

USE PERMIT



IT IS ORDERED by the Director of the Department of Permits, Approvals and Inspections of Baltimore County, this 20th day of December, 2019, that Diane Lee located at 3 Cedarmere Road should be and the same is hereby granted permission to operate a(n): Assisted Living Facility I for a maximum of 3 beds.

(Individual or business name)
(Street address)

UP-2019-0006-AL
Permit (or Receipt) Number

irA. Mumf
Director, Permits, Approvals and Inspections

Planner's Initials JNP

INTER-OFFICE CORRESPONDENCE
RECOMMENDATION FORM

TO: Office of Planning, Development Review Office
Attention: ALF REVIEWER
Jefferson Building
105 W. Chesapeake Avenue, Room 101
Towson, MD 21204
M.S. 3402

FROM: Department of Permits, Approvals and Inspections
Zoning Review Office
M.S. 1105

RE: Assisted Living Facility I or II

ALF Address 3 Cedarmere Rd
Permit No. (if required) B (See Attached)
Intake Planner's Name Jeffrey Perlow
Filing Date 12 / 3 / 2019

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

A. MINIMUM APPLICANT SUPPLIED COMPATABILITY / APPEARANCE INFORMATION (As Required under A and B below):

Diane Lee 3 Cedarmere Rd ladydiane5504@yahoo.com
Print Name of Applicant Applicant Address Telephone Number Email Address
ALF Lot Address 3 Cedarmere Road Election District 4 Councilmanic District 4 Sq. Ft. of Lot 10,358
Lot Location: N E S W side/corner of Cedarmere Road, 175 feet from N E S W corner of Reisterstown Road
(street) (street)
Land Owner: Diane & Christopher Lee 10 Digit Tax Account Number 0423075328
Address: 3 Cedarmere Road Telephone Number (443) 540-0849 Email Address ladydiane5504@yahoo.com

B. APPLICANT MUST PROVIDE THE FOLLOWING ITEMS (1 THROUGH 7) BELOW:

(to be submitted by applicant for required compatibility and/or appearance review by the Office of Planning)

Intake Planner to confirm
information acceptance
by marking X below:

	YES	NO
1. This Completed Recommendation Form (3 copies)	☒	☐
2. Building Permit Application or Copy (If available)	☒	☐
3. Site Plan (See Zoning Use Permit Checklist on Page 2 for Requirements): 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	☒	☐
Statement of Compliance with Checklist Note 6 regarding the 1000 foot proximity requirement of Section 432.1.A.3, BCZR	☒	☐
Statement of Compliance with Checklist Note 10 regarding automatic sprinkler system requirement of County Building Code (For more information about automatic sprinkler system requirements, you must contact the Building Plans Review Office at 410-887-3987)	☒	☐
4. Building Elevation Drawings (these <u>may be waived</u> if note 5.A. from the Zoning Use Permit Checklist can be stated on the plans)	☐	☒
5. Photographs (please label all photos clearly) Show the Adjoining Buildings, the Proposed Building, and the Surrounding Neighborhood	☒	☐
6. Applicant Confirms compliance with 1000 foot proximity requirement of section 432.1.A.3, BCZR	☒	☐
7. Applicant Confirms that Building Plans Review Office was contacted regarding automatic sprinkler system requirements Building Plans Review Office can be reached at 410-887-3987	☒	☐
8. Current Zoning Classification: <u>DR 3.5</u>		

TO BE FILLED IN BY THE OFFICE OF PLANNING ONLY!

RECOMMENDATIONS / COMMENTS:



Approval



Disapproval

Approval conditioned on required modifications of the application and/or site plan to conform with the following
Comments below (or attached):

Signed by:

Brett M. Williams
for the Director, Office of Planning

RECEIVED

DEC 06 2019

Date:

12/19/19

UP-2019-0006-AL

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☐ Approval ☐ Disapproval ☐ Approval conditioned on required modifications of the application and/or site plan to conform with the following
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Signed by: _____
for the Director, Office of Planning

Date: _____

APPLICATION FOR PERMIT
BALTIMORE COUNTY, MARYLAND
DEPARTMENT OF PERMITS, APPROVALS & INSPECTIONS
TOWSON, MARYLAND 21204

Date 10/9/19
OEA TLM
Historic District/Building
☐ Yes ☒ No
District/Precinct 84 81

Permit # B
Control # MR
XRef #
Receipt # A
Fee \$57.00
Total Paid
Paid By
Inspector

Property Address 3 Cedarmere Rd
Suite/Space/Floor
Subdivision Cedarmere Rd
Tax Account # 8423015328
Will this building have sprinklers? ☐ Yes ☐ No
Is this property located in a floodplain? ☐ Yes ☐ No

OWNER'S INFORMATION
First & Last Name (Individual) Christopher + Diane Lee
Corporation Name
Address 3 Cedarmere Road
City, State, Zip Dwings Mills MD 21117
Seller

I HAVE CAREFULLY READ THIS APPLICATION AND KNOW THE SAME IS CORRECT AND TRUE, AND THAT IN DOING THIS WORK ALL PROVISIONS OF THE BALTIMORE COUNTY CODE AND APPROPRIATE STATE REGULATIONS WILL BE COMPLIED WITH WHETHER HEREIN SPECIFIED OR NOT, AND WILL REQUEST ALL REQUIRED INSPECTIONS.

APPLICANT INFORMATION
Name DIANE LEE Phone Number
Company (if applicable)
Address 3 CEDARMERE RD
City, State, Zip DWINGS MILLS MD 21117
Applicant Signature E-Mail
Business/Tenant Name
Contractor MHIC # MHBR #
Engineer
PLANS: CONST ☒ PLOT ☒ PLAT ☒ DATA ☒ EL ☒ 2 PL ☒ DRC #

- TYPE OF IMPROVEMENT
- ___ New Bldg Construction
 - ___ Addition
 - ___ Alteration
 - ___ Repair
 - ___ Wrecking
 - ___ Moving
 - ___ Other

DESCRIBE PROPOSED WORK: Existing R-3 Dwelling to be used as a single family dwelling with assisted living for 3 clients
~~Not a residential building~~
Residential sprinkler system to be provided
No alterations

- TYPE OF USE
- RESIDENTIAL
- ___ One Family
 - ___ Two Family
 - ___ Three and Four Family
 - ___ Five or More Family (enter no. units) ___
 - ___ Swimming Pool
 - ___ Garage
 - ___ Other

- NON-RESIDENTIAL
- ___ Amusement, Recreation, Place of Assembly
 - ___ Church, Other Religious Building
 - ___ Deleted----
 - ___ Industrial, Storage Building
 - ___ Parking Garage
 - ___ Service Station, Repair Garage
 - ___ Hospital, Institutional, Nursing Home
 - ___ Office, Bank, Professional
 - ___ Public Utility
 - ___ School, College, Other Educational
 - ___ Deleted----
 - ___ Store ___ Mercantile ___ Restaurant (specify type)
 - ___ Swimming Pool (specify type)
 - ___ Tank, Tower
 - ___ Transient Hotel, Motel (no. units)
 - ___ Other

OK TO WAIVE CONST. DWBS pending approval for Assisted living facility use permit

- Foundation Type Basement
- ___ Slab 1. ___ Full
 - ___ Block 2. ___ Partial
 - ___ Concrete 3. ___ None

- Type of Construction
- ___ Masonry
 - ___ Wood Frame
 - ___ Structure Steel
 - ___ Reinforced Concrete

- Type of Heating Fuel
- ___ Gas 3. ___ Electricity
 - ___ Oil 4. ___ Coal

Central Air: 1. ___ 2. ___

- Type of Sewage Disposal
- ___ Public Sewer ☒ Exists ___ Proposed
 - ___ Private System ☒ Septic ☒ Exists ___ Proposed ☒ Privy ☒ Exists ___ Proposed

- Type of Water Supply
- ___ Public System ☒ Exists ___ Proposed
 - ___ Private System ☒ Exists ___ Proposed

Estimated Cost of Materials and Labor \$ N/A
Proposed Use R-3 SFD w/assisted living 3 clients
Existing Use R-3 SFD

- Ownership: 1. ___ Privately Owned 2. ___ Publicly Owned 3. ___ Sale 4. ___ Rental
- Residential Category: 1. ___ Detached 2. ___ Semi-Detached 3. ___ Group 4. ___ Townhouse 5. ___ Mid-Rise 6. ___ High-Rise
- Efficiency # ___ 1-Bedroom # ___ 2-Bedroom # ___ 3-Bedroom # ___ Total Bedrooms ___ Total Apts/Condos ___
- One Family Bedroom # ___ Bathroom # ___ Kitchen # ___ Powder Room # ___ Garbage Disposal: 1. ☐ Yes 2. ☐ No

- Class ___ Liber ___ Folio ___ Map ___ Parcel ___
- Building Size
- Floor ___
- Width ___
- Depth ___
- Height ___
- Stories 3
- Lot #'s 3
- Lot Size and Setbacks
- Size 10,310 SF
- Front Street 1
- Side Street N/C
- Front Setback N/C
- Side Setback N/C
- Side Street Setback 1
- Rear Setback 1

APPROVAL SIGNATURES		DATE
BLD INSP	<u>Rebecca Daniels</u>	<u>FINAL</u>
BLD PLAN	<u>10/12/19</u>	<u>9 Oct 2019</u>
FIRE	<u>10/12/19</u>	
SEDI CTL	<u>10/12/19</u>	
ZONING	<u>10/12/19</u>	<u>10/9/19</u>
PUB SERV	<u>10/12/19</u>	
ENVRMNT	<u>10/12/19</u>	
PLANNING	<u>10/12/19</u>	<u>12/19/19</u>
PERMITS	<u>10/12/19</u>	

Corner Lot: 1. ☐ Yes 2. ☐ No

Zoning

APPLICATION FOR PERMIT
BALTIMORE COUNTY, MARYLAND
DEPARTMENT OF PERMITS, APPROVALS & INSPECTIONS
TOWSON, MARYLAND 21204

Date 10/9/19
OEA JLM

Permit # B
Control # MR
XRef # _____
Receipt # A
Fee \$57.00
Total Paid _____
Paid By _____
Inspector _____

Property Address 3 Cedarmere Rd
Suite/Space/Floor _____
Subdivision Cedarmere Rd
Tax Account # 89230151528
Will this building have sprinklers? ☐ Yes ☐ No
Is this property located in a floodplain? ☐ Yes ☐ No

Historic District/Building
☐ Yes ☒ No
District/Precinct 84 81

OWNER'S INFORMATION

First & Last Name (Individual) Christopher + Jane Lee
Corporation Name _____
Address 3 Cedarmere Road
City, State, Zip Bowling Mills MD 21117
Seller _____

APPLICANT INFORMATION

Name Diane Lee Phone Number _____
Company (if applicable) 3 CEDARMERE RD
Address 3 CEDARMERE RD
City, State, Zip BOWLING MILLS MD 21117
Applicant Signature _____ E-Mail _____
Business/Tenant Name _____
Contractor _____ MHIC # _____ MHBR # _____
Engineer _____
PLANS: CONST ☒ PLOT ☒ PLAT ☒ DATA ☒ EL ☒ PL ☒ DRC # _____

I HAVE CAREFULLY READ THIS APPLICATION AND KNOW THE SAME IS CORRECT AND TRUE, AND THAT IN DOING THIS WORK ALL PROVISIONS OF THE BALTIMORE COUNTY CODE AND APPROPRIATE STATE REGULATIONS WILL BE COMPLIED WITH WHETHER HEREIN SPECIFIED OR NOT, AND WILL REQUEST ALL REQUIRED INSPECTIONS.

TYPE OF IMPROVEMENT

1. ☐ New Bldg Construction
2. ☐ Addition
3. ☐ Alteration
4. ☐ Repair
5. ☐ Wrecking
6. ☐ Moving
7. ☐ Other _____

TYPE OF USE

RESIDENTIAL

01. ☒ One Family
02. ☐ Two Family
03. ☐ Three and Four Family
04. ☐ Five or More Family (enter no. units) _____
05. ☐ Swimming Pool
06. ☐ Garage
07. ☐ Other _____

NON-RESIDENTIAL

08. ☐ Amusement, Recreation, Place of Assembly
09. ☐ Church, Other Religious Building
10. ☐ Deleted
11. ☐ Industrial, Storage Building
12. ☐ Parking Garage
13. ☐ Service Station, Repair Garage
14. ☐ Hospital, Institutional, Nursing Home
15. ☐ Office, Bank, Professional
16. ☐ Public Utility
17. ☐ School, College, Other Educational
18. ☐ Deleted
19. ☐ Store ☐ Mercantile ☐ Restaurant (specify type) _____
20. ☐ Swimming Pool (specify type) _____
21. ☐ Tank, Tower
22. ☐ Transient Hotel, Motel (no. units) _____
23. ☐ Other _____

DESCRIBE PROPOSED WORK: Existing R-3 Dwelling to be used as a single family dwelling with assisted living for 3 clients

~~Not a residential use. Residential sprinkler system to be provided~~
No alterations

OK TO WAIVE CONST. DWGS pending approval for Assisted living facility use permit

Foundation Type

1. ☐ Slab
2. ☐ Block
3. ☐ Concrete

Basement

1. ☐ Full
2. ☐ Partial
3. ☐ None

Type of Construction

1. ☐ Masonry
2. ☐ Wood Frame
3. ☐ Structure Steel
4. ☐ Reinforced Concrete

Type of Heating Fuel

1. ☐ Gas
2. ☐ Oil
3. ☐ Electricity
4. ☐ Coal

Central Air: 1. ☐ 2. ☐

Type of Sewage Disposal

1. ☒ Public Sewer ☒ Exists ☐ Proposed
2. ☐ Private System ☐ Exists ☐ Proposed
3. ☐ Septic ☐ Exists ☐ Proposed
4. ☐ Privy ☐ Exists ☐ Proposed

Type of Water Supply

1. ☒ Public System ☒ Exists ☐ Proposed
2. ☐ Private System ☐ Exists ☐ Proposed

Estimated Cost of Materials and Labor \$ N/A

Proposed Use

R-3 SFD w/assisted living 3 clients

Ownership: 1. ☒ Privately Owned 2. ☐ Publicly Owned 3. ☐ Sale 4. ☐ Rental

Residential Category: 1. ☒ Detached 2. ☐ Semi-Detached 3. ☐ Group 4. ☐ Townhouse 5. ☐ Mid-Rise 6. ☐ High-Rise

Efficiency # _____ 1-Bedroom # _____ 2-Bedroom # _____ 3-Bedroom # _____ Total Bedrooms _____ Total Apts/Condos _____

One Family Bedroom # _____ Bathroom # _____ Kitchen # _____ Powder Room # _____ Garbage Disposal: 1. ☐ Yes 2. ☐ No

Class _____ Liber _____ Folio _____ Map _____ Parcel _____

Building Size

Floor _____
Width _____
Depth _____
Height _____
Stories _____
Lot #'s 3

Lot Size and Setbacks

Size 10,370 SF
Front Street _____
Side Street _____
Front Setback _____
Side Setback _____
Side Street Setback _____
Rear Setback _____

APPROVAL SIGNATURES

DATE

BLD INSP	<u>Rebecca Daniels</u>	<u>10/9/19</u>
BLD PLAN	<u>Final</u>	<u>10/9/19</u>
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Name DIANE LEE Phone Number
Company (if applicable)
Address 3 CEDARMERE RD
City, State, Zip OWINGS MILLS MD 21117
Applicant Signature E-Mail
Business/Tenant Name
Contractor MHIC # MHBR #
Engineer
PLANS: CONST ☒ PLOT ☒ PLAT ☒ DATA ☒ EL ☒ PL ☒ DRC #

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Class Liber Folio Map Parcel

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Width
Depth
Height
Stories 3
Lot #'s

Lot Size and Setbacks

Size 10,310 SF
Front Street
Side Street
Front Setback
Side Setback
Side Street Setback
Rear Setback

Corner Lot: 1. ☐ Yes 2. ☐ No

Zoning

APPROVAL SIGNATURES

DATE

BLD INSP

BLD PLAN

FIRE

SEDI CTL

ZONING

PUB SERV

ENVRMNT

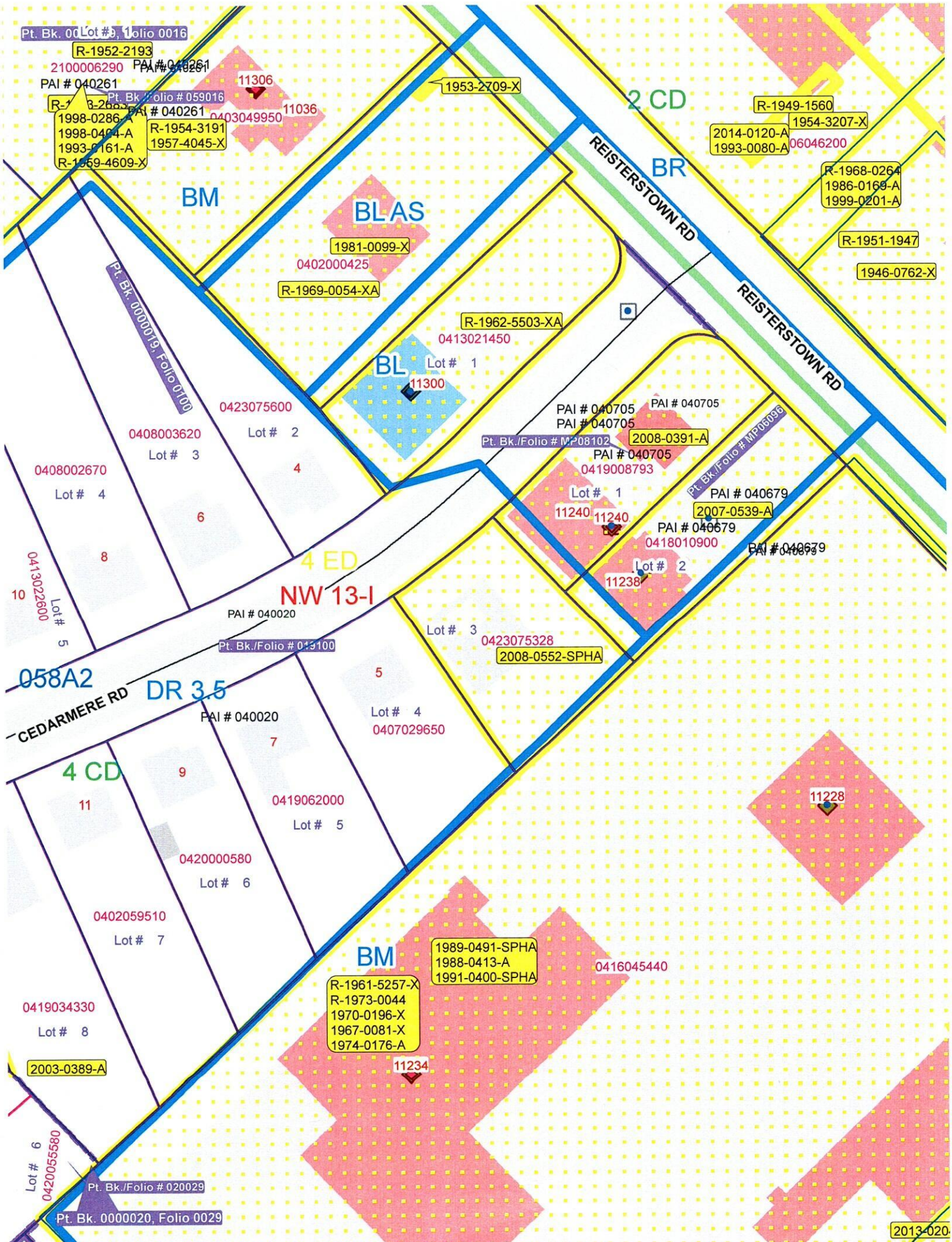
PLANNING

PERMITS

FINAL

10/9/19

10/9/19



Pt. Bk. 00 Lot # 9, Folio 0016

R-1952-2193

2100006290 PAI # 040261

PAI # 040261

Pt. Bk. Folio # 059016

R-1954-3191

1998-0286-X

1998-0404-A

1993-0161-A

R-1959-4609-X

0403049950

1957-4045-X

BM

BLAS

1981-0099-X

0402000425

R-1969-0054-XA

1953-2709-X

2 CD

BR

R-1949-1560

2014-0120-A

1993-0080-A

1954-3207-X

06046200

R-1968-0264

1986-0169-A

1999-0201-A

R-1951-1947

1946-0762-X

Pt. Bk. 0000019, Folio 0109

0408003620

Lot # 2

0408002670

Lot # 4

6

8

0413022600

Lot # 5

058A2

DR 3.5

PAI # 040020

Pt. Bk./Folio # 013100

NW 13-I

Lot # 3

0423075328

2008-0552-SPHA

5

Lot # 4

0407029650

PAI # 040020

0419062000

Lot # 5

0420000580

Lot # 6

0402059510

Lot # 7

0419034330

Lot # 8

2003-0389-A

Lot # 9

0420005580

Pt. Bk./Folio # 020029

Pt. Bk. 0000020, Folio 0029

BM

R-1961-5257-X

R-1973-0044

1970-0196-X

1967-0081-X

1974-0176-A

1989-0491-SPHA

1988-0413-A

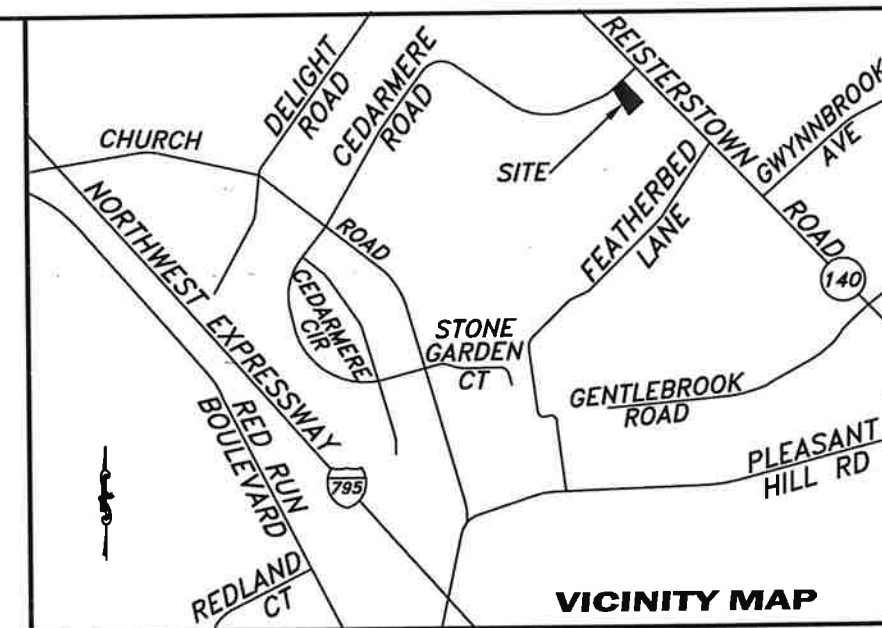
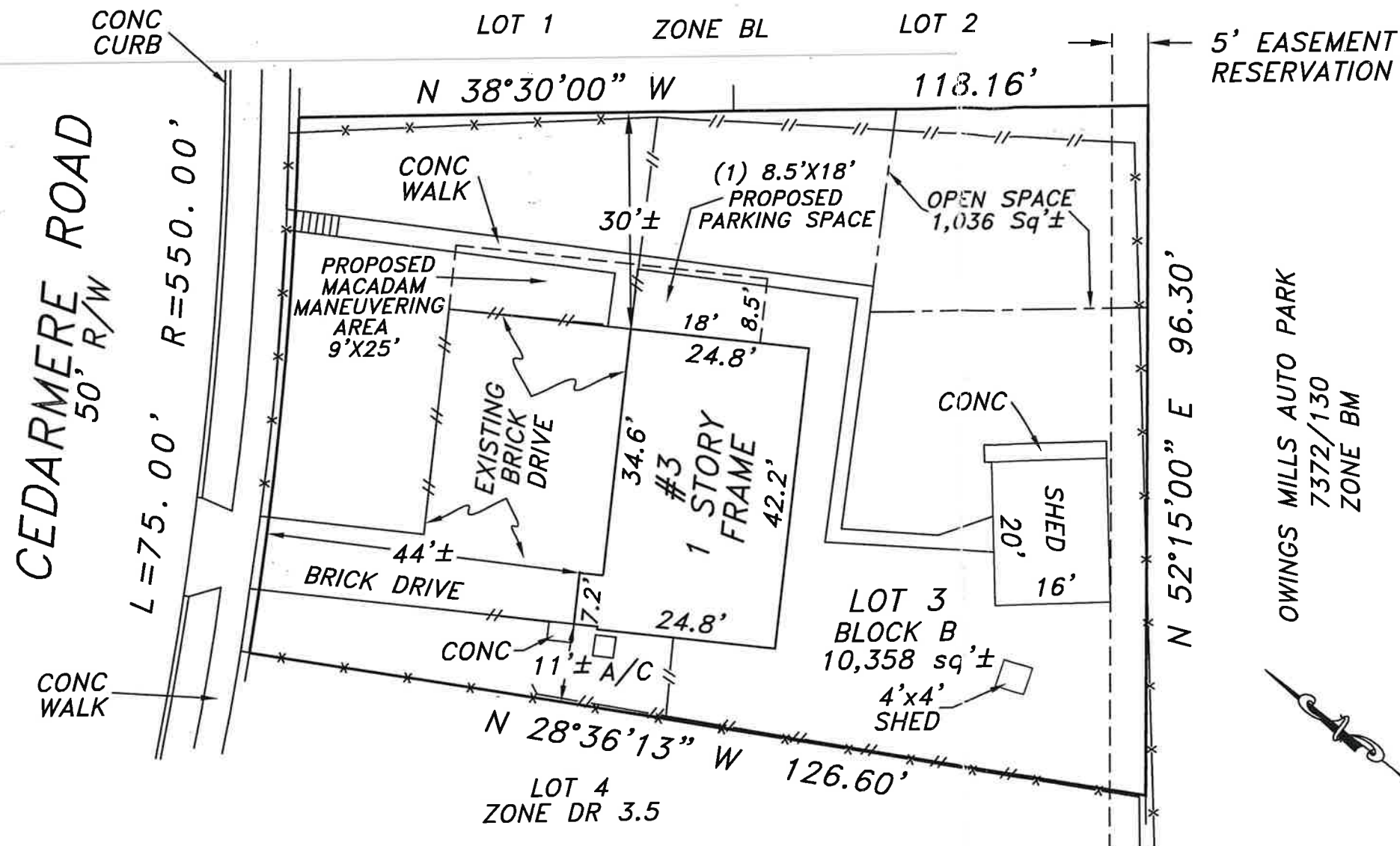
1991-0400-SPHA

0416045440

11234

11228

2013-020



GENERAL NOTES:

- 1) The accuracy of the distances shown from any structure to the apparent property line is 1'±.
- 2) This plat does not represent a Boundary Survey. Any property markers labeled hereon are not guaranteed by NTT Associates, Inc.
- 3) This plat is of benefit to a consumer only insofar as it is required by a lender, a title insurance company or its agent in connection with contemplated transfer, financing, or refinancing.
- 4) This plat does not provide for the accurate identification of property boundary lines, but such identification may not be required, for the transfer of title or securing financing or refinancing.
- 5) This plat is not to be relied upon for the establishment of location of fences, garages, buildings, or other existing or future improvements.
- 6) Unless noted on the plat, no title report was provided. This plat was prepared by examining the current title deed or record plat. Any easements, restrictions, rights of way, or any other property alterations not referred to in the current title deed may not be shown.
- 7) Unless otherwise noted, the bearings and north arrow shown hereon are in the meridian of the current title deed or record plat.
- 8) Building Restriction Line information, if shown, was obtained from existing records only and is not guaranteed by NTT Associates, Inc.
- 9) Flood Zone Information shown on FIRM maps is subject to interpretation.
- 10) Improvements which in the surveyor's opinion appear to be in a state of disrepair or considered "temporary" may not be shown.
- 11) If it appears encroachments may exist, a Boundary Survey is recommended to determine the exact location of the improvements.
- 12) Area shown hereon was derived from plats of record and not a Boundary Survey.
- 13) Any proposed signs will comply with Section 450 (BCZR) and all zoning sign policies or a zoning variance is required.

OWNER AND APPLICANT
DIANE AND CHRISTOPHER LEE
 3 CEDARMERE ROAD
 OWINGS MILLS, MD 21117
 PHONE: (443) 540-0849
 EMAIL: LADYDIANE5504@YAHOO.COM

Existing Floor Area Calculation:
 1st Floor = 10,070 sq' Total = 10,070 sq'
Open Space Calculation:
 10,358 sq' X .10 = 1,036 sq'

LOT SIZE: 10,358 sq'
ZONING: DR 3.5 (1"=200' Scale Map: 058A2)
PARKING: 1 SPACE FOR 3 BEDS = 1 PARKING SPACE REQUIRED BASED ON 3 BEDS PROPOSED

THE UNDERSIGNED (STATE IF OWNER OR APPLICANT) ARE RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION ON THIS PLAN

APPLICANT: Diane Lee 12/3/19 Diane Lee
 SIGNATURE DATE PRINTED NAME

SIGNATURE DATE PRINTED NAME

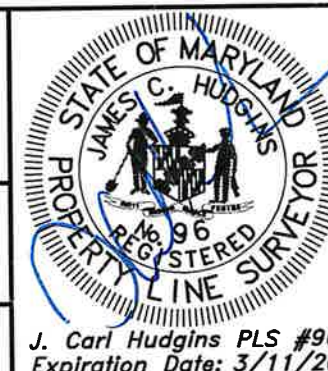


- 14) NOTE: THIS BUILDING HAS NOT BEEN ORIGINALLY CONSTRUCTED TO ACCOMMODATE ELDERLY HOUSING OR AN ASSISTED LIVING FACILITY. THE BUILDING HAS NOT BEEN CONSTRUCTED IN THE PAST 5 YEARS. NO RECONSTRUCTION, RELOCATION, (EXTERIOR) CHANGES OR ADDITION (OF 25% OR MORE BASED ON THE GROUND FLOOR AREA AS OF 5 YEARS BEFORE THE DATE OF THIS APPLICATION) TO THE EXTERIOR OF THE BUILDING HAVE OCCURRED. NO ADDITIONS ARE PROPOSED TO EXCEED THIS LIMIT FOR 5 YEARS FROM THE DATE OF THIS APPLICATION.
- 15) NOTE: THE APPLICANT IS AWARE & CERTIFIES THAT IN A D.R. ZONE, AN ASSISTED LIVING FACILITY I OR II IS NOT PERMITTED WITHIN 1000 FEET OF ANOTHER PROPERTY WITH AN EXISTING ASSISTED-LIVING FACILITY I OR II OR ANOTHER PROPERTY FOR WHICH AN APPLICATION FOR A USE PERMIT HAS BEEN FILED FOR AN ASSISTED-LIVING FACILITY I OR II, PURSUANT TO SECTION 432A.1.A.3, BCZR.
- 16) THE APPLICANT IS AWARE & CERTIFIES THAT A BUILDING PERMIT FOR THE INSTALLATION AND INSPECTION OF AN "AUTOMATIC SPRINKLER SYSTEM" FOR THE PRINCIPAL BUILDING ON THE PROPERTY WILL BE REQUIRED, PRIOR TO THE OPERATION AND OCCUPANCY OF AN ASSISTED LIVING FACILITY (ALF I, II OR III), PURSUANT TO THE BALTIMORE COUNTY BUILDING CODE, SECTION 308 AND/OR SECTION 310

The purpose of this drawing is to locate, describe, and represent the positions of buildings and substantial improvements affecting the property shown hereon, being known as Lot 3 Block B, on plat entitled Subdivision of Section "A" CEDARMERE recorded among the land records of Baltimore County, Maryland in Plat Book 19, folio 100

This is to certify that I either personally prepared or was in responsible charge over the preparation of this drawing and the surveying work reflected in it, all set forth in Regulation .12 of Chapter 09.13.06 of the Code of Maryland Annotated Regulations.

Subject property is shown in Zone X on the FIRM Map of Baltimore County, Maryland on Community Panel Number 2400100220D, effective 8/2/2011



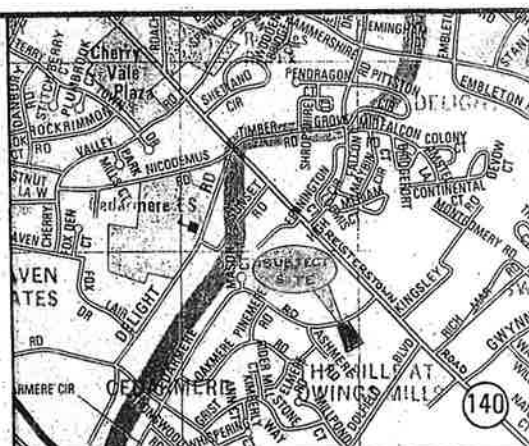
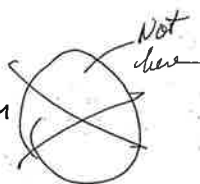
USE PERMIT PLAN FOR ASSISTED LIVING FACILITY ALF I FOR A MAXIMUM OF 4 BEDS
 3 CEDARMERE ROAD
 OWINGS MILLS, MD 21117
 4th ELECTION DISTRICT
 BALTIMORE COUNTY, MARYLAND

NTT Associates, Inc.
 16205 Old Frederick Rd.
 Mt. Airy, Maryland 21771
 Phone: (410) 442-2031
 Fax: (410) 442-1315
 www.nttsurveyors.com

Scale: 1"= 20'
 Date: 11/12/2019
 Field By: TOM/DON
 Drawn By: DAM
 File No.: MISC 13614

1. THERE ARE NO ARCHEOLOGICAL SITES, HAZARDOUS MATERIALS,
ENDANGERED SPECIES HABITATS, CRITICAL AREAS OR
HISTORIC BUILDINGS ON THE SUBJECT SITE.
2. THERE ARE NO STREAMS, BODIES OF WATER, OR SPRINGS
ON OR ADJACENT TO THE SUBJECT SITE.
3. THERE ARE NO UNDERGROUND STORAGE TANKS ON THE
SUBJECT SITE.
4. THE SUBJECT SITE DOES NOT LIE WITHIN THE CHESAPEAKE
BAY CRITICAL AREA.
5. ALL PROPOSED SIGNAGE WILL COMPLY WITH SECTIONS
450 & 259.3.C.7. OF THE BCZR.
6. THE SUBJECT PROPERTY HAS NO PREVIOUS ZONING
CASE HISTORY.
7. THE SUBJECT PROPERTY DOES NOT LIE WITHIN A
100 YEAR FLOOD PLAIN.
8. ALL IMPROVEMENTS SHOWN HEREON ARE TO BE
RAZED.

BM



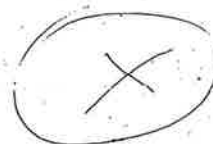
VICINITY MAP

SCALE: 1" = 1000

SITE AREA	10,370 SQ. FT./0.238 AC*
EXIST. ZONING	DR 3.5
COUNCILMANIC DISTRICT	4TH
ZONING MAP	05BA2
DEED REFERENCE,	23285 / 246
TAX MAP / GRID / PARCEL	58 / 7 / 86
TAX ACCOUNT NO.	0423075328

DR3.5

SANDRA J. SALES
15562/690
TAX NO: 0407029650
(RESIDENTIAL USE)



TONY & RITAS LLC
24109/531
TAX NO. 0418010900
(COMMERCIAL USE)

JIM WOODRUFF
26522/4B1
TAX NO. 0419008793
(COMMERCIAL USE)

BL

POINT OF BEGINNING

CEDARMERE

(50' R/W)

ROAD

THIS PLAN WILL ACCOMPANY A PETITION FOR SPECIAL HEARING TO ALLOW A COMMERCIAL PARKING AREA IN A RESIDENTIAL ZONE AND A PETITION FOR VARIANCE FROM THE RESIDENTIAL TRANSITION AREA TO ALLOW COMMERCIAL PARKING WITHIN THE 75' RESIDENTIAL TRANSITION SETBACK AND 50' RESIDENTIAL TRANSITION BUFFER PER SECTION 1801B.1e (5) OF THE BCZR.

**SPELLMAN, LARSON
& ASSOCIATES, INC.**
CIVIL ENGINEERS AND LAND SURVEYORS
222 BOSLEY AVENUE, SUITE B-3
TOWSON, MARYLAND 21204
PHONE: 410-823-3535
FAX: 410-825-5215

WIN WIN VENTURES, LLC
304 BONNIE MEADOW CIRCLE
REISTERSTOWN, MD. 21136-6202

NO.			REVISIONS		
DATE			DESCRIPTION		
	4-10-88		REV PER FILING CONFERENCE		

**SPELLMAN, LARSON
 &
 ASSOCIATES, INC.**

CIVIL ENGINEERS AND LAND SURVEYORS
 272 BOSLEY AVENUE SUITE B-3 TOWSON, MD 21204
 PHONE: 410-821-3535

PLAT TO ACCOMPANY
PETITION FOR SPECIAL HEARING
~~VARIANCE~~
3 CEDARMERE ROAD
(EXISTING CONDITIONS PLAN)

4TH ELECTION DISTRICT BALTIMORE COUNTY

SCALE: 1" = 20'
DES BY:

SHT. 1 OF 2

208016