Requested Zoning

Search Street:

COLLEGE AVE

Next

Property Information:

Amendment No.: 25.004
Current Zoning: POR
Requested Zoning: R-A-15
Tax Account ID.: 1402218569

Map: 25 Grid: 20

Parcel: 93 Lot:

Acres: 3.5

Address: 4122 COLLEGE AVE

City/State/Zip: ELLICOTT CITY, MD 21043

Owner:

Name: HISTORIC ELLICOTT PROPERTIES INC

Email: btaylor@taylorservice.com

Phone: 410-465-3500

Mailing Address: PO BOX 396

City/State/Zip: ELLICOTT CITY, MD 21041

Representative:

Name: Joseph Rutter Email: jrutter@ldandd.com Phone: 443-367-0420

Mailing Address: 5300 Dorsey Hall Drive, Suite 202

City/State/Zip: Ellicott City, MD 21042

Decision:

Planning Board Decision:
Planning Board Vote:
Council Decision:
Council Vote:

Zoning Map Amendment Request Form

Howard County Comprehensive Zoning Plan Department of Planning and Zoning

Mailing street address

or Post Office Box

Telephone (Main)

City, State

ZIP

[Word 2007 Version]
Before filling out this form, please read the Instructions section at the end of the form.

	Property Information	4122								
1	Address / Street (Only)	4100	COLL	LEGE AVENU					•	
2	Tax Map Number	25	••	Grid		20				
3	Parcel(s)	93		NAMESON IN STREET				****		
4	Lot(s)				ang mang and a sage age ag					
5	Tax Account Data:	District	02	Accoun	t.#	218569				
6	Size of Property:	Acres		3.5	Square	feet				
							,, .,	****		<i></i>
7	The Property is currently I request that the Proper		o:		POR R-A-15					
7 B. 8	The state of the s			F	R-A-15					
	I request that the Proper Owner Information	ty be rezoned t	LICOT	T PROPERTI	R-A-15					
8	I request that the Proper Owner Information Owner Name Mailing street address	ty be rezoned t	LICOT	T PROPERTI	R-A-15					
8	I request that the Proper Owner Information Owner Name Mailing street address or Post Office Box	ty be rezoned t HISTORIC EL 4100 COLLEG	LICOT	T PROPERTI	R-A-15					
8	I request that the Proper Owner Information Owner Name Mailing street address or Post Office Box City, State	HISTORIC EL 4100 COLLEG ELLICOTT CI	LICOT SE AVEI TY, MD	T PROPERTI	R-A-15					
8	I request that the Proper Owner Information Owner Name Mailing street address or Post Office Box City, State ZIP Code	HISTORIC EL 4100 COLLEG ELLICOTT CI 21043 410-465-3500	LICOT SE AVEI TY, MD	T PROPERTI	R-A-15					
8	I request that the Proper Owner Information Owner Name Mailing street address or Post Office Box City, State ZIP Code Telephone (Main)	HISTORIC EL 4100 COLLEG ELLICOTT CI 21043 410-465-3500	LICOT SE AVEI TY, MD	T PROPERTI	R-A-15					

5300 DORSEY HALL DRIVE SUITE 102

ELLICOTT CITY, MD

443-367-0422

21042

12 D. A	Telephone (Secondary) Fax E-Mail Association with Owner Alternate Contact [If An	410-977-1327 443-367-0420 JRUTTER@LDANDD.COM DESIGNATED REPRESENTA	TIVE		
12 D. A	E-Mail Association with Owner Alternate Contact [If An	JRUTTER@LDANDD.COM DESIGNATED REPRESENTA	TIVE		
12 D. A	Association with Owner	DESIGNATED REPRESENTA	TIVE		
D. A	Alternate Contact [If An		TIVE		
	rang katalang dikantang pilang matalang manggalang matalan manahan milang 1876.	y]			
	Name				
	and an experience of the first processing in the first process of the fi	RONALD SPAHN	"		
	Telephone	410-992-9700			
F F	E-Mail	RLSPAHN@NETSCAPE.NET			
L, L	xplanation of the Basis	/ Justification for the Req	uested Rezoning		
	SITE. THE REQUEST INC FOR THE PROPOSED ZOO AND AVOID THE UNDES! PROPERTY AS AN OFFICE	WORK AND PROVIDE FOR TO CLUDES PART OF PARCEL 73 NING. THE REQUEST IS TO CRABLE TRAFFIC IMPACT THE E PARK. WHILE THE PROPO THAN PERMITTED IN POR IT	BAND 93. THE ATTACH PREPARE FOR THE EVE AT WOULD RESULT FRO ISED R-A-15 ZONING W	ED PLAT PROVIDES A NTUAL MOVE OF THE DM REDEVELOPMENT O ILL RESULT IN A LOWI	BOUNDARY HOSPITAL OF THIS ER
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F. L	ist of Attachments/Exh	ibits			
	SDAT, TAX MAP				
		IGNATING R-A-15 AREA TO	BE REZONED		•
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i	·	• • • • • • • • • • • • • • • • • • • •			,
G. S	Signatures				
15	Owner BRUCE TAYLOR	· · · · · · · · · · · · · · · · · · ·	Owner (2)		
Ì	Bru. =	Jan Pren			
	Date 2/10]	12	Date		
	Additional owner signatur	es? X the box to the left and	attach a separate signatu	re page.	
	Representative JC	SEPH RUTTER			
; ;	Signature				
	Date				
	1 / it /		[] to the second process and the second of		
D BZ	Use Only		Amendment No.	1 C 100 L	

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Go Back View Map

New Scarch Maryland Department of Assessments and Taxation Real Property Data Search (vw5.1A) GroundRent Redemption HOWARD COUNTY **GroundRent** Registration District - 02 Account Number - 218542 Account Identifier: Owner Information COMMERCIAL HOWARD COUNTY SANITARIUM CO INC Use: Owner Name: 4100 COLLEGE AVE Principal Residence: Deed Reference: 1)/00084/00588 PO BOX 396 Mailing Address: ELLICOTT CITY MD 21041-0396 Location & Structure Information **Legal Description** Premises Address 55,399 A. 4189 NEW CUT RD 4189 NEW CUT RD **FLLICOTT CITY 21043-0000 ELLICOTT CITY** Plat No: Sub District Subdivision Section Block <u>Lot</u> **Assessment Area** <u>Grid</u> Map <u>Parcel</u> 0000 Plat Ref: 0020 0073 0025 NONE Town Ad Valorem 104 Special Tax Areas Tax Class **County Use Property Land Area** Primary Structure Built Enclosed Area 55.3900 AC 78265 1954 Basement Exterior Type Stories OFFICE BUILDING Value Information Base Value **Value** Phase-in Assessments As Of As Of 01/01/2012 07/01/2012 07/01/2013 4,269,500 4,269,500 Land 4,716,700 3,973,300 Improvements: 8,242,800 8,986,200 8,242,800 8,242,800 Total: Preferential Land: Transfer Information Price: Date: Seller: Deed2: Deed1: Type:

Type:	Deed1:	<u>1) e</u>	eaz:	
	Exemption Information			
Partial Exempt Assessments	<u>Class</u>	07/01/2012	07/01/2013	
County	000	0.00		
State	000	0.00		
Municipal	000	0.00	0.00	
Tax Exempt:		Special Tax F	Recapture:	
Exempt Class:		NON	E	
	Homestead Application Information			

Date:

Deed1:

Date:

Price:

Deed2:

Price:

Homestead Application Status: No Application

Seller:

Type:

Seller:

Go Back View Map

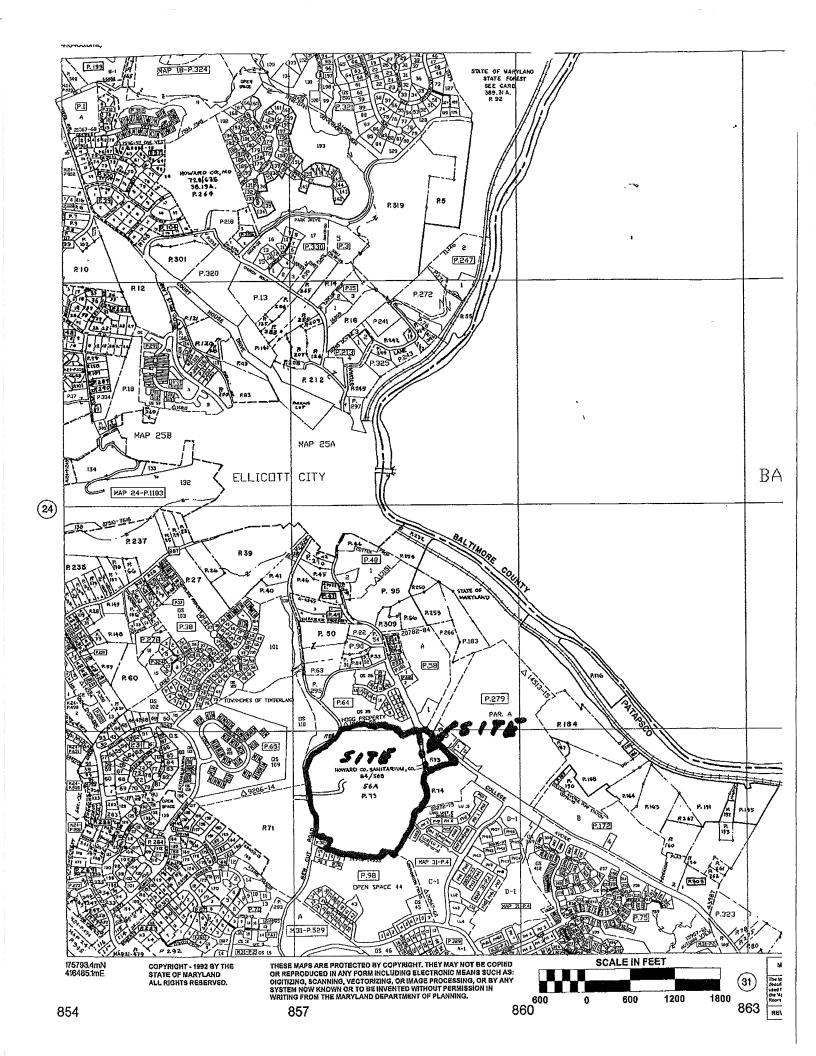
Exempt Class:

Homestead Application Status:

Maryland Department of Assessments and Taxation New Search GroundRent Real Property Data Search (vw6.2A) HOWARD COUNTY Redemption GroundRent Registration District - 02 Account Number - 218569 Account Identifier: Owner Information HISTORIC ELLICO'IT PROPERTIES INC COMMERCIAL/RESIDENTIAL Use: Owner Name: 4100 COLLEGE AVE Principal Residence: PO BOX 396 Deed Reference: 1)/05051/00629 Mailing Address: ELLICOTT CITY MD 21041-0396 Location & Structure Information **Legal Description** Premises Address 3.5 A COLLEGE AVE ELLICOTT CITY 21043-0000 COLLEGE AVE ELLICOTT CITY Plat No: Subdivision Block Assessment Area **Sub District** Section Lot <u>Map</u> <u>Grid</u> **Parcel** 0000 Plat Ref: 0025 0020 0093 Town NONE Ad Valorem 104 Special Tax Areas Tax Class County Use Property Land Area **Primary Structure Built Enclosed Area** 3,5000 AC Stories Basement Exterior Type Value Information Phase-in Assessments Base Value Value As Of As Of As Of 07/01/2012 07/01/2013 01/01/2012 Land 594,500 594,500 271,400 271,400 Improvements: 865,900 865,900 865,900 865,900 Total: Preferential Land: Transfer Information HISTORIC ELLICOTT PROPERTIES Price: \$55,872 12/24/1998 Date: Seller: /05051/00629 NON-ARMS LENGTH OTHER Deed1: Deed2: Type: 03/13/1998 Price: \$430,924 Date: Seller: HOWARD COUNTY SANATORIUM Deed1: /04215/ 00503 Deed2: ARMS LENGTH IMPROVED Type: Price: Date: Seller: Deed2: Deed1: Type: **Exemption Information** 07/01/2013 Class 07/01/2012 Partial Exempt Assessments 0.00 000 County 000 0.00 State 0.00 000 0.00 Municipal Special Tax Recapture: Tax Exempt: NONE

No Application

Homestead Application Information





Howard County Council

George Howard Building 3455 Court House Drive Ellicott City, Maryland 21043-4392 COUNCILMEMBERS

Jennifer Terrasa, Chairperson
District 3
Mary Kay Sigaty, Vice Chairperson
District 4
Courtney Watson
District 1
Calvin Ball
District 2
Greg Fox
District 5

March 11, 2013

Historic Ellicott Prop., Inc. P.O. Box 396 Ellicott City, MD 21041

Dear Sir or Madam:

You are receiving this letter because you filed a Zoning Map Amendment Request Form/Howard County Comprehensive Zoning Plan or a Zoning Regulation Amendment Request Form/Howard County Comprehensive Plan.

Please be advised that on March 7, 2013, the Howard County Ethics Commission determined that the Zoning Map Request Form needs to be accompanied by certain affidavits and disclosures. The Commission also determined that the Zoning Regulation Amendment Form needs to be accompanied by certain affidavits and disclosures when the Form proposes to "increase the density of the land of the applicant."

The Commission directed me to notify applicants of their obligation to file the affidavit and disclosure. The obligation is set forth in Md. Code Ann., St. Gov't, Sec. 15-849(b), which provides in part, "the affidavit or disclosure shall be filed at least 30 calendar days prior to any consideration of the application by an elected official."

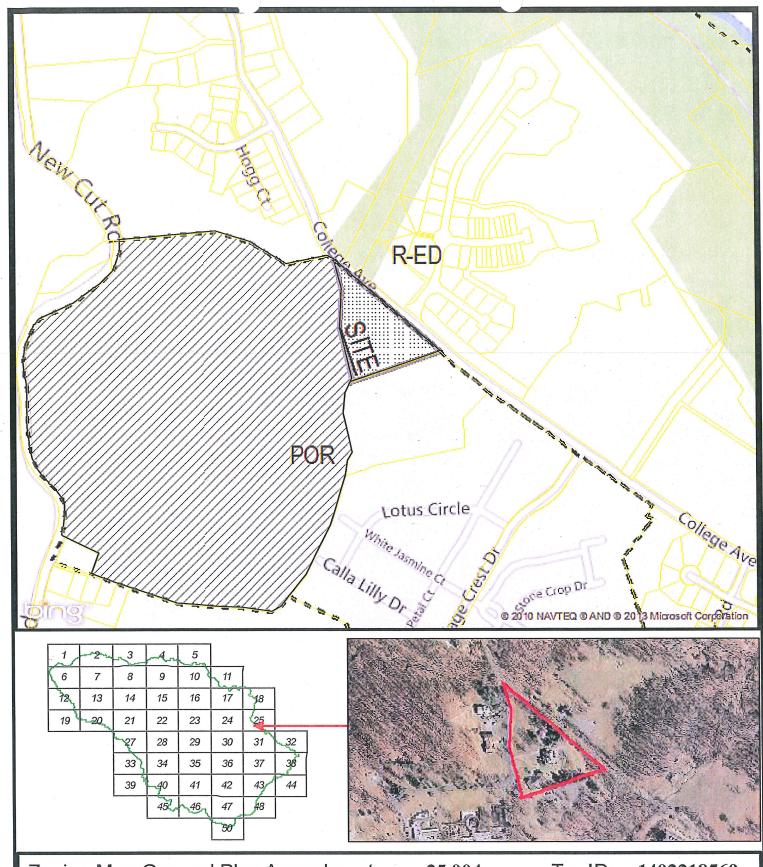
Accordingly, I am enclosing for your use the approved affidavit packet. Completed forms may be mailed to the Administrative Assistant to the Zoning Board at 3430 Court House Drive, Ellicott City, MD 21043.

Very truly yours,

Stephen M. LeGendre Administrator

(410) 313-2001

fax: (410) 313-3297 http://cc.howardcountymd.gov tty: (410) 313-6401



Zoning Map General Plan Amendment:

25.004

Tax ID: 1402218569

Current Zoning: POR

43.004

Council District:

1

Tax Map:

25

Grid:

20 Parcel:

93

Lot: N/A

Address: 4122 COLLEGE AVE

ADJOINING PROPERTY OWNERS FOR 4100 COLLEGE AVENUE

Howard County Dept. of Public Works 3430 Courthouse Drive Ellicott City, MD 21043 (24.003)(25.002) (43.008) (43.006)

Taylor Ellicott City Properties, Inc. P.O. Box 396 Ellicott City, MD 21041 (25.002) **[]**

Requested Zoning

Search Street:

COLLEGE AVE

Next

Property Information:

Amendment No.: 25.002 Current Zoning: POR Requested Zoning: R-A-15 Tax Account ID.: 1402218542

> Map: 25 Grid: 20 Parcel: 73 Lot:

> > Acres: 55.39

Address: 4100 COLLEGE AVE

City/State/Zip: ELLICOTT CITY, MD 21043

Owner:

Name: HOWARD COUNTY SANITARIUM CO INC

to - IOD aganing our

Email: btaylor@taylorservice.com

Phone: 410-465-3500

Mailing Address: PO BOX 396

City/State/Zip: ELLICOTT CITY, MD 21041

Representative:

Name: Joseph Rutter Email: jurtter@ldandd.com Phone: 443-367-0420

Mailing Address: 5300 Dorsey Hall Drive, Suite 202

City/State/Zip: Ellicott City, MD 21042

Decision:

Planning Board Decision:

Planning Board Vote: Council Decision:

Council Vote:

Zoning Map Amendment Request Form

Howard County Comprehensive Zoning Plan Department of Planning and Zoning

[Word 2007 Version]
Before filling out this form, please read the
Instructions section at the end of the form.

A.	Prop	erty Information	
1		ess / Street (Only)	4100 COLLEGE AVENUE
2		Map Number	25 Grid 20
3	Parc		73
4	Lot(District 02 Account # 218542
5	Tax	Account Data:	District 02 Account # 2103 12
6	Size	of Property:	Acres 55.399 Square feet
7	I re	e Property is currently equest that the Proper	ty be rezoned to:
В	. Ow	ner Information	HOWARD COUNTY SANITARIUM CO. INC. AKA TAYLOR SERVICE COMPANY
8		wner Name	
9) M 0	lailing street address r Post Office Box	4100 COLLEGE AVENUE
		ity, State	ELLICOTT CITY, MD
	1.060	IP Code	21043
		Felephone (Main)	410-465-3500 RECEIVED
		Felephone (Secondary	RECEIVED
	. 11.11	₹ax	BTAYLOR@TAYLORSERVICE.COM
:	10 E	E-Mail	BTAYLOR@TAYLORSERVICE.COM DEC 1 1 2012
	6 D	epresentative Inform	mation
	63	وه و در مصوره و بوه و دو و دو و در مصوره و دو دو دو مصوره و با مساور دو مصوره و مصوره و مصوره و موجود و موجود در دو دو و و دو دو دو و دو دو دو دو دو دو	JOSEPH RUTTER DIV. OF PUBLIC SERVICE & ZONING
:		Name	
:		Mailing street address or Post Office Box	
		City, State	ELLICOTT CITY, MD
		ZIP	21042
	4	Telephone (Main)	443-367-0422

C.	Representative Informa	ation		
	Telephone (Secondary)	410-977-1327	•	
	Fax	443-367-0420		
	E-Mail	JRUTTER@LDANDD.COM		
12	Association with Owner	DESIGNATED REPRESENTAT	TVE	· · · · · · · · · · · · · · · · · · ·
	MA (10) 20 DO 1 (10) 10 (10) 1			
D.	Alternate Contact [If A	1y]		
,	Name	RONALD SPAHN		
	Telephone	410-992-9700		
ı	E-Mail	RLSPAHN@NETSCAPE.NET		
E.	Explanation of the Basis	s / Justification for the Req	uested Rezoning	
	ROAD AND UTILITY NET SITE. THE REQUEST IN FOR THE PROPOSED ZO AND AVOID THE UNDES PROPERTY AS AN OFFICE	NING. THE REQUEST IS TO I IRABLE TRAFFIC IMPACT THA E PARK. WHILE THE PROPOS	IE TRANSITION TO MULTI- AND 93. THE ATTACHED I PREPARE FOR THE EVENTU IT WOULD RESULT FROM F SED R-A-15 ZONING WILL I	FAMILY HOUSING AT THE PLAT PROVIDES A BOUNDARY JAL MOVE OF THE HOSPITAL REDEVELOPMENT OF THIS
	· · · · · · · · · · · · · · · · · · ·			•
F.	List of Attachments/Exh	nibits		
	SDAT, TAX MAP			
:	•	SIGNATING R-A-15 AREA TO E	E REZONED	
	:			
		·		
G.	Signatures			
15	Owner BRUCE TAYLOR		Owner (2)	
: ··		Dans Prosident		
-	Date 12/10/12		Date	
	Additional owner signatur	res? X the box to the left and a	ttach a separate signature pa	age.
		A MARIE DE L'AMBRETE		
16	Representative JC Signature	DSEPH RUTTER		
	Date			
:	PROPERTY OF THE PROPERTY OF TH			
DD	ZII- OIII		Amondment No. 10 r	~^^
15,000,000	Z Use Only		Amendment No. 2	5,002
I NOI	es			

1

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Howard County Council

George Howard Building 3454 Court House Drive Ellicott City, Maryland 21043-4392 COUNCILMEMBERS

Jennifer Terrasa, Chairperson
District 3
Mary Kay Sigaty, Vice Chairperson
District 4
Courtney Watson
District 1
Calvin Ball
District 2
Greg Fox
District 5

March 11, 2013

Howard County Sanitarium Co., Inc. P.O. Box 396 Ellicott City, MD 21041

Dear Sir or Madam:

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Very truly yours,

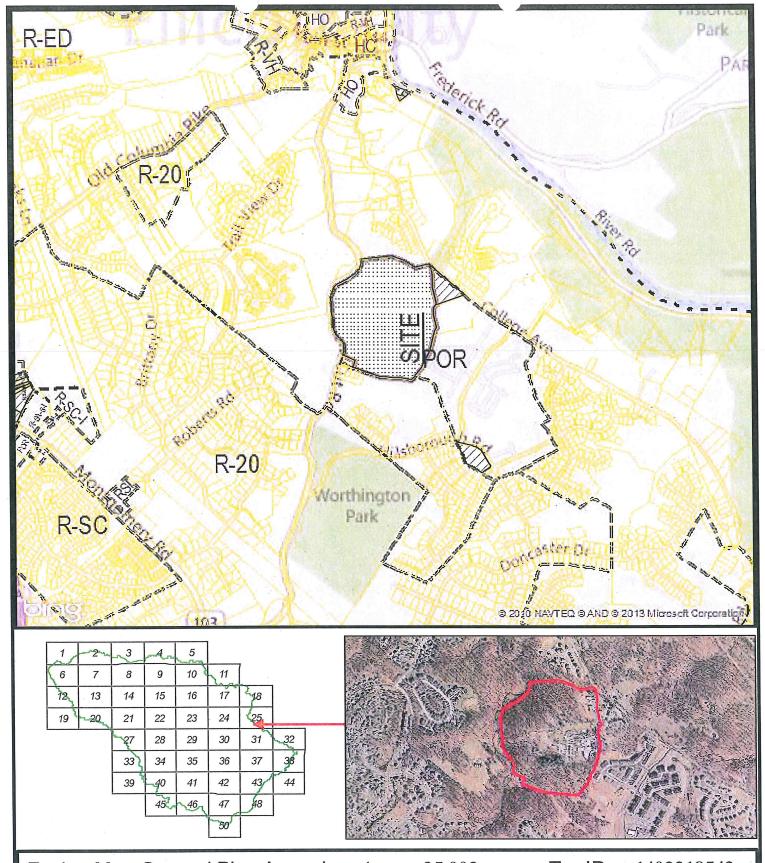
Stephen M. LeGendre

Hepher Wlebendr

Administrator

(410) 313-2001

fax: (410) 313-3297 http://cc.howardcountymd.gov tty: (410) 313-6401



Zoning Map General Plan Amendment:

25.002

Tax ID: 1402218542

Current Zoning: POR

Council District:

1

Tax Map:

25

Grid:

20 Parcel:

73

Lot: N/A

Address: 4100 COLLEGE AVE

Regner, Robin

25009

From:

Tolliver, Sheila

Sent:

Monday, June 17, 2013 12:37 PM Regner, Robin; Wimberly, Theo

To: Subject:

FW: Taylor Hospital Property zoning request

Attachments:

Hospital.pdf; Taylor Zoning Exhibit R-A-15 Req 121012.pdf

From: Bruce Taylor [mailto:btaylor@taylorservice.com]

Sent: Tuesday, June 11, 2013 7:05 PM

To: CouncilMail

Cc: Terrasa, Jen; Watson, Courtney; Sigaty, Mary Kay; Ball, Calvin B; Fox, Greg; Don Reuwer; 'Joe Rutter'; Sang Oh

(soh@talkin-oh.com)

Subject: Taylor Hospital Property zoning request

"Hospital properties" requested to go from existing POR (with essentially no density limit) to R-A-15.

Taylor Service Company (the new legal name for Howard County Sanitarium Company)

parcel 73: 14.78 acres of 55.39 acres

Historic Ellicott Properties:

parcel 93: 1.94 acres of 3.5 acres on tax records, (3.13 acres by survey)

Total requested acreage for R-A-15 is: 16.72 acres outlined in red on the attached plan and as listed on the attached rezoning request

The total POR "hospital property" also includes parcel 74 of 6.7 acres owned by Taylor Ellicott City Properties (the new legal name for Taylor Psychiatric Association), but not included in this request.

Thus the total POR "hospital property" is 65.59 acres by tax records in three parcels with the request to re-zone 25.49% of the total or 16.72 acres as R-A-15.

The number of units shown on the plan is:

3 apartment or condo buildings of 52 units each = 156 units

15 groups of 5 Townhomes and one group of 4 townhomes = 79 Townhomes

Total 235 Units

Also shown on the plan as part of this portion of the properties where R-A-15 is requested is a club house and pool facility that will supplement the existing facilities of the Taylor Properties Community Association on Village Crest Drive and Cyprus Cedar. On both sides of Village Crest Drive there are currently 432 senior units, 220 of these are in 12, 14 or 16 unit condominiums, the rest are in townhomes or "villas", with 15 more elevator townhomes to come in 2014 along Taylor Way, for a total of 447 senior units in this part of Taylor Village.

Thank you,

Bruce T. Taylor, M.D. Office: 410-465-3674 Cell: 410-868-9871

Regner, Robin

From:

Tolliver, Sheila

Sent:

Monday, June 17, 2013 12:37 PM Regner, Robin; Wimberly, Theo

To: Subject:

FW: Taylor Hospital Property zoning request

Attachments:

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Cc: Terrasa, Jen; Watson, Courtney; Sigaty, Mary Kay; Ball, Calvin B; Fox, Greg; Don Reuwer; 'Joe Rutter'; Sang Oh

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Thank you,

Bruce T. Taylor, M.D. Office: 410-465-3674 Cell: 410-868-9871

Zoning Map Amendment Request Form

Howard County Comprehensive Zoning Plan

Department of Planning and Zoning

[Word 2007 Version]
Before filling out this form, please read the
Instructions section at the end of the form.

A. Property Information

1 Address / Street (Only)

4100

COLLEGE AVENUE

2 Tax Map Number

25

Grid

20

3 Parcel(s)

73

4 Lot(s)

5 Tax Account Data:

District

02

Account #

218542

6 Size of Property:

Acres

55.399

Square feet

7 The Property is currently zoned:

POR

I request that the Property be rezoned to:

R-A-15

B. Owner Information

8 Owner Name

HOWARD COUNTY SANITARIUM CO. INC. AKA TAYLOR SERVICE COMPANY

9 Mailing street address

or Post Office Box

4100 COLLEGE AVENUE

City, State

ELLICOTT CITY, MD

ZIP Code

21043

Telephone (Main)

410-465-3500

Telephone (Secondary)

Fax

10 E-Mail

BTAYLOR@TAYLORSERVICE.COM

C. Representative Information

11 Name

JOSEPH RUTTER

Mailing street address or Post Office Box

5300 DORSEY HALL DRIVE SUITE 102

City, State

ELLICOTT CITY, MD

ZIP

21042

Telephone (Main)

443-367-0422

C.	Representative Informa	ition	
	Telephone (Secondary)	410-977-1327	
	Fax	443-367-0420	
	E-Mail	JRUTTER@LDANDD.COM	
12	Association with Owner	DESIGNATED REPRESENTATIV	'É
D.	Alternate Contact [If Ar	ıy]	
	Name	RONALD SPAHN	
	Telephone	410-992-9700	
	E-Mail	RLSPAHN@NETSCAPE.NET	
E. I	Explanation of the Basis	s / Justification for the Reque	sted Rezoning
13	PROPOSAL IS TO MAINT ROAD AND UTILITY NET SITE. THE REQUEST IN FOR THE PROPOSED ZO AND AVOID THE UNDES PROPERTY AS AN OFFICE	TAIN THE HOSPITAL ON A PORT TWORK AND PROVIDE FOR THE CLUDES PART OF PARCEL 73 AN INING. THE REQUEST IS TO PR ITABLE TRAFFIC IMPACT THAT TE PARK. WHILE THE PROPOSE	AND PERMITS AGE RESTRICTED HOUSING. THE ION OF THE PROPERTY, ESTABLISH AN INTERNAL TRANSITION TO MULTI-FAMILY HOUSING AT THE ND 93. THE ATTACHED PLAT PROVIDES A BOUNDARY EPARE FOR THE EVENTUAL MOVE OF THE HOSPITAL WOULD RESULT FROM REDEVELOPMENT OF THIS D R-A-15 ZONING WILL RESULT IN A LOWER THE APPROPRIATE DEVELOPMENT MIX FOR THE SITE.
F.	List of Attachments/Exl	nibits	and the second s
14	SDAT, TAX MAP		
	PLAT OF PROPERTY DES	SIGNATING R-A-15 AREA TO BE	REZONED
	··· v		
G.	Signatures		
15	Owner BRUCE TAYLOR	₹	Owner (2)
	Date 1		Date
	Additional owner signatu	res? X the box to the left and att	ach a separate signature page.
16	Representative J Signature	OSEPH RUTTER	
	Date		
DPZ	Z Use Only		Amendment No.
Not	es		
1			

Zoning Map Amendment Request Form

Howard County Comprehensive Zoning Plan

Department of Planning and Zoning

[Word 2007 Version]
Before filling out this form, please read the
Instructions section at the end of the form.

A. Property Information

1 Address / Street (Only)

4100

COLLEGE AVENUE

2 Tax Map Number

25

Grid

20

3 Parcel(s)

93

Lot(s)

5 Tax Account Data:

District

02 Account #

218569

6 Size of Property:

Acres

3.5

Square feet

7 The Property is currently zoned:

POR

I request that the Property be rezoned to:

R-A-15

B. Owner Information

8 Owner Name

HISTORIC ELLICOTT PROPERTIES, INC.

9 Mailing street address

or Post Office Box

4100 COLLEGE AVENUE

City, State

ELLICOTT CITY, MD

ZIP Code

21043

Telephone (Main)

410-465-3500

Telephone (Secondary)

Fax

10 E-Mail

BTAYLOR@TAYLORSERVICE.COM

C. Representative Information

11 Name

JOSEPH RUTTER

Mailing street address or Post Office Box

5300 DORSEY HALL DRIVE SUITE 102

City, State

ELLICOTT CITY, MD

ZIP

21042

Telephone (Main)

443-367-0422

_				
C.	Representative Informa			
	Telephone (Secondary)			
	Fax	443-367-0420		
	E-Mail	JRUTTER@LDANDD.COM		
12	Association with Owner	DESIGNATED REPRESENTATIV	' E	
D.	Alternate Contact [If Ar	ıy]		
	Name	RONALD SPAHN		
	Telephone	410-992-9700		
	E-Mail	RLSPAHN@NETSCAPE.NET		
E.	Explanation of the Basis	s / Justification for the Reque	sted Rezoning	
	ROAD AND UTILITY NET SITE. THE REQUEST IN FOR THE PROPOSED ZO AND AVOID THE UNDES PROPERTY AS AN OFFICE	NING. THE REQUEST IS TO PR IRABLE TRAFFIC IMPACT THAT E PARK. WHILE THE PROPOSE	TRANSITION TO MULT ND 93. THE ATTACHED EPARE FOR THE EVENT WOULD RESULT FROM D R-A-15 ZONING WILL	T-FAMILY HOUSING AT THE PLAT PROVIDES A BOUNDARY TUAL MOVE OF THE HOSPITAL REDEVELOPMENT OF THIS
3111196 103	List of Attachments/Exi	nibits	100 mm - C-	St. Market
14	SDAT, TAX MAP PLAT OF PROPERTY DES	SIGNATING R-A-15 AREA TO BE	REZONED	
G.	Signatures			
15	Owner BRUCE TAYLOR		Owner (2)	
	Date		Date	
	· · · · · · · · · · · · · · · · · · ·	res? X the box to the left and at	tach a separate signature	page.
16	Representative J Signature Date	OSEPH RUTTER		
DP.	Z Use Only		Amendment No.	

Go Back
View Map

Waryland Department of Assessments and Taxation
Real Property Data Search (vw5.1A)

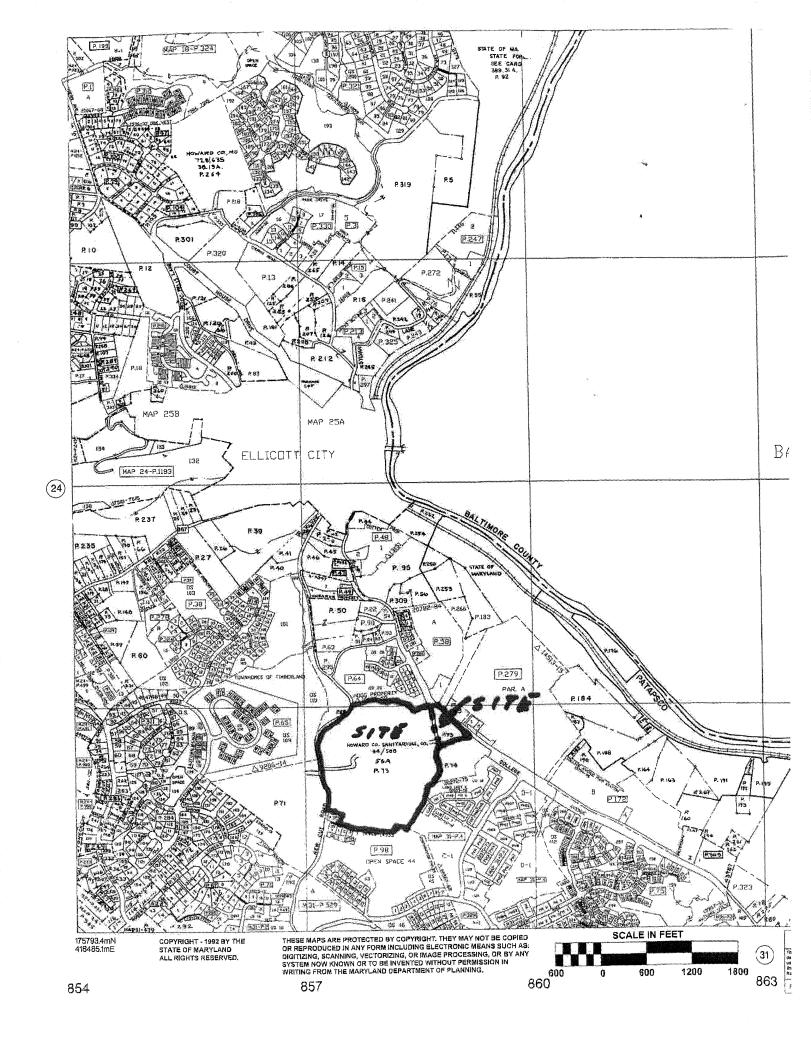
HOWARD COUNTY

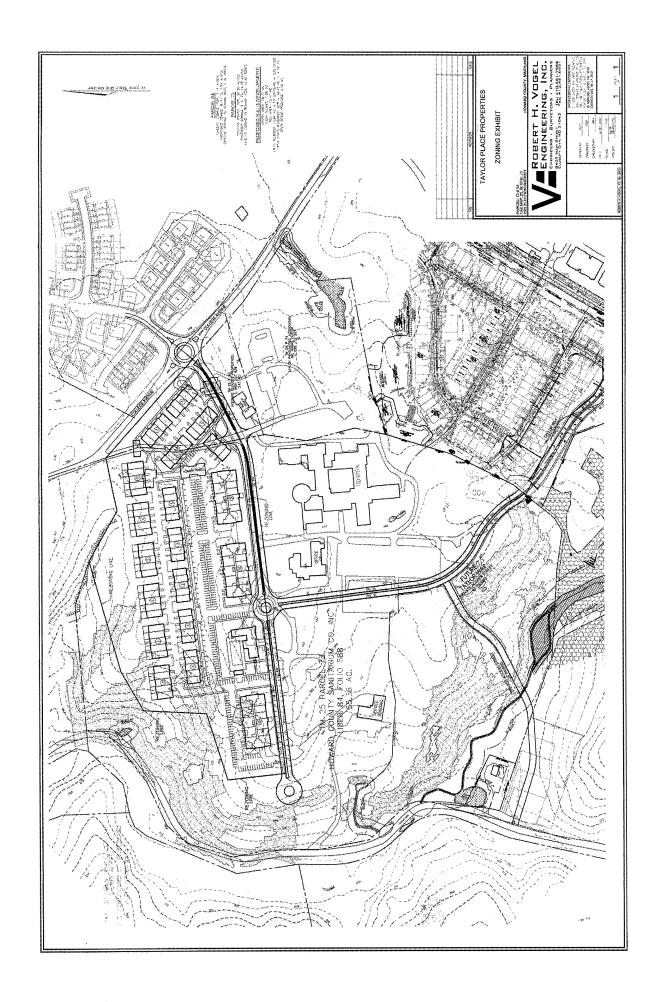
Redemption
GroundRent
Registration

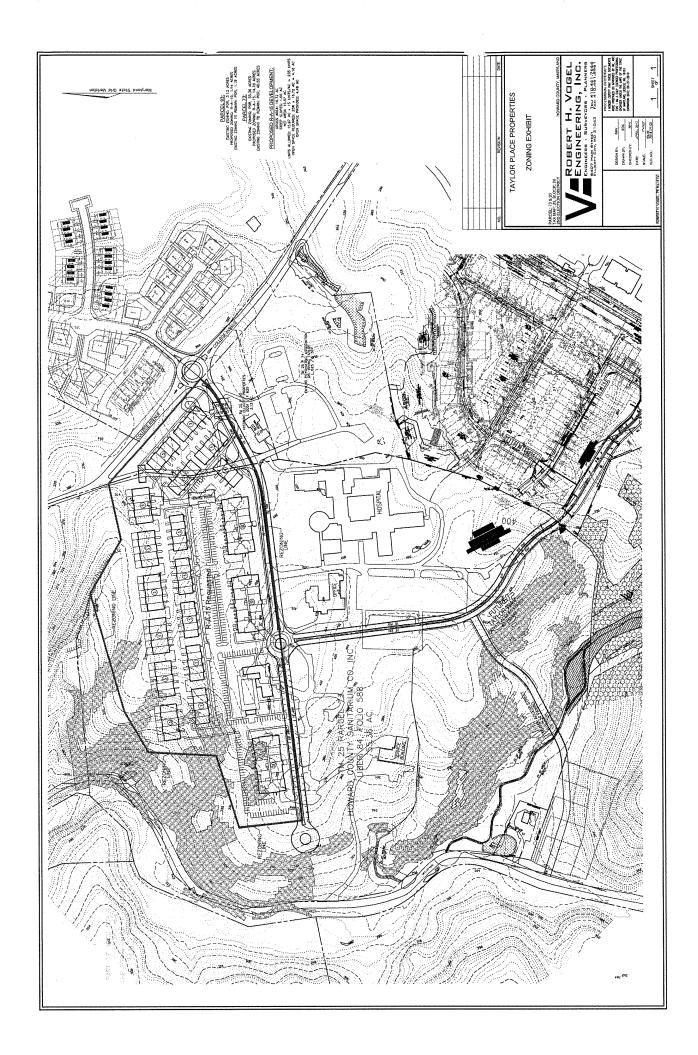
District - 02 Account Number - 218542 Account Identifier: **Owner Information** HOWARD COUNTY SANITARIUM CO INC COMMERCIAL Use: Owner Name: 4100 COLLEGE AVE Principal Residence: 1)/00084/00588 Mailing Address: PO BOX 396 Deed Reference: ELLICOTT CITY MD 21041-0396 **Location & Structure Information** Legal Description Premises Address 4189 NEW CUT RD 55.399 A. 4189 NEW CUT RD ELLICOTT CITY 21043-0000 ELLICOTT CITY Lot Assessment Area Plat No: Sub District Subdivision **Block** Map <u>Grid</u> **Parcel** Section Plat Ref: 0073 0000 0020 0025 Town NONE Special Tax Areas Ad Valorem 104 Tax Class Property Land Area County Use Enclosed Area Primary Structure Built 55,3900 AC 78265 1954 Stories Exterior Basement Type OFFICE BUILDING Value Information Phase-in Assessments Base Value Value As Of As Of As Of 07/01/2013 07/01/2012 01/01/2012 4,269,500 4,269,500 Land Improvements: 4,716,700 3,973,300 8,242,800 8,242,800 Total: 8,986,200 8,242,800 Preferential Land: Transfer Information Price: Seller: Date: Decd2: Deed1: Type: Price: Date: Seller: Deed1: Deed2: Type: Price: Date: Seller: Deed2: Deed1: Type: **Exemption Information** 07/01/2012 07/01/2013 **Class** Partial Exempt Assessments 0.00 000 County 0,00 000 State 000 0.00 0.00 Municipal Special Tax Recapture: Tax Exempt: NONE Exempt Class: Homestead Application Information Homestead Application Status: No Application

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New Search
<u>GroundRent</u>
Redemption
<u>GroundRent</u>
Registration

Owner Information Owner Name: HISTORIC ELLICOTT PROPERTIES INC Use;		
CA NI LICETADIC ET LICATE DE OBED TIES INC. Licas		
Owner Name: HISTORIC ELLICOTT PROPERTIES INC Use: 4100 COLLEGE AVE Principal Resi Mailing Address: PO BOX 396 Deed Referent ELLICOTT CITY MD 21041-0396	dence: NO	ERCIAL/RESIDENTIAL 51/ 00629
Location & Structure Information		
Premises Address Legal Description		
COLLEGE AVE 3.5 A ELLICOTT CITY 21043-0000 ELLICOTT CITY		
MapGridParcelSub DistrictSubdivisionSectionBlock0025002000930000	Lot Assessme 3	nt Area <u>Plat No:</u> <u>Plat Ref:</u>
Special Tax Areas Town NONE Ad Valorem 104 Tax Class		
Primary Structure Built Enclosed Area Property Ls 3,5000 AC	and Area	County Use
Stories Basement Type Exterior		
Value Information		
Base Value Value Phase-in Assessments As Of 01/01/2012 As Of As Of 01/01/2012 07/01/2012 Land 594,500 594,500		
Improvements: 271,400 271,400 Total: 865,900 865,900 865,900 Preferential Land: 0 0		
Transfer Information		
Sener. Indicate Ellicott i not better	***************************************	ice: \$55,872 ed2:
GG14017 IIO/III GGG111 GI GGGG	Aparton Control of the Control of th	ice: \$430,924 æd2:
Seller: Date: Type: Deed1:		ice: ed2;
Exemption Information		
Partial Exempt Assessments Class County 000 State 000	07/01/2012 0.00 0.00	07/01/2013
Municipal 000	0.00	0.00
Tax Exempt: Exempt Class:	Special Tax NO	
Homestead Application Information		
Homestead Application Status: No Application		







Regner, Robin

From:

Tolliver, Sheila

Sent:

Thursday, August 01, 2013 10:58 AM

To:

Regner, Robin

Subject:

Fwd: Deny Comp Plan Amendment 25.002 & 25.004

Attachments:

Comp Plan Amendments 25.002 & 25.004.docx; ATT00001.htm

Sent from my iPhone Sheila Tolliver

Begin forwarded message:

From: "Sigaty, Mary Kay" < mksigaty@howardcountymd.gov>

Date: July 31, 2013, 3:37:22 PM EDT

To: "Tolliver, Sheila" < <u>STolliver@howardcountymd.gov</u>>

Subject: FW: Deny Comp Plan Amendment 25.002 & 25.004

From: Mike Smith < m.smith481@verizon.net >

Date: Thu, 11 Jul 2013 00:43:05 -0400

To: Mary Kay Sigaty < mksigaty@howardcountymd.gov > **Subject:** Fw: Deny Comp Plan Amendment 25.002 & 25.004

Dear Ms. Sigaty:

As decribed in the attached letter, I would like you to deny rezoning portions of the Taylor Manor property in Ellicott City to R-A-15 zoning. I can be reached at 443-930-2102 if you would like to discuss this request further.

Thank you for our consideration.

Mike Smith