

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- 23-04
Date Certified Complete 11/8/2022
Date Filed 11/8/2022
Hearing Date 3/6/2023
Time 9:30 AM

APPLICATION FOR CONDITIONAL USE

(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) Rossana Espinoza-Thorndahl

Property to be used: Lot _____ Block _____ Subdivision _____

Street Address. 17621 Buehler Rd. City Olney State MD Zip 20832

Zone Classification R-90 Tax Account No. 01485818

Proposed Use Large Family Childcare

If this Application is for a Day Care Facility, specify the number of children to be cared for 12

Zoning Ordinance subsection providing for proposed use: Section 59-3- 3.4.4.D. Group Daycare 9-12 persons
(in accordance with Section 59-7.3.1)

Owner of property: Name Rossana Espinoza-Thorndahl / Reed Thorndahl

Address 17621 Buehler Rd. Olney MD-20832

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)

Address of Attorney

Telephone Number

Email Address

Rossana Espinoza-Thorndahl
Signature of Applicant(s) - (Please print next to signature)

17621 Buehler Rd. Olney MD-20832
Address of Applicant(s)

301-7745805 240 644 3108
Home Telephone Number Work Telephone Number

Conditional Use Annual Billing Information (Please Print)

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Email Address: _____