We are in support of the project. This letter is for zoning purposes only. We are thanking you in advance.

Sincerely,

*Dr. Edwin Isaac - Coleman*  
Dr. Isaac

*Tammy Seay*  
Tammy Seay

Signature of Neighbor: *Christie Hare*  
Address: 15 Greenbrush Ct. Baltimore, MD 21244  
Phone number: 443-324-5535

*Sworn to before me and subscribed in my presence  
this 1st day of September, 2010.*

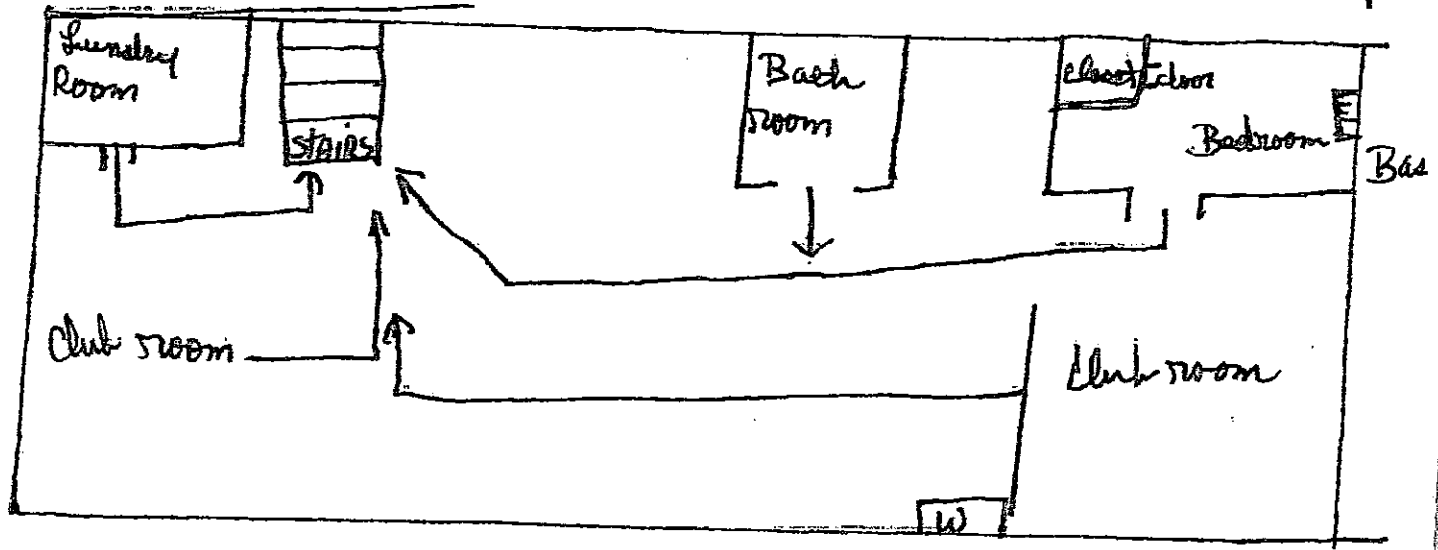
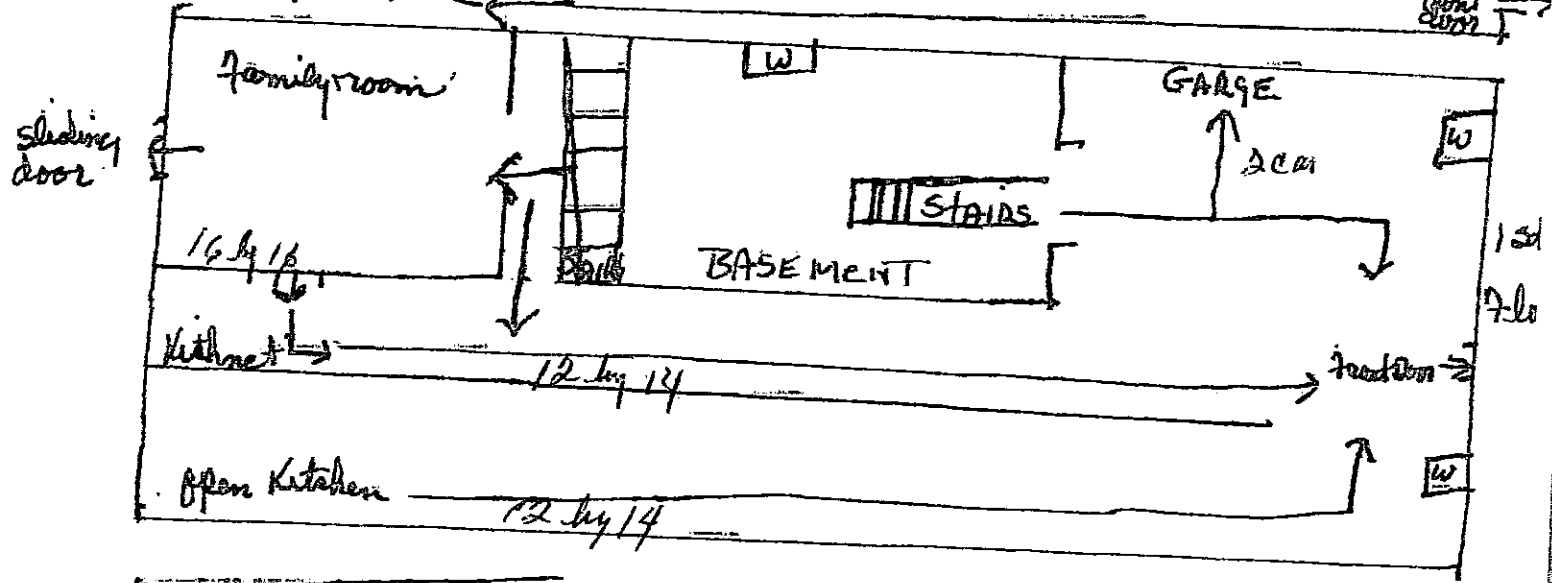
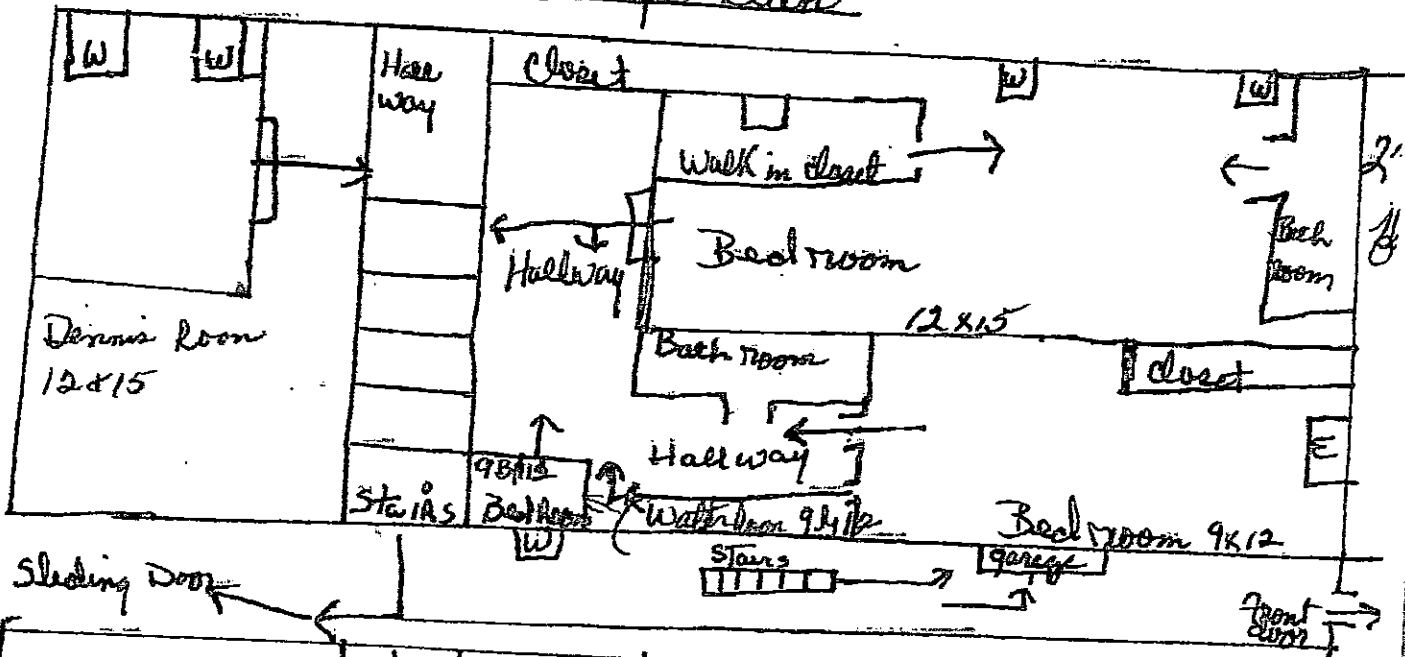
*Joyce Sanders*  
Notary Public

TOTAL P. 01

JOYCE SANDERS  
NOTARY PUBLIC STATE OF MARYLAND  
My Commission Expires 8/24/14

# 4 Green Brush Court Fire Escape Plan

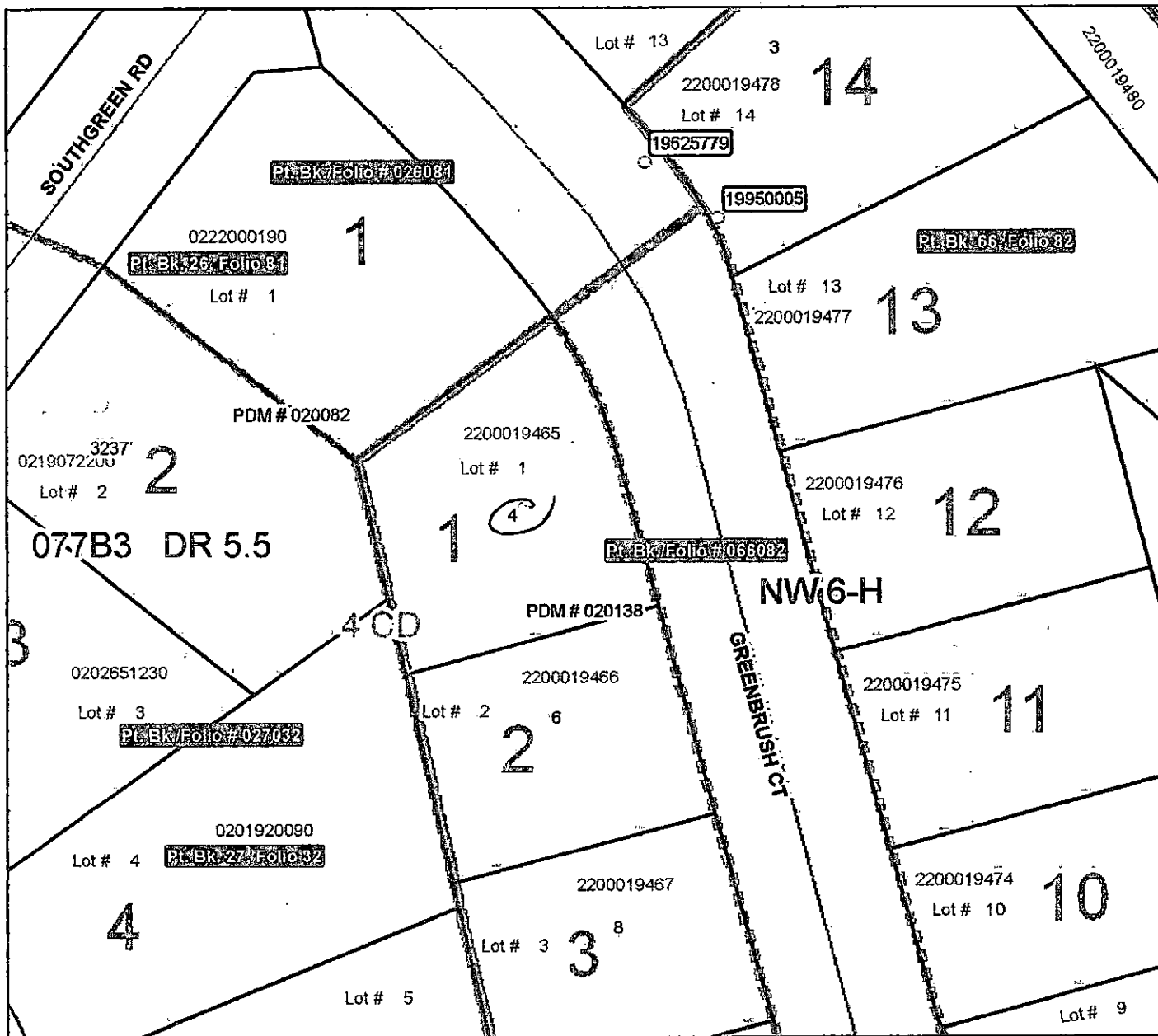
floor plan



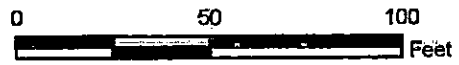
Primary escape Route → do

Copy

# 4 Greenbrush Court



Publication Date: August 06, 2010  
 Publication Agency: Department of Permits & Development Management  
 Projection/Datum: Maryland State Plane,  
 FIPS 1900, NAD 1983/91 HARN, US Foot



1 inch = 50 feet



4 GREEN BRUSH COURT  
left + Right Side