
Arundel Community Development Services, Inc.

MEMORANDUM

DATE: XX/XX/XXXX

TO: Office of Planning and Zoning Staff

FROM: Arundel Community Development Services, Inc.

SUBJECT: **Workforce Housing Conditional Use**

Please be advised the Developer identified below has met with Arundel Community Development Services, Inc. (ACDS) to review the conditional that must be met in order to proceed forward with an application for approval as a Workforce Housing Conditional Use.

Name of Development Company: _____

Owner of Property: _____

Address of Property: _____

Proposed New Subdivision Name: _____

Tax ID # of Property: _____

Anne Arundel County's Subdivision/Site Plan Project Number: _____

Date of Meeting: _____

_____ At this meeting, ACDS staff reviewed all of the requirements including income calculations and certification; rent rates and housing pricing; reusable condition and design requirements.

_____ At this meeting, ACDS staff reviewed the Workforce Housing Development Agreement with the developer and the developer was informed that the Development Agreement with the County must be executed prior to site development or final plat approval.

_____ At this meeting, ACDS staff reviews the Restricted Covenants with the developer that will be placed on the property and the special notes that must be noted on the final plat.

Printed Name of Person Completing Form

Position Title

Signature

Date

I hereby certify that the items checked above have been reviewed with me on the date indicated below.

Printed Name of Developer

Signature

Date