



ZONING USE PERMIT APPLICATION FOR DONATION TRAILERS

BALTIMORE COUNTY ZONING REVIEW OFFICE
DEPARTMENT OF PERMITS, APPROVALS AND INSPECTIONS
COUNTY OFFICE BUILDING, ROOM 124
111 WEST CHESAPEAKE AVENUE
TOWSON, MARYLAND 21204
410-887-3391

LICENSE YEAR: JANUARY 1 THROUGH DECEMBER 31, 2025

(Check boxes that apply)

DONATION TRAILER: ☒ New ☐ Renewal ☐ Temporary Occupancy - \$ 100.00

Make checks payable to "BALTIMORE COUNTY, MARYLAND" (50% Late fee for Renewals received after December 31)

New and Renewal donation trailer applications must be approved for temporary-occupancy. All permit applications for donation trailers must include a Site Plan pursuant to the Zoning Review Office's Non-Residential Checklist:

All donation trailers must comply with the laws and regulations of the Baltimore County Zoning Regulations, Fire Prevention Code, Plumbing Code, Electrical Code, Building Code, County and State Environmental Codes as well as the laws and regulations of the Baltimore County Code.

Donation Trailer Information

Trailer Location 6344 York Road Baltimore MD 21212
Street Address City State Zip Code

Type of Zoning BL CCC Subdivision York Plaza Zoning Use Permit No. _____

Date Trailer was placed at this Location 9/17/21 Size of Trailer (In feet and inches) 43 feet

Use of Trailer (Be specific) donations for secondgoods Currently Occupied? ☒ Yes ☐ No

Sewage Disposal: Metro / Private Existing / Proposed Water Service: Metro / Private Existing / Proposed

Using portable facilities (check one) ☐ No ☒ Yes

Owner/Occupant Information

Owner of Property Wyanness Associates a Maryland general partnership By: KRCX Maryland Realty, LLC. partner Phone No. 443-812-5664

Owner Address c/o Kimco Realty Corporation 500 North Zip Code 11753
Broadway Suite 201 Jericho NY City State

Mailing Name _____ Phone No. _____
(If different from property owner)

Mailing Address _____ Zip Code _____
City State

Name of Occupant TVI Inc dba GreenDrop Phone No. _____
(If different from property owner)

Occupant Address 11400 SE 6th St #125 Bellevue, WA Zip Code 98004
City State

Signature of Occupant [Signature] Date 7/1/24
Authorized Representative

Signature of Property Owner [Signature] Date 7/12/2024
392DB867EF95446

APPROVAL / DISAPPROVAL
(Circle One)

If disapproved, why? _____

Signature of Zoning Review (410-887-3391)

(Reviewer's Signature)

8/8/24
(Date Signed)

Office Use Only

Permit No. _____ Fee: \$100.00 Late Fee _____ Cash Rcpt. No. _____ Cash Rcpt. Date _____

Date Received 8/8/24 Date Issued 8/8/24 Data Entered 8/8/24 Initials TC REV

UP-2024-0003-DT



York Plaza