

Office of Zoning and
SEP 15 2018

Received
M-NCPPC
SEP 18 2018
Montgomery County
Planning Department

OFFICE OF ZONING AND ADMINISTRATIVE HEARINGS
MONTGOMERY COUNTY, MARYLAND
100 Maryland Avenue, Room 200
Rockville, Maryland, 20850
(240) 771-6660
(Form Revised 10-7-14)

OZAH No. CU-19-03
Date Certified Complete 9/19/18
Date Filed 9/21/18
Hearing Date 1/11/2019
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) 1784 Capital Holdings, LLC
Property to be used: Lot _____ Block _____ Subdivision Part of Parcel 2, as shown on Plat No. 24
Street Address 10619 Connecticut Avenue City Kensington State MD Zip 20895
Zone Classification CRT Tax Account No. 13-01021326
Proposed Use Self-storage with ground floor retail

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

Zoning Ordinance subsection providing for proposed use: Section 59-3- 1.6
(in accordance with Section 59-7.3.1)

Owner of property: Name Mountain View Burleson LLC
Address 1825 Eye Street, N.W., Washington, D.C. 20006

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 here with 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.

Erin E. Girard Kelly McKone
Signature of Attorney - (Please print next to signature) Signature of Applicant(s) - (Please print next to signature)
Linowes and Blocher, LLP 1784 Capital Holdings, LLC
7200 Wisconsin Ave., #800, Bethesda MD 20814 8777 N. Gainey Center Dr., Suite 101
Address of Attorney Address of Applicant(s) Scottsdale, AZ 85258
301-961-5153 egirard@linowes-law.com 602-885-2552 866-828-6009
Telephone Number Email Address Home Telephone Number Work Telephone Number

Conditional Use Annual Billing Information (Please Print)
Name: _____
Street Address: _____
City: _____ State: _____ Zip Code: _____
Telephone Number: _____ Email Address: _____