

OFFICE OF ZONING AND ADMINISTRATIVE HEARINGS
MONTGOMERY COUNTY, MARYLAND

100 Maryland Avenue, Room 200 Office of Zoning and
Rockville, Maryland, 20850
(240) 777-6660
{Form Revised 10-7-14}

NOV 05 2015

Administrative Hearings

OZAH No. CU-16-07
Date Certified Complete 11-4-15
Date Filed 11-13-15
Hearing Date 2-26-16
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) Hannah Weiser

Property to be used: Lot 1 Block 8 Subdivision 0099

Street Address. 9205 Fernwood Rd City Bethesda State MD Zip 20817

Zone Classification R60 Tax Account No. 00659460

Proposed Use Day Care Facility

If this Application is for a Day Care Facility, specify the number of children to be cared for 15

Zoning Ordinance subsection providing for proposed use: Section 59-3-3.4
(in accordance with Section 59-7.3.1)

Owner of property: Name Hannah Weiser

Address 9205 Fernwood Rd Bethesda MD 20817

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)

Hannah Weiser
Signature of Applicant(s) - (Please print next to signature)

Address of Attorney

9205 Fernwood Rd Bethesda, MD 20814
Address of Applicant(s)

Telephone Number

(413) 531-7678
Home Telephone Number

Email Address

Work Telephone Number

Conditional Use Annual Billing Information (Please Print)

Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Telephone Number: _____ Email Address: _____

EXHIBIT NO. 1
REFERRAL NO. Cu16-07