



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 10 day of April, 2025.
Day Month Year

Aaron Loeb is hereby authorized to use and operate a
Applicants Name
Retail Paint Store at the location of 11130 Reisterstown rd Ov.
Proposed Use of Business Address

The applicant affirms to use and operate under the business name of:
Benjamin Moore Suburban Paint
Business Name

This use is permitted under Section 233 of the Baltimore
Section Number of BCZR
County Zoning Regulation. The property owner at this address is
11130 Reisterstown LLC
Property Owner

UP-2025 - 0042 -MD
Use Permit Number

Jesse Krout
Zoning Reviewer's Signature

Digitally signed by Jesse Krout
Date: 2025.04.10 09:30:02 -04'00'

4/10/25
Date

Jesse Krout
Zoning Reviewer's Name

Updated 03/04/2025

25-0338 JK



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.

11130 Reisterstown LLC
Name of Property Owner

monah@tiderecapital.com
Email

Benjamin Moore Suburban Paint
Name of Proposed Business

11130 Reisterstown Rd Owings Mills, MD 21117
Address of Proposed Business

Property Tax Account Number

LT New Square LLC
Name of Business Owner/Applicant

Tel: 443-261-4870 Email: aloeb@tiderecapital.com
Phone Number & Email for Business Owner/Applicant

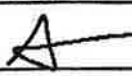
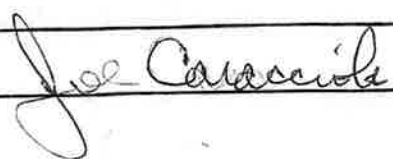
Describe Proposed Use: Retail Paint Store

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

Mattress Warehouse Retail Store

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: Aaron Loeb

Applicant Signature:  

Date: 3/13/2025

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.