



CITY OF ANNAPOLIS

MARYLAND

No. _____

This is to certify that a _____ License Permit

has been issued to _____

in accordance with the provisions of the Code of the City of Annapolis, Maryland.

FEE PAID

ISSUE DATE

EXPIRES

Payment Received

Test

COLLECTOR AND TREASURER

CITY CLERK

This License To Be Posted In A Conspicuous Place



USE PERMIT APPLICATION
Annapolis Planning & Zoning Office
The Municipal Building
Room 103
Duke of Gloucester Street
Annapolis, Maryland 21401

Permit No. B54-2
Fee 50
Zone BZ JR 11/0184
(OFFICE USE ONLY)

Building Address 958 Bay Ridge Rd, Annapolis Md. zip code 21405
Building Owner's Name & Address OPS Health, Inc, Box 1804, Wash, DC. 20013
Name of Business Opera Theater Services, Inc.
Business Owner's Name & Address 623 Mt. Cister Ave, Beltsville, Md. 20705
Business Owner's Telephone No. 595-5420

Type of Business Home Health Care
Total Square Feet of Business 1206
Floor Business is located on FIRST
No. of Employees 2 1/2

PLEASE, ATTACH COPY OF WORKMEN'S COMPENSATION INSURANCE CERTIFICATION FOR EMPLOYEES. IF YOU ARE EXEMPT FROM CARRYING WORKMEN'S COMPENSATION, EXEMPTION FORMS ARE AVAILABLE TO FILL OUT IN THE OFFICE OF PLANNING AND ZONING.

Previous Use in Building

Name of Business None Giant Shopping Center
Type of Business _____
Total Square Feet of Business 1114
Date Previous Use Ceased _____

Parking

Number of Off-Street Parking Spaces 30+ 4
Are You a Member of Park and Shop? Yes 1 No 1 If yes, give no. of spaces _____
Do You Lease Parking Spaces Elsewhere? Yes _____ No 1

Trash Pick-Up _____
Trash will be picked up by City _____ Private Company 1

I Herby Certify that I am the owner or his authorized agent qualified to complete this application and that the facts and declarations of intent set forth above are true and are intended to be relied upon by the established officials of the City of Annapolis.

NAME (please print) Jean Schoep Date 1/12/84 Signature Jean Schoep
Telephone No. 263-0111

Fee for Use Permit is to be paid at the time the permit is ready to be issued. The fee schedule is as follows:

- To 10,000 square feet.....\$30
- Over 10,00 square feet to 50,000 square feet...\$55
- Over 50,000 square feet.....\$70

FOR OFFICIAL USE ONLY

Reviewed by:

Planning and Zoning Office	Date	Health Department	Date
<u>Arnold Carr</u>	<u>1-12-84</u>	<u>James Finkbe</u>	<u>1-12-84</u>
Public Works Department***	Date	Plumbing Department	Date
<u>Charles C. Hall</u>	<u>1-12-84</u>		
Fire Department	Date		

***The applicant is responsible for notifying the Building Inspector's Office in the Department of Public Works, 263-0600, that the building is ready for final inspection.



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No. 1

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FEE PAID _____
ISSUE DATE _____
EXPIRES _____

Payment Received _____

Test _____

COLLECTOR AND TREASURER _____

CITY CLERK _____

This License To Be Posted In A Conspicuous Place



U S E R P E R M I T A P P L I C A T I O N

Anne Aris Planning & Zoning Office
The Municipal Building
Room 103

Duke of Gloucester Street
Annapolis, Maryland 21401

Permit No. 5555
Fee \$30.00
Zone B20A-114
(OFFICE USE ONLY)

Building Address 950 Bay Ridge, Md zip code
Building Owner's Name & Address Bay Forest Center, Bay Ridge Rd.
Name of Business Bay Forest Cleaners 20018
Business Owner's Name & Address Andrew E Distekau Sr 3801 Lawrence Pl Alex Va 22304
Business Owner's Telephone No. 703-2768-8723

Type of Business Dry Cleaning
Total Square Feet of Business 11608
Floor Business is located on 2nd floor only
No. of Employees 2

PLEASE, ATTACH COPY OF WORKMEN'S COMPENSATION INSURANCE CERTIFICATION FOR EMPLOYEES. IF YOU ARE EXEMPT FROM CARRYING WORKMEN'S COMPENSATION, EXEMPTION FORMS ARE AVAILABLE TO FILL OUT IN THE OFFICE OF PLANNING AND ZONING.

Previous Use in Building

Name of Business N/A None
Type of Business N/A
Total Square Feet of Business N/A
Date Previous Use Ceased N/A

Parking

Number of Off-Street Parking Spaces 600
Are You a Member of Park and Shop? Yes No
Do You Lease Parking Spaces Elsewhere? Yes No If yes, give no. of spaces and location

Trash Pick-Up

Trash will be picked up by City Private Company

I Hereby Certify that I am the owner or his authorized agent qualified to complete this application and that the facts and declarations of intent set forth above are true and are intended to be relied upon by the established officials of the City of Annapolis.

NAME (Please print) Andrew E Distekau Sr Date 10-26-82 Signature [Signature]
Telephone No. 703-366-3735

Fee for Use Permit is to be paid at the time the permit is ready to be issued. The fee schedule is as follows:

- To 10,000 square feet.....\$30
- Over 10,000 square feet to 50,000 square feet...\$55
- Over 50,000 square feet.....\$70

FOR OFFICIAL USE ONLY

Reviewed by: Carl O Bennett Date 2/10/83
 Planning and Zoning Office
Donald Cune Date 2-8-83
 Public Works Department***
James Fuller Date 2/8/83
 Fire Department

Health Department
Plumbing Department

***The applicant is responsible for notifying the Building Inspector's Office of the completion of Public Works, 263-0600, that the building is ready for final inspection.

11/1/82