



Department of Permits, Approvals and Inspections

## Zoning Review Verification & Use Approval for Maryland State Licensing

**IT IS ORDERED** by the Director of the Department of Permits, Approvals and Inspections of Baltimore County on the 18th day of February, 2025.  
Day Month Year

St. John Properties/ Kari Waters is hereby authorized to use and operate a  
Applicants Name  
Office/Warehouse at the location of 8 Easter Court, Suites H-L. The  
Proposed Use of Business Address  
applicant affirms to use and operate under the business name of AES Electrical Expansion.  
Business Name

This use is permitted under Section 253.1 of the Baltimore  
Section Number of BCZR

County Zoning Regulation. The property owner at this address is

Easter Court Property, LLC c/o St. John Properties.  
Property Owner

UP-20-<sup>2025</sup>-0008-MD  
Use Permit Number

  
Zoning Reviewer's Signature

Feb. 18, 2025  
Date

Shaun Crawford  
Zoning Reviewer's Name

Updated 02/11/2025

UP2025-0008-MD

25-0157  
SL



Department of Permits, Approvals, and Inspections

## Zoning Verification & Use Permit Application For Maryland State Licensing

Easter Court Property LLC/ St. John Properties

tipermits@sjpi.com

Name of Property Owner

Email

AES Electrical Expansion

Name of Proposed Business

8 Easter Court, Suites H-L, Owings Mills, MD 21117

Address of Proposed Business

St John Properties/ Kari Waters

Name of Business Owner/Applicant

240-841-1531

tipermits@sjpi.com

Phone Number & Email for Business Owner/Applicant

Describe Proposed Use: Office/ Warehouse for AES Electrical EXPANSION

(demising wall to remain unchanged)

What was the Previous Use? (If unsure please confirm with property owner—must be provided):

Office/ Warehouse

**Please Affirm.** I hereby certify that the matters and facts set forth in the foregoing Application are true to the best of my information, knowledge and belief and that the signatories to this application shall jointly and severally be responsible for complying with all applicable State and County laws and regulations. Any violation of this Use Permit may result in a Civil Penalty. The submitted application may require specific reporting/information which may not be adequate as determined through the review process. Additional information may be required.

Applicant Name: Kari Waters

Applicant Signature: \_\_\_\_\_

*Kari Waters*

Date: 02/12/2025

Please note, if this is a new use of the property or tenant space, a Change of Occupancy permit may be required. Other additional documentation may be required at the time of processing.

**Kari Waters**

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**From:** noreply@baltimorecountymd.gov  
**Sent:** Tuesday, February 18, 2025 11:59 AM  
**To:** TI Permits  
**Subject:** Baltimore County Payment

Thank you for submitting your Permit/License payment online. Your Transaction Number is PMT-25-00404.

Type: Zoning Review Fee

Reference: MDUP

Payment Amt: 100

Please save this email for your reference. This is a system generated email. DO NOT REPLY

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- SJP Helpdesk