

## Variance Request: Letter of Explanation

6 Mayo Avenue  
Annapolis, MD 21403

To Whom It May Concern;

We, the under-named, are applying for a variance so that we might add an 18'6" x 12' approximately 222 square foot one-story addition to the back of our single-family one-story home at 6 Mayo Avenue, Annapolis, MD 21403 as detailed in the survey [dated 2-20-2017] that is included in the variance request. The foundation of the addition would be 18'6" by 10' so that it is in compliance with the Health Department's distance-from-the-well requirements. The addition will cantilevered an additional 2 feet beyond the 10' foundation, as shown in the administrative site plan (revised).

The variance is needed given that one side of the addition, facing 8 Mayo Avenue, will be within the required setback from the property line with 8 Mayo Avenue. That side of the addition would be aligned with the side of the existing single-family home; it would not extend beyond that side of the existing single-family home.

The rear of the addition would be setback approximately 77 feet from the rear property line, approximately 26 feet from the property line with 4 Mayo Avenue, and 6 feet from the property line with 8 Mayo Avenue.

We have also requested a variance allowing for the addition's foundation to be twenty feet from the well in the backyard. Our contact with the Program Manager, Sanitary Engineering, Bureau of Environmental Health [Brian Chew] has confirmed that " so long as the

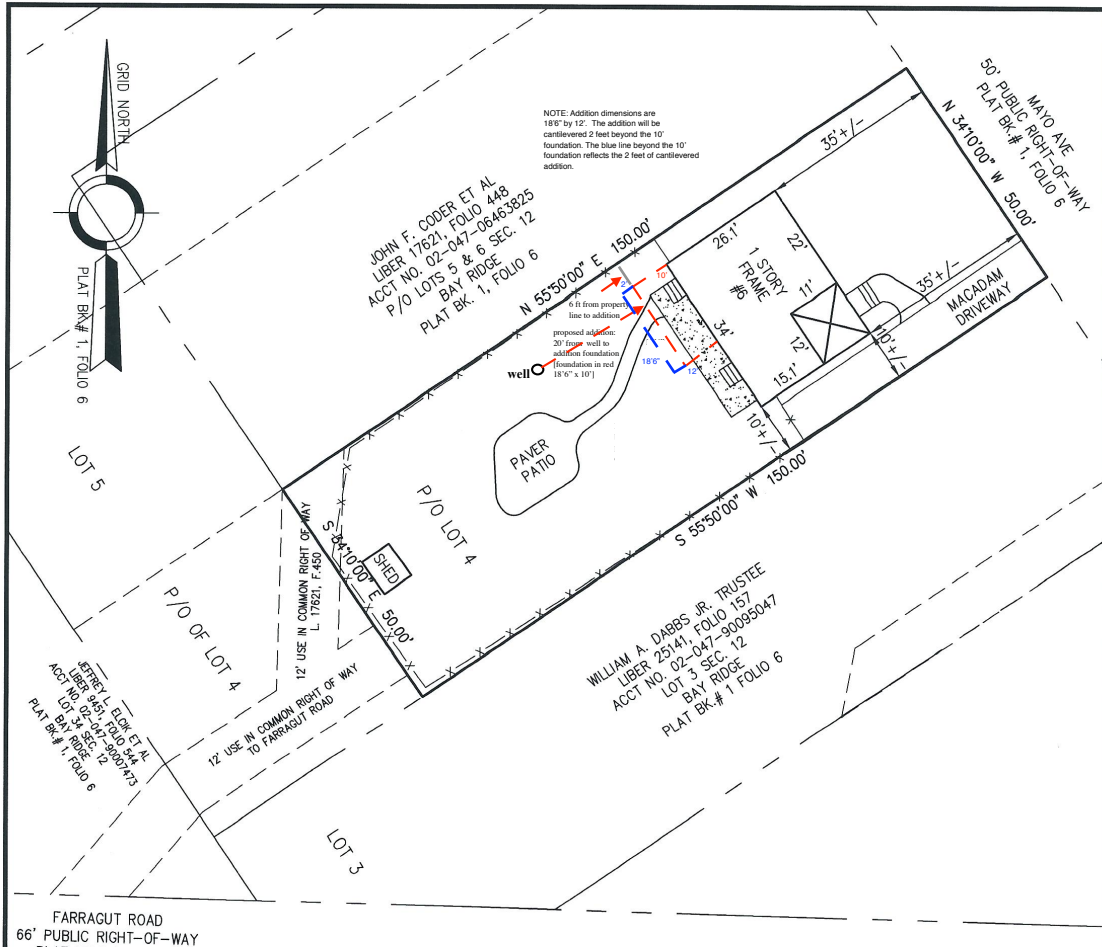
building plans to be submitted later in the process show the addition's foundation to be twenty feet from the well, the health department will does not object to the variance request so long as plans are submitted for review and approval. “

Should you have any questions, please contact us at the phone numbers provided.

Christopher G. Lorrain  
202-422-4378 (cell)

Moira M. Shea  
202-997-1660 (cell)

December 26, 2023



**GENERAL NOTES**

- 1) THIS SURVEY HAS BEEN PREPARED WITHOUT BENEFIT OF A FORMAL TITLE REPORT. EASEMENTS, RIGHTS-OF-WAY AND OTHER RESTRICTIONS MAY AFFECT THIS PROPERTY AND NOT BE SHOWN.
- 2) THE INFORMATION SHOWN HEREON IS BASED ON THE DEEDS AND PLATS OF RECORD AS INDEXED IN THE PROPERTY CADASTRE OF ANNE ARUNDEL COUNTY, MARYLAND. BEARINGS SHOWN HEREON ARE REFERENCED TO PLAT BK. # 1 FOLIO 6.
- 3) THIS SURVEY DOES NOT ADDRESS WETLANDS, CONTAMINATED WASTE OR TOXIC SOIL CONDITIONS, NOR HAVE ANY REPORTS, STUDIES OR INFORMATION REGARDING SUCH BEEN PROVIDED
- 4) THE IMPROVEMENTS SHOWN HEREON WERE FIELD LOCATED ON FEBRUARY 20, 2017.
- 5) NOTE THIS DRAWING NOT VALID WITHOUT ORIGINAL SEAL AND SIGNATURE.

JESSICA A. KING  
MD REG. #21684  
EXP. 12/18  
FEBRUARY 24, 2017

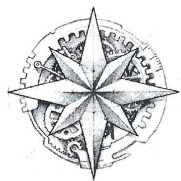


BEING KNOWN AND DESIGNATED AS PART OF LOT NO. 4 SECTION 12 AS SHOWN ON THE PLAT ENTITLED "BAY RIDGE", WHICH PLAT IS RECORDED AMONG THE LAND RECORDS OF ANNE ARUNDEL COUNTY, MARYLAND IN PLAT BK.# 1, FOLIO 6.

= CONCRETE

THIS IS TO CERTIFY THAT THIS PLAT WAS MADE IN ACCORDANCE WITH COMAR 09.13.06.10 MINIMUM STANDARDS AND PROCEDURES FOR A SPECIAL PURPOSE SURVEY. THE VISIBLE IMPROVEMENTS ARE SHOWN TO A TOLARANCE OF 1 FOOT MORE OR LESS.

LOCATION DRAWING OF  
PART OF LOT 4 SEC 12  
**BAY RIDGE**  
6 MAYO AVENUE ANNAPOLIS, MD 21403  
TAX MAP: 0057 PART OF PARCEL: 0028  
SECOND ELECTION DISTRICT  
ANNE ARUNDEL COUNTY, MARYLAND



**King's Point Surveys**  
8019 Long Hill Rd.  
Pasadena, MD 21122  
410-255-1378 jking@kingspointsurveys.com

DRAWN: JAK
CHECKED: JAK
DATE: 02-20-17
JOB # 2017-0405
SCALE: 1"=30'
SHEET: 1 OF 1

CRITICAL AREA COMMISSION  
 CHESAPEAKE AND ATLANTIC COASTAL BAYS  
 1804 WEST STREET, SUITE 100  
 ANNAPOLIS, MD 21401

PROJECT NOTIFICATION APPLICATION

**GENERAL PROJECT INFORMATION**

Jurisdiction: Anne Arundel County

Date: October 1, 2023

Tax Map #	Parcel #	Block #	Lot #	Section
0057	0028		4	12

Tax ID: \_\_\_\_\_

FOR RESUBMITTAL ONLY	
Corrections	<input type="checkbox"/>
Redesign	<input type="checkbox"/>
No Change	<input type="checkbox"/>
Non-Critical Area	<input type="checkbox"/>
*Complete Only Page 1 General Project Information	

Project Name (site name, subdivision name, or other) 6 Mayo Avenue, Annapolis, MD 21403 subdivision 047

Project location/Address 6 Mayo Avenue

City Annapolis Zip 21403-4421

Local case number \_\_\_\_\_

Applicant: Last name Lorrain Shea First name Christopher Moira

Company \_\_\_\_\_

**Application Type (check all that apply):**

- |                           |                          |                   |                                     |
|---------------------------|--------------------------|-------------------|-------------------------------------|
| Building Permit           | <input type="checkbox"/> | Variance          | <input checked="" type="checkbox"/> |
| Buffer Management Plan    | <input type="checkbox"/> | Rezoning          | <input type="checkbox"/>            |
| Conditional Use           | <input type="checkbox"/> | Site Plan         | <input type="checkbox"/>            |
| Consistency Report        | <input type="checkbox"/> | Special Exception | <input type="checkbox"/>            |
| Disturbance > 5,000 sq ft | <input type="checkbox"/> | Subdivision       | <input type="checkbox"/>            |
| Grading Permit            | <input type="checkbox"/> | Other             | <input type="checkbox"/>            |

**Local Jurisdiction Contact Information:**

Last name AACo Zoning Administration Section First name \_\_\_\_\_

Phone # 410-222-7437 Response from Commission Required By TBD

Fax # \_\_\_\_\_ Hearing date TBD

**SPECIFIC PROJECT INFORMATION**

Describe Proposed use of project site:

Variance of setback to allow a one-story addition on the rear of the home at 6 Mayo Avenue

Intra-Family Transfer <input type="checkbox"/> Yes Grandfathered Lot <input type="checkbox"/>	Growth Allocation <input type="checkbox"/> Yes Buffer Exemption Area <input type="checkbox"/>
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**Project Type (check all that apply)**

Commercial <input type="checkbox"/> Consistency Report <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Mixed Use <input type="checkbox"/> Other <input type="checkbox"/> _____	Recreational <input type="checkbox"/> Redevelopment <input type="checkbox"/> Residential <input checked="" type="checkbox"/> Shore Erosion Control <input type="checkbox"/> Water-Dependent Facility <input type="checkbox"/>
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**SITE INVENTORY (Enter acres or square feet)**

	Acres	Sq Ft		Acres	Sq Ft
IDA Area		7500 ft.	Total Disturbed Area		216 sq ft
LDA Area			# of Lots Created		
RCA Area					
Total Area					

	Acres	Sq Ft		Acres	Sq Ft
Existing Forest/Woodland/Trees			Existing Lot Coverage		
Created Forest/Woodland/Trees			New Lot Coverage		
Removed Forest/Woodland/Trees			Removed Lot Coverage		
			Total Lot Coverage		

**VARIANCE INFORMATION (Check all that apply)**

	Acres	Sq Ft		Acres	Sq Ft
Buffer Disturbance			Buffer Forest Clearing		
Non-Buffer Disturbance			Mitigation		

<p><u>Variance Type</u></p> Buffer <input type="checkbox"/> Forest Clearing <input type="checkbox"/> HPA Impact <input type="checkbox"/> Lot Coverage <input type="checkbox"/> Expanded Buffer <input type="checkbox"/> Nontidal Wetlands <input type="checkbox"/> Setback <input checked="" type="checkbox"/> Steep Slopes <input type="checkbox"/> Other <input type="checkbox"/> _____	<p><u>Structure</u></p> Acc. Structure Addition <input type="checkbox"/> Barn <input type="checkbox"/> Deck <input type="checkbox"/> Dwelling <input type="checkbox"/> Dwelling Addition <input checked="" type="checkbox"/> Garage <input type="checkbox"/> Gazebo <input type="checkbox"/> Patio <input type="checkbox"/> Pool <input type="checkbox"/> Shed <input type="checkbox"/> Other <input type="checkbox"/> _____
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**CRITICAL AREA REPORT WORKSHEET TO ACCOMPANY THE SITE PLAN**

Permit Number \_\_\_\_\_  
 Total Site Area 7500 square feet Square Feet (1 Acre = 43,560 Square Feet)

Total Wooded Area \_\_\_\_\_ Square Feet- 'Wooded' MEANS A BIOLOGICAL COMMUNITY DOMINATED BY TREES AND OTHER WOODY PLANTS (SHRUBS AND UNDERGROWTH), INCLUDING FORESTS THAT HAVE BEEN CUT BUT NOT CLEARED.

\* Please Indicate Square Footage of Woodland Removed for the following:

- |                                  |  |
|----------------------------------|--|
| 1. House _____ Sq. Ft.           | 5. Accessory Structure _____ Sq. Ft.                                 |
| 2. Septic or sewer _____ Sq. Ft. | 6. Additions _____ Sq. Ft.   |
| 3. Well _____ Sq. Ft.            | 7. Storm Water Management _____ Sq. Ft.                              |
| 4. Driveway _____ Sq. Ft.        | 8. Other Clearing: work area; access; stockpiles, etc. _____ Sq. Ft. |

\* Total Woodland Removed = \_\_\_\_\_ Sq. Ft.

"Impervious Coverage" IS ANY SURFACE THAT WILL NOT ABSORB LIQUID. THIS INCLUDES ROOFS, SIDEWALKS, DRIVEWAYS, AND ANY TYPE OF PAVEMENT. COMPACTED GRAVAEL IS CONSIDERED AN IMPERVIOUS SURFACE.

\* Please Indicate Square Footage of Impervious Coverage for the following:


- | <u>Existing Impervious</u>            | <u>Proposed Impervious</u>            |
|---------------------------------------|---------------------------------------|
| 572                                   | 2221204                               |
| 1. House (roof area) _____ Sq. Ft.    | 1. House (roof area) _____ Sq. Ft.    |
| 350                                   |                                       |
| 2. Driveway + Sidewalks _____ Sq. Ft. | 2. Driveway + Sidewalks _____ Sq. Ft. |
| Shed 60                               |                                       |
| 3. Accessory Structures _____ Sq. Ft. | 3. Accessory Structures _____ Sq. Ft. |
|                                       | 222                                   |
|                                       | 4. Additions _____ Sq. Ft.            |
|                                       | 1200                                  |

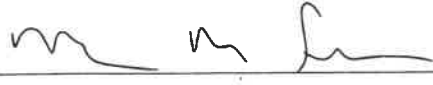
\* Total Existing and Proposed Impervious Coverage \_\_\_\_\_ Sq. Ft.

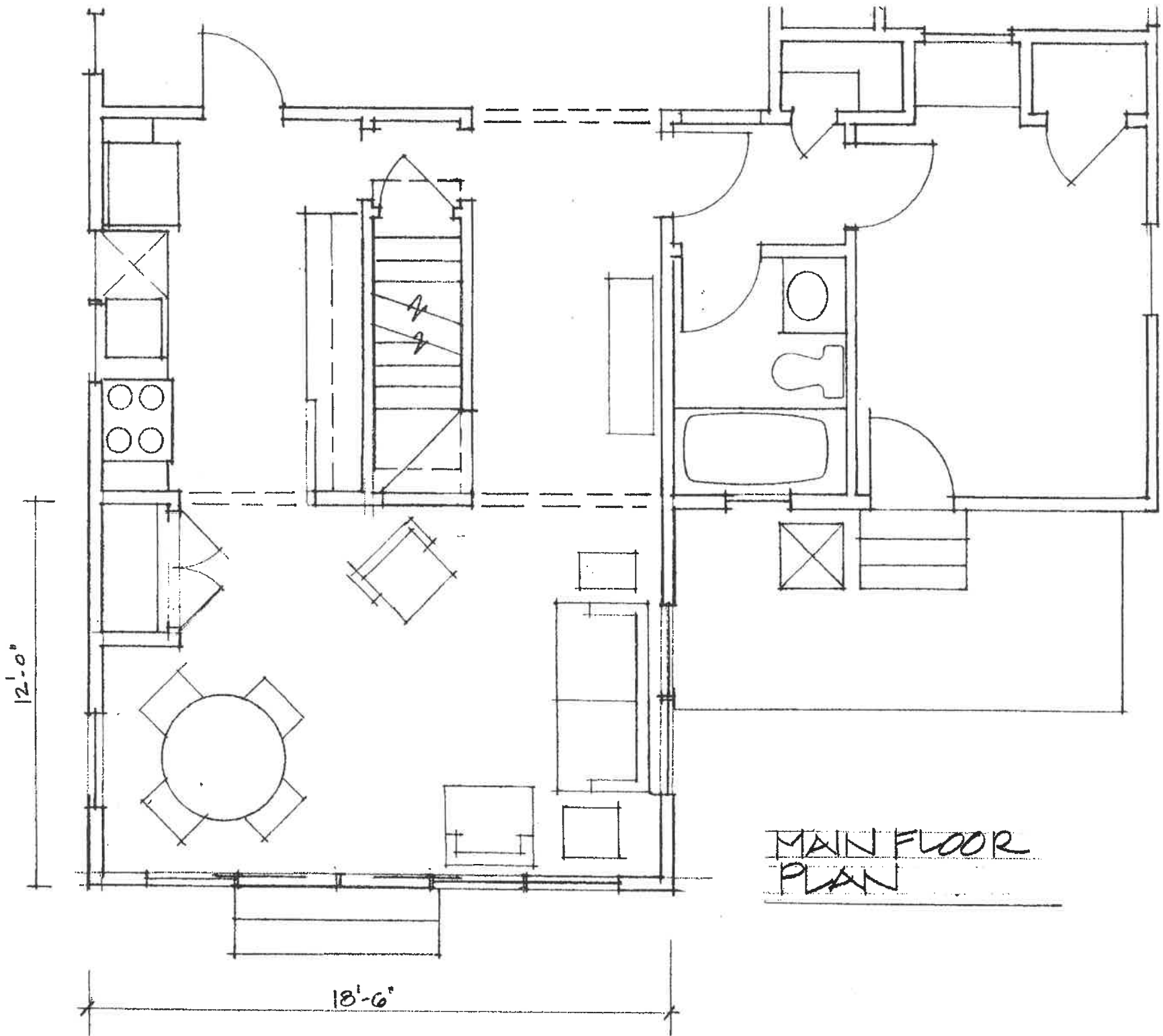
Ⓢ PLEASE INCLUDE ALL EXISTING AND PROPOSED SQUARE FOOTAGE.

Christopher Lorrain                      Moira Shea  
 I \_\_\_\_\_, \_\_\_\_\_, (property owner and contract purchaser, if applicable) hereby certify that the above critical area worksheet is true and correct based upon personal knowledge. I further declare that a copy of the foregoing document will be transferred to any purchaser of this property from me (or corporation, if applicable) at the time of settlement. I hereby understand that these computations shall be a binding part of issuance of a building permit for lot # 4, block # 12 of Subdivision Bay Ridge.

I hereby certify that I have seen and read the record plat (if approved after 1986 and subject to Critical Area requirements) and have indicated on the attached site plan any easements, buffers, or other restrictions declared on said plat.

 (Signature) October 23, 2023 (Date)  
 Mr. Christopher GLorrain. (Title)

 (Signature) October 23, 2023 (Date)  
 Ms. Moira M Shea (Title)



MAIN FLOOR  
PLAN



LEFT SIDE





REAR ELEVATION



RIGHT SIDE

CANTILEVER  
2'

10'