



HOWARD COUNTY DEPARTMENT OF PLANNING AND ZONING
3430 Courthouse Drive ■ Ellicott City, Maryland 21043 ■ 410-313-2350

Marsha S. McLaughlin, Director

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APPLICATION FOR SNOWBALL STANDS IN RESIDENTIAL DISTRICTS

Applicant's Name: _____

Address: _____

Address of Proposed Sales Location: _____

Zoning District _____

Name of Company _____

Property Owner: _____

Owner's Address: _____

DESCRIPTION OF BUSINESS TO BE CONDUCTED ON PROPERTY

Hours of Operation _____

Valid from May 1, _____ to October 1, _____

Number of on-site parking spaces provided _____

Dimensions or size of stand _____

Number of employees _____

A plot plan drawn to scale showing the boundaries of the property, all improvements, structures, and the proposed location of the snowball stand and parking areas must be included with this application. The plot plan must show:

1. Snowball Stand location, dimensions and square footage (maximum permitted: 100 square feet in RC or RR; 50 square feet in other applicable districts).
2. Parking area with the number of spaces designated (note: in addition to the 2 spaces required for the dwelling, at least one off-street parking space shall be provided for each 25 square feet of snowball stand area).
3. Driveways providing access to the property.
4. Distance from the stand and parking area to the property lines.
5. Designated storage areas for the supplies and equipment.

OVER

In accordance with the Howard County Zoning Regulations, this application will be approved only if the Department of Planning and Zoning finds that the site has adequate off-street parking and the use will not cause traffic problems in the vicinity. The use must also meet the required minimum 25 foot setback and all setbacks for the applicable zoning district.

NOTE: Any changes in the operation of the business will require the submittal and approval of a revised application.

This application is for a permit to establish a snowball stand, which is used exclusively for the sale of snowballs, in a residential zoning district and is not valid for any other purpose.

The undersigned affirms that the information contained in or included with this application is true and correct.

Print Applicant Name

Home Telephone Number

Applicant Signature Date

Business Telephone Number

Print Property Owner Name
(If other than applicant)

Telephone Number

Property Owner Signature Date

FEE: \$25.00 (Make check payable to the Howard County Director of Finance)

For DPZ use only:

Application fee: \$ _____

Receipt No. _____

(Make checks payable to "Director of Finance")T:/shared/.....division forms/SnowBall Stand.Res. Rev 10-13

