

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}

JAN 25 2018

Montgomery County  
Planning Department

OZAH No. CU- 18-06

Date Certified Complete 4/4/18

Date Filed 4/3/18

Hearing Date APR 3 8/3/18

Time 9:30

Administrative Hearings

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) GOSHEN ENTERPRISES, INC.

Property to be used: Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision P490 ADDITION TO BROOKE GROVE

Street Address. 21201 ZION ROAD City BROOKVILLE State MD Zip 20833

Zone Classification AR Tax Account No. 08-01925313

Proposed Use LANDSCAPE CONTRACTOR

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- 5.5  
(in accordance with Section 59-7.3.1)

Owner of property: Name M & M REALTY, LLC

Address 6931 ARLINGTON RD., SUITE 480, BETHESDA, MD 20814

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? YES

If so, give Case Number(s): S-2454

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)  
JODY S. KLINE  
MILLER, MILLER & CANBY

200-B MONROE ST., ROCKVILLE, MD 20850

Address of Attorney

301-762-5212

Telephone Number

JSKLINE@MMCANBY.COM

Email Address

Signature of Applicant(s) - (Please print next to signature)  
JODY S. KLINE, ATTORNEY

Address of Applicant(s)

Home Telephone Number

Work Telephone Number

Conditional Use Annual Billing Information (Please Print)

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

EXHIBIT NO.

APPLICATION NO.

CU 18-06