

OFFICE OF ZONING AND ADMINISTRATIVE HEARINGS
MONTGOMERY COUNTY, MARYLAND
100 Maryland Avenue, Room 200
Rockville, Maryland, 20850
(240) 777-6660
{Form Revised 10-7-14}

OZAH No. CU-24-07
Date Certified Complete 09/19/23
Date Filed 09/19/2023
Hearing Date 01/12/2023
Time 9:30 a.m.

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) CM Muncaster LLC

Property to be used: Lot P13, P14 Block N/A Subdivision Cashell Estates

Street Address 7100 & 7106 Muncaster Mill Rd City Rockville State MD Zip 20855

Zone Classification R-200 Tax Account No. 00117601, 00117485, 00117496

Proposed Use Design for Life Townhouse Units

If this Application is for a Day Care Facility, specify the number of children to be cared for N/A

Zoning Ordinance subsection providing for proposed use: Section 59-3- 59-3.3.1.D.2 and 59-7.3.1
(in accordance with Section 59-7.3.1)

Owner of property: Name Mary Benson, Patricia Wright and Sinai LLC

Address 7100 and 7106 Muncaster Mill Road

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? Concept Plan

If so, give Case Number(s): 520220280

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.

Scott C. Wallace Scott C. Wallace
Signature of Attorney - (Please print next to signature)

11 N. Washington St., Suite 700, Rockville, MD 20850

Address of Attorney

(301) 517-4813

Telephone Number

swallace@milesstockbridge.com

Email Address

Christopher Malm
Signature of Applicant(s) - (Please print next to signature)

1355 Beverly Rd STE 330, McLean, VA 22101

Address of Applicant(s)

703-917-6320

Home Telephone Number

Work Telephone Number

Conditional Use Annual Billing Information (Please Print)

Name: _____

Street Address: _____

City: _____

State: _____

Zip Code: _____

Telephone Number: _____

Email Address: _____