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 4th (Day) day of March (Month), 2025 (Year).

Jessica Ogunsola (Applicants Name) is hereby authorized to use and operate a Carry Out Restaturant (Proposed Use of Business) at the location of 7946 Harford rd (Address).

The applicant affirms to use and operate under the business name of: Sea and Soul Cafe (Business Name).

This use is permitted under Section 230.1 (Section Number of BCZR) of the Baltimore County Zoning Regulation. The property owner at this address is Helen H Foudos (Property Owner).

UP-2025 - 0017 -MD
Use Permit Number

John J. Krach III
Zoning Reviewer's Signature — 03/04/2025 Date

John J. Krach III
Zoning Reviewer's Name

Updated 03/04/2025

Zoning Review Office | County Office Building
111 West Chesapeake Avenue, Room 124 | Towson, Maryland 21204 | Phone 410-887-3391 | Fax 410-887-3048
www.baltimorecountymd.gov

25-0194 JJK

Department of Permits, Approvals, and Inspections

Zoning Verification & Use Permit Application For Maryland State Licensing

Helen H. Foudos — eastneck5@gmail.com
Name of Property Owner — Email

Sea and Soul Cafe
Name of Proposed Business

7946 Harford Rd
Address of Proposed Business

Jessica Ogunsola
Name of Business Owner/Applicant

443-251-9256 — Jessicaogunsola@gmail.com
Phone Number & Email for Business Owner/Applicant

Describe Proposed Use: (cleaning only) Carry out ~~Seafood Market~~

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

Same as above

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: Barbara Fortune

Applicant Signature:

Date: 2/25/25

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.

Permits, Approvals and Inspections

111 W CHESAPEAKE AVE
TOWSON, MD 21204
4108873353
WWW.BALTIMORECOUNTYMD.GOV

Cashier: John Krach III

Transaction **102757**

Total	**$100.00**
DEBIT CARD SALE VISA 6172	$100.00

Retain this copy for statement validation

Station: Permit Processing - Mini

25-Feb-2025 4:03:09P
$100.00 | Method: CONTACTLESS
US DEBIT XXXXXXXXXXXX6172
VISA CARDHOLDER
Reference ID: 505600577177
Auth ID: 150704
MID: ********2995
AID: A0000000980840
AthNtwkNm: VISA
RtInd:CREDIT

Payment ZZX4VNFS7AD9J

Clover Privacy Policy
https://clover.com/privacy