Department of Permits, Approvals and Inspections

Zoning Review Use and Occupancy Approval for Maryland State Licensing

IT IS ORDERED by the Director of the Department of Permits, Approvals and Inspections of Baltimore County on the 25 (Day) day of March (Month), 2025 (Year).

Joel Camacho (Applicants Name) is hereby authorized to use and operate a Wholesale office / service garage (Proposed Use of Business) at the location of 11501 Reisterstown Rd (Address).

The applicant affirms to use and operate under the business name of: High Falcon Auto Repair (Business Name).

This use is permitted under Section 233 (Section Number of BCZR) of the Baltimore County Zoning Regulation. The property owner at this address is Joel Camacho (Property Owner).

UP-2025-0030-MD
Use Permit Number

Chris. Fk — 3-25-2025

Zoning Reviewer's Signature — Date

Chris Fk

Zoning Reviewer's Name

Updated 03/04/2025

Department of Permits, Approvals, and Inspections

Zoning Use and Occupancy 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.

Joel Camacho — Highfalcon autoservice@gmail.com.
Name of Property Owner — Email

Highfalcon Auto Repair
Name of Proposed Business

11501 Reisterstown Rd. — 04030012-77
Address of Proposed Business — Property Tax Account Number

Joel Camacho
Name of Business Owner/Applicant

410 493 1035 — Joelmarin69@gmail.com.
Phone Number & Email for Business Owner/Applicant

Describe Proposed Use: Wholesale dealer. ~~Mechanic~~ Auto repairs.

What is the existing use? **Information is Required** (If unsure, confirm with property owner). If vacant, please list previous use:

Garage. cars repairs offices

Affirmation: 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: Joel Camacho

Applicant Signature: _____ Date: 03-25-2025

Note: Any new construction or alterations require a building permit. 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 Environmental Health Services Department for a Food Service Permit, ehs@baltimorecountymd.gov. Additional documentation such as a copy of the State of Maryland Application or State License may be required at the time of processing.

Rev. 3/5/2025

Permits, Approvals and Inspections
111 W CHESAPEAKE AVE
TOWSON, MD 21204
4108873353
WWW.BALTIMORECOUNTYMD.GOV

Cashier: Christina F.
25-Mar-2025 1:54:47P

Transaction **102822**

1	Zoning Counter Form Approvals	$100.00
Total		**$100.00**
CREDIT CARD SALE MASTERCARD 1092		$100.00

Retain this copy for statement validation

Station: Permit Processing - Mini

25-Mar-2025 1:54:54P
$100.00 | Method: CONTACTLESS MASTERCARD
XXXXXXXXXXXX1092
Reference ID: 508400578758
Auth ID: 03644Q
MID: ********2995
AID: A0000000041010
AthNtwkNm: MASTERCARD

Clover ID: TE4TWCCYS6WXE
Payment YSKAZE975R1EY

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