

OFFICE OF ZONING AND ADMINISTRATIVE HEARINGS  
MONTGOMERY COUNTY, MARYLAND

100 Maryland Avenue, <sup>Room 200</sup> Zoning and  
Rockville, Maryland, 20850  
(240) 777-6660  
{Form Revised 10-7-14}

JUN 06 2016  
Administrative Hearings

OZAH No. CU-16-15  
Date Certified Complete 6-3-16  
Date Filed 6-9-16  
Hearing Date 9-12-16  
Time 9:30 AM

APPLICATION FOR CONDITIONAL USE (OTHER THAN AN ACCESSORY APARTMENT)

(Please note instructions on reverse side. Application cannot be processed unless all information is submitted)

Application is hereby made for a Conditional Use under the Zoning Ordinance for the Montgomery-Washington Regional District in Montgomery County, Maryland (Chap. 59, Mont. Co. Code 2014) as follows:

Applicant(s) Jennifer Freeman  
Property to be used: <sup>Liber</sup> Lot 51577 <sup>Folio</sup> Block 140 Subdivision P 914 Subdivision: LONG LOOKED FOR  
Street Address: 14975 Sugarland Rd. City Poolesville State MD Zip 20837  
Zone Classification R-200 Tax Account No. 00033716  
Proposed Use New horse barn - 2 horses - private use EQUESTRIAN FACILITY

If this Application is for a Day Care Facility, specify the number of children to be cared for NO

Zoning Ordinance subsection providing for proposed use: Section 59-3- 3.5.T 3.2.4  
(in accordance with Section 59-7.3.1)

Owner of property: Name Jennifer Freeman  
Address 14975 Sugarland Rd. Poolesville, MD 20837

Applicant's present legal interest in above property: (check one)  
 Owner (including joint ownership)  Lessee  Tenant other than lessee  Contract Purchaser  
 Other (Describe) \_\_\_\_\_

Has any previous application for a special exception or conditional use involving this property been made by this Applicant, or by anyone else to this Applicant's knowledge? NO  
If so, give Case Number(s): \_\_\_\_\_

I have read the instructions on the reverse side of this form, and am filing herewith all of the required accompanying information. I hereby affirm that all of the statements and information contained in or filed with this Application are true and correct.

\_\_\_\_\_  
Signature of Attorney - (Please print next to signature)  
\_\_\_\_\_  
Address of Attorney  
\_\_\_\_\_  
Telephone Number  
\_\_\_\_\_  
Email Address

Jennifer Freeman  
Signature of Applicant(s) - (Please print next to signature)  
14975 Sugarland Rd. Poolesville, MD 20837  
Address of Applicant(s)  
301-377-4267 301-377-4267  
Home Telephone Number Work Telephone Number

Conditional Use Annual Billing Information (Please Print)  
Name: Jennifer Freeman  
Street Address: 14975 Sugarland Rd.  
City: Poolesville MD State: MD Zip Code: 20837  
Telephone Number: 301-377-4267 Email Address: jennifer.freeman1@yahoo.com

EXHIBIT NO. 1  
REFERRAL NO. CU 16-15