

**OFFICE OF ZONING AND ADMINISTRATIVE HEARINGS
MONTGOMERY COUNTY, MARYLAND**

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

OCTO 4 2018
Administrative Hearings

OZAd No. CU- T-19-01
Date Certified Complete 12/14/18
Date Filed 12/14/18
Hearing Date 02/01/2019
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) American Towers LLC and James Warfield

Property to be used: Lot 25723 Block _____ Subdivision _____

Street Address Woodfield Road City Damascus State MD Zip 20872
RNC

Zone Classification _____ Tax Account No. 03005112

Proposed Use New 150' monopole and 75' x 75' equipment compound.

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- 59-3.5.2(C)(2)
(in accordance with Section 59-7.3.1)

Owner of property: Name James H. Warfield

Address 25733 Woodfield Road Damascus, MD 20872

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.

E. Donohue 4-30-17
Signature of Attorney - (Please print next to signature)

117 Oronoco Street Alexandria, VA 22314
Address of Attorney

703-549-1123
Telephone Number

edonohue@donohuesteams.com
Email Address

Edward A Lutz
Signature of Applicant(s) - (Please print next to signature)

3500 Regency Parkway, Suite 100 Cary, NC 27518
Address of Applicant(s)

Home Telephone Number

919-468-0112
Work Telephone Number

Conditional Use Annual Billing Information (Please Print)

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Email Address: _____