

USE PERMIT



IT IS ORDERED by the Director of the Department of Permits, Approvals and Inspections of Baltimore County, this 9TH day of SEPTEMBER, 2019, that VALERIE GAINES located at 402 HIGHMEADOW COURT should be and the

(Individual or business name)
(Street address)

same is hereby granted permission to operate a: ASSISTED LIVING FACILITY (MAXIMUM 4 BEDS)

187645
Permit (or Receipt) Number

Jeff. Muniz
Director, Permits, Approvals and Inspections

Planner's Initials JS

BALTIMORE COUNTY, MARYLAND
OFFICE OF BUDGET AND FINANCE
MISCELLANEOUS CASH RECEIPT

No. **187645**

Date: **8/8/19**

PAID RECEIPT

BUSINESS ACTUAL TIME DRW
 8/08/2019 8/08/2019 11:36:03 1

REG WSO1 WALKIN LJR
 >>RECEIPT # 026080 8/08/2019 OFLN

Fund	Dept	Unit	Sub Unit	Rev Source/ Obj	Sub Rev/ Sub Obj	Dept	Obj	BS Acct	Amount
001	806	6000		650					\$ 100.00

Total: **\$ 100.00**

Rec From: **VALERIE GANET**

For: **ALF I USE PERMIT FEE**

Client 5 528 ZONING VERIFICATION

CR NO. 187645

Receipt Tot \$ 100.00

.00 CK 100.00 CA

Baltimore County, Maryland

**CASHIER'S
 VALIDATION**

DISTRIBUTION

WHITE - CASHIER PINK - AGENCY YELLOW - CUSTOMER GOLD - ACCOUNTING

PLEASE PRESS HARD!!!!

INTER-OFFICE CORRESPONDENCE
RECOMMENDATION FORM

8/30/19

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

ALF Address 402 Highmeadow Ct

Permit No. (if required) B _____

Intake Planner's Name Jason Seibelman X3391

Filing Date 8/8/19

RECEIVED

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

AUG 14 2019

RE: Assisted Living Facility I or II

DEPARTMENT OF PLANNING

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)

Valerie Gainer 402 Highmeadow Ct 443-744-1147
Print Name of Applicant Applicant Address Telephone Number Email Address

ALF Lot Address 402 HIGHMEADOW COURT Election District 4 Councilmanic District 2 Sq. Ft. of Lot 11,446

Lot Location NE SW corner of HIGHMEADOW COURT 100 feet from NE SW corner of HIGHMEADOW ROAD
(street) (street)

Land Owner: Valerie Gainer 10 Digit Tax Account Number 0412001900

Address: 402 Highmeadow Ct 443-744-1147 Trinity, Col.
Telephone Number Email Address

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

Date: _____

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

ALF Address 402 Highmeadow Ct
Permit No. (if required) B _____
Intake Planner's Name JASON SEIDELMAN X3391
Filing Date 8/8/19

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

RE: Assisted Living Facility I or II

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)

Print Name of Applicant Valerie Gainer Applicant Address 402 Highmeadow Ct Telephone Number 443-744-1141 Email Address trinity.col@gmail.com
ALF Lot Address 402 HIGHMEADOW COURT Election District 4 Councilmanic District 2 Sq. Ft. of Lot 11,446 #
Lot Location NE SW side/corner of HIGHMEADOW COURT (street), 100 feet from NE SW corner of HIGHMEADOW ROAD (street)
Land Owner: Valerie Gainer 10 Digit Tax Account Number 0412001900
Address: 402 Highmeadow Ct Telephone Number 443-744-1141 Email Address trinity.col@gmail.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)	<u>✓</u>	_____
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	<u>✓</u>	_____
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)	_____	<u>X</u>
5. Photographs (please label all photos clearly) Show the Adjoining Buildings, the Proposed Building, and the Surrounding Neighborhood	<u>✓</u>	_____
6. Applicant Confirms compliance with 1000 foot proximity requirement of section 432.1.A.3, BCZR	<u>✓</u>	_____
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	<u>✓</u>	_____
8. Current Zoning Classification: <u>DR 3-5</u>	_____	_____

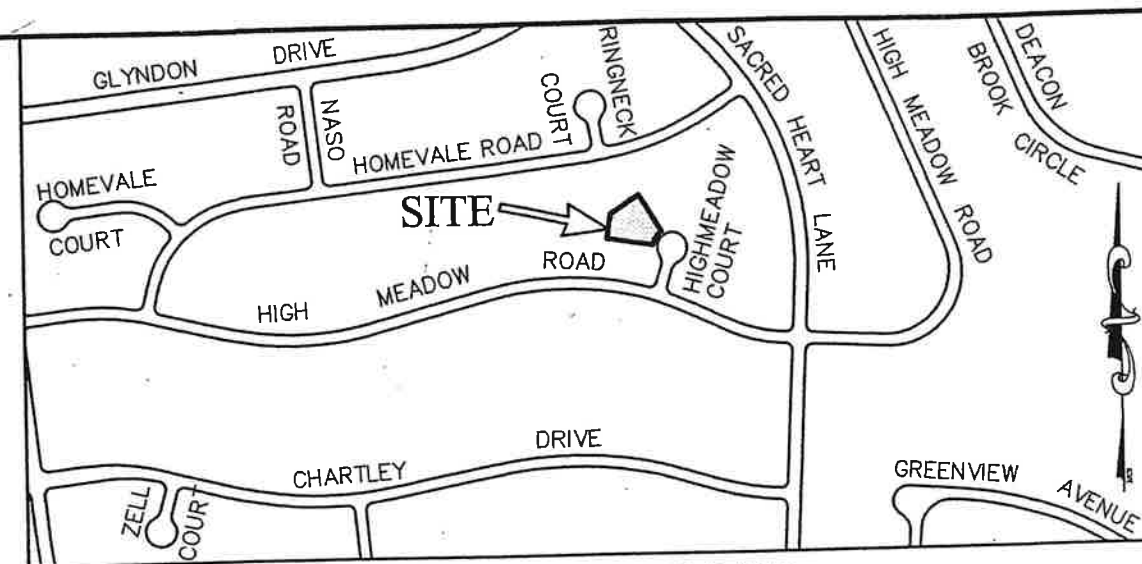
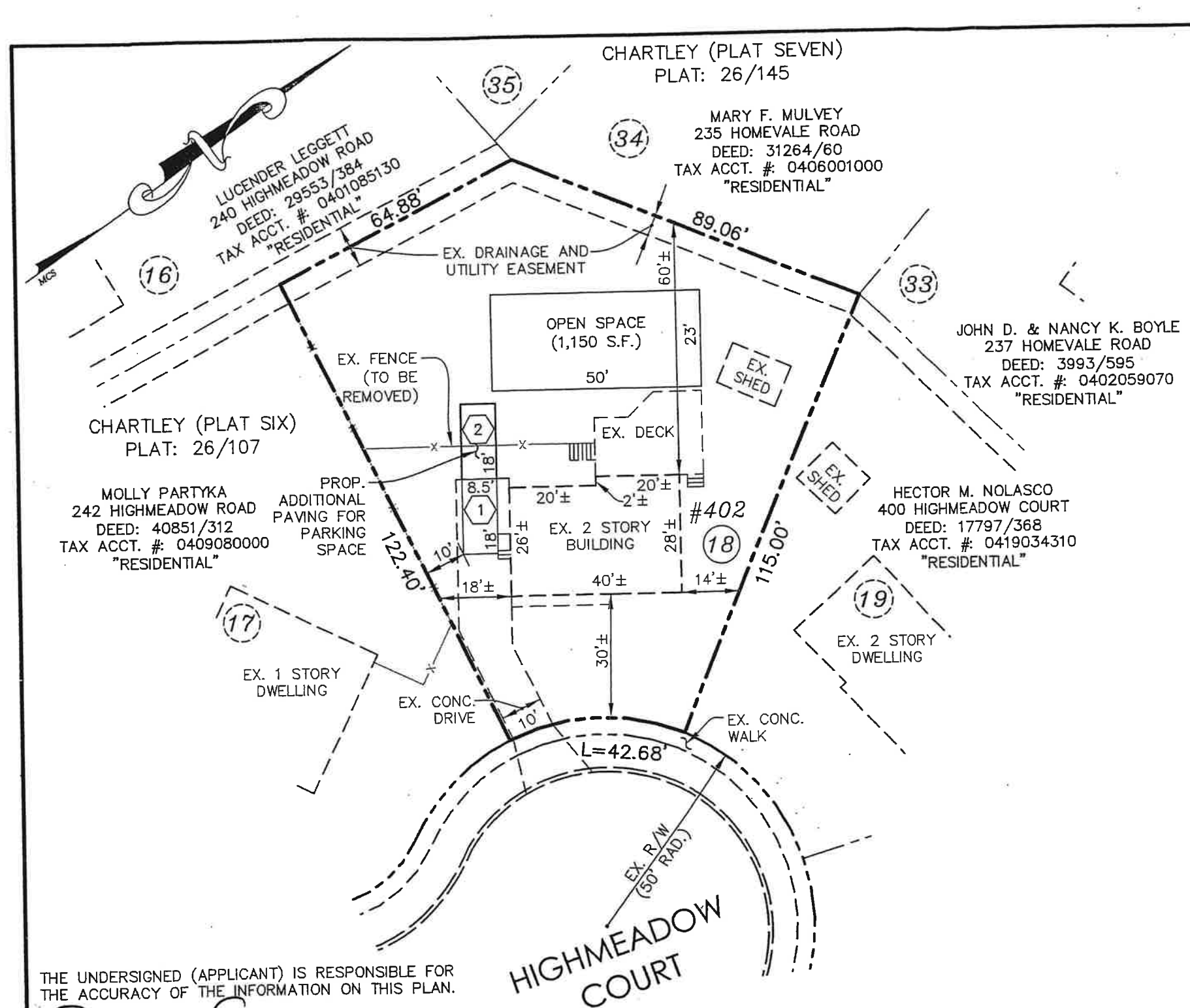
TO BE FILLED IN BY THE OFFICE OF PLANNING ONLY!

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: _____
for the Director, Office of Planning

Date: _____



VICINITY MAP

SCALE: 1"=500'

SITE DATA

1. NET TRACT AREA: 0.263 AC± (11,446 S.F.)
2. THE ENTIRE SITE IS ZONED DR 3.5, 200 SCALE MAP #048C2.
3. OWNER:
PAN GUIRONG
402 HIGHMEADOW COURT
REISTERSTOWN, MD 21136-2101
4. APPLICANT:
VALERIE GAINNEY
402 HIGHMEADOW COURT
REISTERSTOWN, MD 21136-2101
PHONE: 443-744-1141
EMAIL: TRINITY.COL@VERIZON.NET
5. TAX ACCT. #: 0412001900
6. DEED: 23564/83
7. ZONING MAP: 48 GRID: 18 PARCEL: 424
8. ELECTION DISTRICT: 4 COUNCILMANIC DISTRICT: 2
9. CURRENT USE: RESIDENTIAL
10. PROPOSED USE: COMMERCIAL - ASSISTED LIVING FACILITY 1
11. THIS SITE HAS NO ZONING HISTORY.
12. NO SIGNS ARE PROPOSED. ANY FUTURE SIGNS WILL COMPLY WITH SECT 413.1 BCZR AND ZONING SIGN POLICIES OR BE VARIANCED.
13. GROSS FLOOR AREA: 1,494 S.F.
14. OPEN SPACE REQUIRED: 11,446 S.F. x 0.10 = 1,145 S.F. REQUIRED
OPEN SPACE PROVIDED: 1,150 S.F.

PARKING SPACE REQUIREMENTS

ASSISTED LIVING FACILITY 1 USE: 1,494 SF (UP TO 4 BEDS)
1 SPACE PER 3 BEDS
1 SPACE X 4 BEDS (MAX) = 2 SPACES REQUIRED
PARKING PROVIDED = 2 SPACES (PROPOSED)
THEREFORE, THE PARKING REQUIREMENTS FOR THIS USE AND SITE HAVE BEEN MET.

THE UNDERSIGNED (APPLICANT) IS RESPONSIBLE FOR THE ACCURACY OF THE INFORMATION ON THIS PLAN.

Valerie Gainney
SIGNATURE DATE

VALERIE GAINNEY
PRINTED NAME

NOTE:

1. THIS BUILDING HAS **NOT** BEEN ORIGINALLY CONSTRUCTED TO ACCOMODATE ELDERLY HOUSING OR AN ASSISTED LIVING FACILITY. THE BUILDING HAS **NOT** BEEN CONSTRUCTED IN THE PAST 5 YEARS. **NO** RECONSTRUCTION, RELOCATION, (EXTERIOR) CHANGES OR ADDITIONS (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 OCCURED. **NO** ADDITIONS ARE PROPOSED TO EXCEED THE LIMIT FOR 5 YEARS FROM THE DATE OF THIS APPLICATION.
2. THE APPLICANT IS AWARE AND CERTIFIES THAT IN A D.R. ZONE, AN ASSISTED LIVING FACILITY I OR II IS NOT PERMITTED WITHIN 1,000 FEET OF ANOTHER PROPERTY WITH AN EXISTING ASSISTED-LIVING FACILITY I OR II OR ANOTHER PROPERTY FOR WHICH AN APPLICATION FOR A USE PERMIT APPLICATION HAS BEEN FILED FOR AN ASSISTED LIVING FACILITY I OR II, PURSUANT TO SECTION 432A.1.A.3, BCZR.
3. THE APPLICANT IS AWARE AND 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.

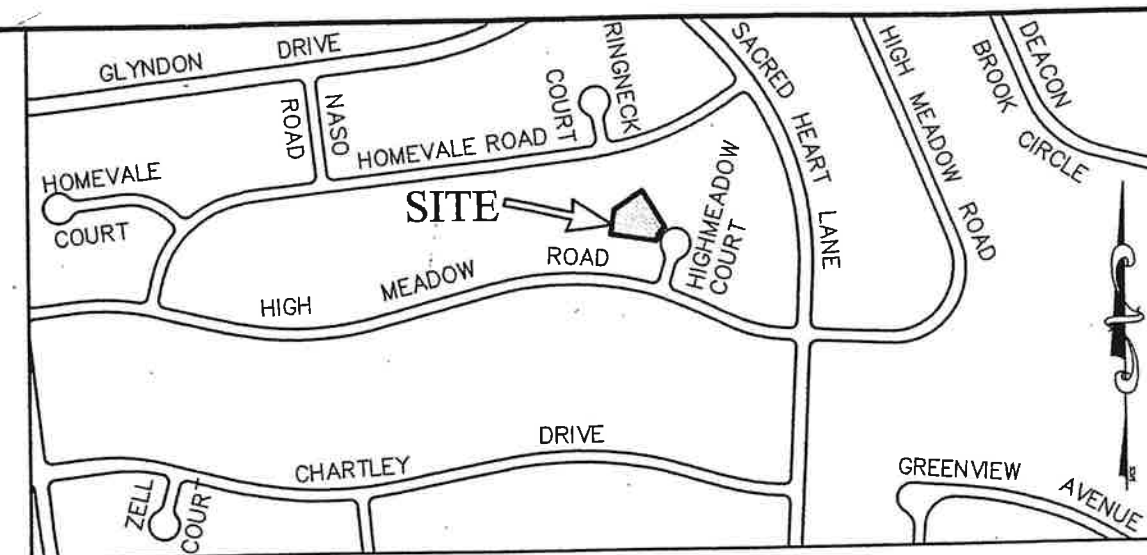
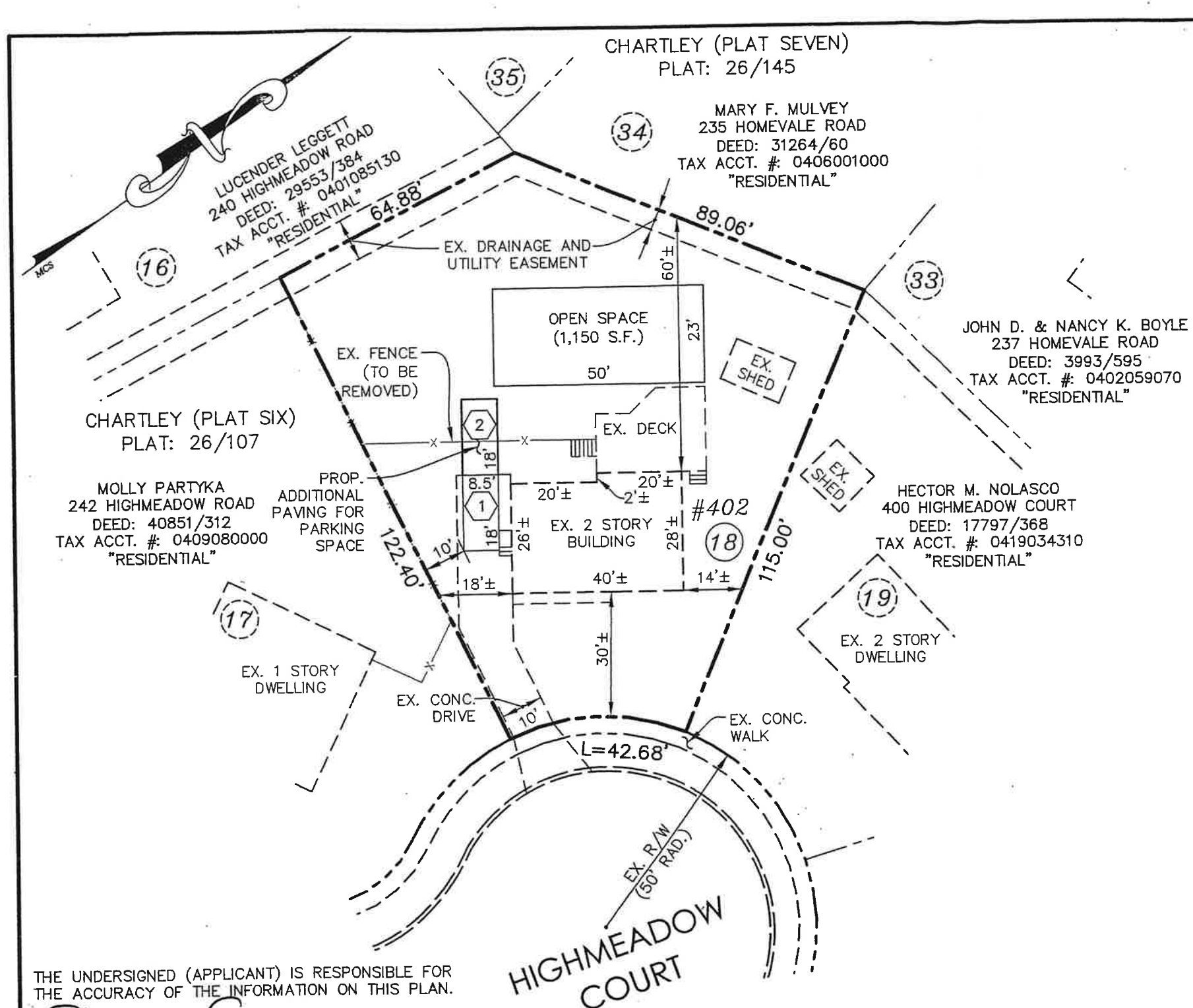


LITTLE & ASSOCIATES, INC.
ENGINEERS~LAND PLANNERS~SURVEYORS
1055 TAYLOR AVENUE, SUITE 307
TOWSON, MARYLAND 21286
PHONE: (410)296-1636 FAX: (410)296-1639

USE PERMIT PLAN FOR ASSISTED LIVING
FACILITY (ALF I) FOR A MAXIMUM OF 4 BEDS
#402 HIGHMEADOW COURT

DISTRICT 4c2
SCALE: 1"=30'
PLAT: 26/107
LOT: 18

BALTIMORE COUNTY, MD
JULY 22, 2019



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SCALE: 1"=500'

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Valerie Gailey
SIGNATURE DATE

VALERIE GAINEY
PRINTED NAME

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JULY 22, 2019