

INCLUSIONARY HOUSING PLAN SUMMARY

Belvedere Place

PRESENTED AT **2/13/2025** INCLUSIONARY HOUSING BOARD MEETING

Project Location – 3101 West Belvedere Ave, Baltimore MD 21215

Neighborhood – Park Heights

Building Permit Application Submission Date: 12/04/2024

Date Inclusionary Housing Plan Received: 12/19/2024

Date 45 Day Review Period Concludes: 02/2/2025

Does Project Qualify for Inclusionary Units: _____ Yes No

Explanation if No:

_____ Project is fewer than 20 units

_____ Total construction/renovation costs are less than \$60,000 per unit

_____ The project is not located on land that the City sold for the project

_____ The owner is not requesting any subsidies, tax credits, grants or other City Subsidies

Project is an

Affordable Housing Project

_____ Dormitories, as defined in § 1-305(g) of the Zoning Code;; or

_____ Fraternity or sorority houses, as defined in § 1-306(p) of the Zoning Code

_____ Residential-care facilities, as defined in § 1-312(p) of the Zoning Code

_____ Residential project that is designed for, marketed to, and leased to students enrolled in accredited educational institutions located in Baltimore City, also known as “student housing”. (Ord. 07- 474; Ord. 24- 308.

If Inclusionary Units are required:

Total number of units

Total number of penthouse units

Total number of units used to determine Inclusionary Housing requirements

10% Inclusionary Requirement

5% of units available to households earning 50% of area median income

5% of units available to households earning 60% of AMI

Inclusionary Unit Breakdown

	Market Rent	50% AMI	Maximum Rent	60% AMI	Maximum Rent
Studio					
1 bedroom					
2 bedrooms					

Anticipated Occupancy

Anticipated Leasing Starts

Affirmative Marketing Summary:

Other Comments: Belvedere Place is an 83-unit affordable housing project (see attached 202 Form on Inclusionary Plan), located in Park Heights, that will serve residents at the 30%, 50%, and 60% of AMI with units projected to become available in November 2026.

DHCD Recommendation- Affordable Housing projects are not subject to make inclusionary units available. Information submitted in inclusionary housing plan is complete.

Inclusionary Housing Plan Template

Section 2B-22 of Ordinance 24-308, Inclusionary Housing for Baltimore City requires that developers who are required to make inclusionary units available submit this Inclusionary Housing Plan at the time an application for a building permit is submitted.

Building permit applications that fail to include this form will not be reviewed. No building permit application will be released without an approved Inclusionary Housing Plan. Inclusionary Housing Plans can only be submitted prior to receiving a building permit.

Additional information about the City's Inclusionary Housing requirements can be found : [22-0195 Completed Ordinance 24-308 \(6\).pdf](#)

General Project Information

Section	Question
NAME OF PROJECT	Development Name Belvedere Place
	Marketing Name (if different)
	Apartment or House Name (if applicable)
PROPERTY OWNER	Name of Company Belvedere Place LLC
	Contact Name Aimee McHale
	Contact Title/Role Vice President
	Contact Email amchale@wincco.com
	Contact Phone 202-871-7141
	Mailing Address 999 North Capital Street NE, Suite 220, Washington



PROJECT INFORMATION	<p>Legal Address</p> <p>3101 West Belvedere Ave, Baltimore MD 21215</p> <p>Street Known-As Address (if applicable)</p> <p>Zoning District</p> <p>Description (must include list of amenities and services that will be available, description of neighborhood)</p> <p>Belvedere Place Apartments is a proposed new-construction affordable housing project located adjacent to the Pimlico Racecourse in northwest Baltimore, part of the Central Park Heights neighborhood. The Belvedere Place team has assembled 10 vacant and underutilized parcels to create a new mixed-use community asset. Belvedere Place will contain 83 1-, 2-, and 3-bedroom units as well as approximately 8,442 sf of ground-floor commercial space. Permanent Supportive Housing units are proposed. Surface parking interior to the site will be offered, along with indoor and outdoor resident amenities and a community park facing Palmer Avenue.</p>
SUBSIDY INFORMATION Includes all subsidies applied for (including those not yet awarded) and intended to be applied for	<p>I am currently or contemplating requesting the following for this project (Select all that apply):</p> <ul style="list-style-type: none"><input checked="" type="checkbox"/> Grants or loans that equal or exceed 15% of total projected project costs<input type="checkbox"/> Payment in Lieu of Taxes (PILOT) (not affordable housing)<input type="checkbox"/> Tax Increment Financing (TIF)

Section	Question
SUBSIDY INFORMATION (cont.)	<p><input type="checkbox"/> Sale or transfer of City-owned land substantially below its appraised value. Please include a copy of a Land Disposition Agreement, appraisal or other document establishing the below value purchase price</p> <p><input checked="" type="checkbox"/> Tax Credit(s) please identify (please attach a separate sheet if there are more than 3):</p> <p>4% Low-Income Housing Tax Credits</p> <hr/> <hr/> <hr/> <p><input checked="" type="checkbox"/> Affordable Housing Projects</p> <p><input checked="" type="checkbox"/> Please attach the total number of units, breakdown by AMI, and a list of all sources.</p> <p><input type="checkbox"/> Please indicate if you are planning to request or have a received an Affordable Housing PILOT and provide a copy of the application, underwriting memo and/or approval.</p> <p><input type="checkbox"/> I am not applying for any of the following (please note that if you check this box you cannot apply for any additional tax credits or subsidies related to this project in the future)</p>
<p>UNIT INFORMATION</p> <p><input checked="" type="checkbox"/> ONLY FOR AFFORDABLE HOUSING PROJECTS: Please check if you attached table with information. If checked, you do not have to fill out this information.</p>	<p>Total Number of Units in the Project:</p> <hr/> <p>Total Number of Penthouse Units in the Project:</p> <hr/> <p>Total Number of Eligible Units (<i>Total Units – Total Penthouse Units</i>):</p> <hr/> <p>Required Number of Inclusionary Units (10% of Total Number of Eligible Units):</p> <hr/>

	Required Number of Units Available to Very Low Income Households (50% of Area Median Income):
	Required Number of Units Available to Low Income Households (60% of Area Median Income):
	Cost Per Unit:
UNIT AVAILABILITY	Please complete Exhibit C. Unit Information
CONTRACTED COMPANIES: PROPERTY MANAGEMENT Not required for Tax Credit/Affordable Housing Properties	Name of Company
	Contact Name
	Contact Title/Role
	Contact Email
	Contact Phone
	Leasing Agent Name
	Leasing Agent Email
	Leasing Agent Phone
CONTRACTED COMPANIES: TENANT SELECTION (optional)	Name of Company

Not required for Tax Credit/Affordable Housing Properties	Contact Name
	Contact Title/Role
	Contact Email
	Contact Phone
BUILDING PERMIT APPLICATION INFORMATION (to be completed by DHCD)	Permit Application Number COM2024 -03642
	Date Submitted 12/04/2024
	Date Building Permit Approved for Issuance 2/21/2025
	Building Permit Number COM2024-03642

Proposed Project Schedule

Status	Start Date	Completion Date
Pre-Development	11/1/2021	5/1/2025
Financing	2/1/2022	6/1/2025
Permitting	12/20/2024	5/1/2025
Construction	7/1/2025	11/1/2026
Use and Occupancy Permit	10/1/2026	11/30/2026
Marketing	8/1/2026	Ongoing
Leasing	11/1/2026	Ongoing
Occupancy	11/1/2026	Ongoing

Required Exhibits

ALL EXHIBITS MUST BE COMPLETE PRIOR TO SUBMITTING THIS INCLUSIONARY HOUSING PLAN. INCOMPLETE PLANS WILL BE NOT REVIEWED AND COULD DELAY THE ISSUANCE OF A BUILDING PERMIT.

Check if attached		Exhibits	Type	DHCD Staff Only	
<input type="checkbox"/>	<input type="checkbox"/>	A	Acknowledgement and Certification	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	B	Declaration of Covenants	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	Unit Information	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	D	Site Plan	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	E	Front Elevation or Block Face	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	F	Residential Floor Plans	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	G	Affirmative Marketing Plan	<input type="checkbox"/>	<input type="checkbox"/>



EXHIBIT C.

Inclusionary Unit (IH) Information

Unit Type	Total Square Footage	Number of IH Units - 50% AMI	Number of IH Units - 60% AMI	Number of Market Rate Units	Monthly Rent: IH - 50%	Monthly Rent: IH - 60%	Monthly Rent: Market Rate
1bed 1bath	680	2	19	0	\$1,083	\$1,207	0
2bed 2bath	1045	4	43	0	\$1,295	\$1,484	0
3bed 2bath	1224	3	1	0	\$1,491	\$1,719	0
2bed 2bath	1045	6			\$1,107		
3bed 2bath	1224	5			\$1,341		

EXHIBIT D.

Site Plan

Upload/Attach

EXHIBIT E.

Floor Plans

Upload/Attach

EXHIBIT F.

Front Elevation or Block Face

Upload/Attach



DHCD Compliance and Checklist

FOR USE BY DHCD STAFF ONLY

ITEM	DHCD APPROVAL		COMMENTS
	Date	Program Manager Initials	
Date Plan Received	12/23/2025		
INITIAL THRESHOLD REVIEW			
Project Information <input checked="" type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	
Subsidy Information <input checked="" type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	
Unit Information <input checked="" type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	
Unit Availability <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	Not applicable
Contracted Companies <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	Not applicable
Proposed Project Schedule <input checked="" type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	
Exhibit A. Acknowledgement and Certification <input checked="" type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	
Exhibit B. Declaration of Covenants <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	Not applicable

Not applicable sections are because of affordable housing project exemption



ITEM	Date	Program Manager Initials	COMMENTS
Exhibit C. Unit Information <input checked="" type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	
Exhibit D. Site Plan <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	Not Applicable
Exhibit E. Front Elevation or Block Face <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	Not Applicable
Exhibit F. Residential Floor Plans <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	Not Applicable
Exhibit G. Affirmative Marketing Plan <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete	02/04/2025	SaF	Not Applicable
INCLUSIONARY HOUSING BOARD			
Project Summary Completed	2/7/2025	SaF	
Date Presented to the Board	02/21/2025	SaF	
APPROVALS			
Date of Approval			
Date of Approval Provided to Property Owner			
Date of Approved Plan Provided to Department of Finance			
Date of Approved Plan Provided to Permits Division			