## 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- <u>21-06</u>
<b>Date Certified Complete</b> <u>1/21/2021</u>
<b>Date Filed</b> 1/21/2021
Hearing Date <u>5/17/2021</u>
<b>Time</b> 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) Remembrance Life, Inc. c/o Basil Eldadah Parcel 911, Tax Map KT 121
Property to be used: Lot Block Subdivision
Street Address. 16621 New Hampshire Avenue City Silver Spring State MD Zip 20905
Zone Classification Rural Cluster (RC) ax Account No. 05-00272622  Proposed Use Cemetery
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- <u>5.4.A</u> (in accordance with Section 59-7.3.1)
Owner of property: Name Remembrance Life, Inc.
Address 15116 Bauer Drive, Rockville, MD 20853
Applicant 's present legal interest in above property: (check one)  [X] Owner (including joint ownership) [] Lessee [] Tenant other than lessee [] Contract Purchaser  [Describe]
Has any previous application for a special exception or conditional use involving this property been made by this Applicant, of by anyone else to this Applicant's knowledge? No  If so, give Case Number(s): n/a
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 statement, and information contained in or filed with this Application are true and correct.  Remembrance Life, Inc.  Basil Eldadah  Signature of Attorney - (Please print next to signature)  Signature of Applicant s) - (Please print next to signature)
200-B Morroe Street, Rockville, MD 20850 Address of Attorney  15116 Bauer Drive, Rockville, MD 20853 Address of Applicant(s)
301.762.5212 JSKline@mmcanby.com Email Address Home Telephone Number Work Telephone Number
Conditional Use Annual Billing Information (Please Print)  Name:
Street Address:
City:Zip Code:Zip Code: