25-6257 TC

Department of Permits, Approvals, and Inspections

Zoning Verification & Use Permit Application

Can be used for Maryland State Licensing

Please submit this application to the Zoning Review Office. The form and payment receipt may be hand delivered, mailed to 111 W. Chesapeake Ave., Room 124, Towson, MD 21204, or emailed to paizoning@baltimorecountymd.gov.

Javed Aizaz — Info@KharenandAssociates.org
Name of Property Owner — Email

Karen and Associates, LLC — EIN: 99-0396046
Name of Proposed Business

750 main St STE 302A, Reisterstown MD 21136
Address of Proposed Business — Property Tax Account Number

Karen and Associates, LLC / Travis Louallen
Name of Business Owner/Applicant

667-392-6162
Phone Number & Email for Business Owner/Applicant

Describe Proposed Use: substance use prevention and recovery program. Comar regulations 10.63, levels of service; level 1 OP Level 2.1 intensive outpatient treatment and lvl 2.5 partial hospitaliz

What was the Previous Use? (If unsure please confirm with property owner—must be provided): Non. Clinical Associates was the previous use, and this was used as a physicans office.

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: Travis Louallen

Applicant Signature: Travis Louallen

Date: 3/6/2025

Please note, if this is a new use of the property or tenant space, a Change of Occupancy permit may be required. For all food services, you must contact the Health Department for a Food Service Permit. Other additional documentation may be required at the time of processing.

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 13 (Day) day of March (Month), 2025 (Year).

Travis Louallen (Applicants Name) is hereby authorized to use and operate a Substance use prevention/recove (Proposed Use of Business) at the location of 750 Main Street (Address).

The applicant affirms to use and operate under the business name of: Karen and Associates, LLC (Business Name).

This use is permitted under Section 230 (Section Number of BCZR) of the Baltimore County Zoning Regulation. The property owner at this address is Javed Aizaz (Property Owner).

UP-2025 -0025 -MD
Use Permit Number

3/13/25
Zoning Reviewer's Signature — Date

Tyler Cox
Zoning Reviewer's Name

Facility can not be detoxification facility. Under title 8 subtitle 4.

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