



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 9 day of 4, 2025.
Day Month Year

Annette Leach is hereby authorized to use and operate a
Applicants Name
Retail of Professional Salon Products at the location of 9932 Reisterstown Rd.
Proposed Use of Business Address

The applicant affirms to use and operate under the business name of:
SalonCentric Inc. dba SalonCentric

Business Name

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

County Zoning Regulation. The property owner at this address is
Annette Leach

Property Owner

UP-2025 -0041 -MD
Use Permit Number

C. P. Gutwald
Zoning Reviewer's Signature

4-9-2025 CF
Date

CP Gutwald
Zoning Reviewer's Name

Updated 03/04/2025

25-0373 Cyt



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.

St Thomas GGCAL LLW

meldridge@ggcommercial.com

Name of Property Owner

Email

SalonCentric Inc. dba SalonCentric

Name of Proposed Business

9932 Reisterstown Road

0323077030

Address of Proposed Business

Property Tax Account Number

Annette Leach

Name of Business Owner/Applicant

463-206-7595 & annette.leach@saloncentric.com

Phone Number & Email for Business Owner/Applicant

Describe Proposed Use: Retail - sale of salon professional products to licensed beauty professionals

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

Vacant - prior use was liquor store

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: Annette Leach

Applicant Signature: Annette Leach Date: 04-03-2025

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.

Megan Eldridge

From: noreply@baltimorecountymd.gov
Sent: Thursday, April 3, 2025 4:22 PM
To: Megan Eldridge
Subject: [EXTERNAL] Baltimore County Payment

This Message originated outside Greenberg Gibbons Commercial.

Thank you for submitting your Permit/License payment online. Your Transaction Number is PMT-25-00843.

Type: Zoning Review Fee

Reference: ZVUP

Payment Amt: 100

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

PD Box 8200

PMT-25-00834	AP0A9CA65A53	363587	363949	429467	Isaac Boletsky	iboletsky@rosevillehc.com	4/3/25 10:09 am	\$202.00
PMT-25-00836	AH1A5C206584	363612	363939	128066	Kinder Care Ce	301117@kindercare.com	4/3/25 1:24 pm	\$151.00

Number of Records: 2

Total Payments Received: \$353.00

Zoning Review Fee

PMT-25-00843	AZ0A0DE3BBE1	363637	363962	ZVUP	Megan Eldridge	meldridge@ggcommercial.com	4/3/25 4:22 pm	\$100.00
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Number of Records: 1

Total Payments Received: \$100.00

Grand Total: \$17,437.69