



2425 Reedie Drive  
 Wheaton, Maryland 20902

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Phone 301.495.4550  
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**PRELIMINARY PLAN APPLICATION**

Initial Application     Final Application     Revised Application     Amendment

|                                 |         |
|---------------------------------|---------|
| File Number                     | 1 _____ |
| Date Application Filed          | _____   |
| NRI/FSD File No., if applicable | 4 _____ |

An application will not be accepted for review unless all required information and fees are provided. If an item requires more space, attach a separate sheet.

**Preliminary Plan Name (Subdivision):** National Park Seminary Acres 4.23 (sf / 43,560)

Property Tax Account Number(s) associated with the plan (8 digits)

A. 3533266    B. \_\_\_\_\_    C. \_\_\_\_\_    D. \_\_\_\_\_    E. \_\_\_\_\_  
 F. \_\_\_\_\_    G. \_\_\_\_\_    H. \_\_\_\_\_    I. \_\_\_\_\_    J. \_\_\_\_\_

**Location:** (Complete either A or B)

A. On Linden Lane, 5 feet North of Smith Drive  
Street Name (N,S,E,W etc.) Nearest Intersecting Street

B. North quadrant, intersection of \_\_\_\_\_ and \_\_\_\_\_  
(N,S,E,W etc.) Street Name Street Name

**Subdivision Information:** (Complete either C, if located within a recorded subdivision, or D)

C. Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

D. Parcel K Liber 46136 Folio 93; Parcel \_\_\_\_\_ Liber \_\_\_\_\_ Folio \_\_\_\_\_; Parcel \_\_\_\_\_ Liber \_\_\_\_\_ Folio \_\_\_\_\_

**Applicant Team** (Enter all that apply and submit separate supporting documentation as necessary)

**Primary Contact** (Person who will be the primary contact and point person for future electronic review process.)

|                                 |                           |                                 |  |
|---------------------------------|---------------------------|---------------------------------|--|
| <u>RAZTEC ASSOCIATES, INC.</u>  |                           | <u>MIKE RAZAVI</u>              |  |
| <small>Company Name</small>     |                           | <small>Contact Person</small>   |  |
| <u>341 WEST PATRICK STREET</u>  |                           |                                 |  |
| <small>Street Address</small>   |                           |                                 |  |
| <u>FREDERICK</u>                |                           | <u>MD</u>                       | <input checked="" type="checkbox"/> <u>21701</u> |
| <small>City</small>             |                           | <small>State</small>            | <small>Zip Code</small>                          |
| <u>(301) 775-4394</u>           |                           | <u>mike@raztecengineers.com</u> |  |
| <small>Telephone Number</small> | <small>Fax Number</small> | <small>E-mail</small>           |  |

NOTE: This email will be used to create the ePlans project account.

**Owner**

Would you like to receive ePlans notifications? \*  Yes  No

|                                 |                           |                               |  |
|---------------------------------|---------------------------|-------------------------------|--|
| <u>MANOVA COPRPORATION</u>      |                           | <u>JOHN JIN</u>               |  |
| <small>Company Name</small>     |                           | <small>Contact Person</small> |  |
| <u>8408 BEECH DRIVE</u>         |                           |                               |  |
| <small>Street Address</small>   |                           |                               |  |
| <u>BETHESDA</u>                 |                           | <u>MD</u>                     | <input checked="" type="checkbox"/> <u>21701</u> |
| <small>City</small>             |                           | <small>State</small>          | <small>Zip Code</small>                          |
| <u>(301) 919-4700</u>           |                           | <u>JOHNJIN2020@GMAIL.COM</u>  |  |
| <small>Telephone Number</small> | <small>Fax Number</small> | <small>E-mail</small>         | <small>*required if checked yes</small>          |

**Owner's Representative or Contract Purchaser** (Authorization is required from the owner)

Would you like to receive ePlans notifications? \*  Yes  No

|                                 |                           |                               |   |
|---------------------------------|---------------------------|-------------------------------|---|
| <u>_____</u>                    |                           | <u>_____</u>                  |   |
| <small>Company Name</small>     |                           | <small>Contact Person</small> |   |
| <u>_____</u>                    |                           |                               |   |
| <small>Street Address</small>   |                           |                               |   |
| <u>_____</u>                    |                           | Select one of the following:  |   |
| <small>City</small>             |                           | <u>_____</u>                  | <u>_____</u>                            |
|                                 |                           | <small>State</small>          | <small>Zip Code</small>                 |
| <u>_____</u>                    | <u>_____</u>              | <u>_____</u>                  |   |
| <small>Telephone Number</small> | <small>Fax Number</small> | <small>E-mail</small>         | <small>*required if checked yes</small> |

**Engineer or Surveyor**

Would you like to receive ePlans notifications? \*  Yes  No

|                         |   |
|-------------------------|---|
| RAZTEC ASSOCIATES, INC. | MIKE RAZAVI                               |
| <i>Company Name</i>     | <i>Contact Person</i>                     |
| 341 WEST PATRICK STREET |   |
| <i>Street Address</i>   |   |
| FREDERICK               | MD  |
| <i>City</i>             | <i>State</i>                              |
|                         | <input checked="" type="checkbox"/> 21701 |
|                         | <i>Zip Code</i>                           |
| <i>Telephone Number</i> | <i>Fax Number</i>                         |
|                         | <i>E-mail</i> *required if checked yes    |

**FCP Plan Preparer, if applicable**

Would you like to receive ePlans notifications? \*  Yes  No

|                              |  |
|------------------------------|--|
| AMENDMENT SUBMISSION         |  |
| <i>Company Name</i>          | <i>Contact Person</i>                  |
| <i>Street Address</i>        |  |
| Select one of the following: |  |
| <i>City</i>                  | <i>State</i>                           |
|                              | <i>Zip Code</i>                        |
| <i>Telephone Number</i>      | <i>Fax Number</i>                      |
|                              | <i>E-mail</i> *required if checked yes |

**Attorney**

Would you like to receive ePlans notifications? \*  Yes  No

|                              |  |
|------------------------------|--|
| <i>Company Name</i>          | <i>Contact Person</i>                  |
| <i>Street Address</i>        |  |
| Select one of the following: |  |
| <i>City</i>                  | <i>State</i>                           |
|                              | <i>Zip Code</i>                        |
| <i>Telephone Number</i>      | <i>Fax Number</i>                      |
|                              | <i>E-mail</i> *required if checked yes |

**Other:** \_\_\_\_\_

Would you like to receive ePlans notifications? \*  Yes  No

|                              |  |
|------------------------------|--|
| <i>Company Name</i>          | <i>Contact Person</i>                  |
| <i>Street Address</i>        |  |
| Select one of the following: |  |
| <i>City</i>                  | <i>State</i>                           |
|                              | <i>Zip Code</i>                        |
| <i>Telephone Number</i>      | <i>Fax Number</i>                      |
|                              | <i>E-mail</i> *required if checked yes |

**Development Information: (See Submission Requirements)**

Method of Development:  Standard  Optional  Cluster  MPDU  TDR  BLT

No. of TDRs \_\_\_\_\_ BLT square footage \_\_\_\_\_

| Zoning  | Overlay Zone | Acres | Develop-ment Type Code                 | On the Ground Built Resid'l du / Comm'l sf | Previously Approved Resid'l du/ Comm'l sf | Retained Resid'l du/ Comm'l sf | Proposed Resid'l du/ Comm'l sf | * | MPDUs | Other Affordable Housing Du | Age Rest. Housing du | Senior Housing du |
|---|--------------|-------|--|--|---|--------------------------------|--------------------------------|---|-------|-----------------------------|----------------------|-------------------|
| PD15  | NON          | 4     | SF-Single Fam <input type="checkbox"/> | 1.00                                       | 1.00                                      | 1.00                           | 1.00                           |   |       |                             |                      |                   |
|   | NON          |       | TW-Single Fam <input type="checkbox"/> | 0.00                                       | 0.00                                      | 0.00                           | 8.00                           |   |       |                             |                      |                   |
|   | NON          |       | GR-MR Apt/Cor <input type="checkbox"/> | 0.00                                       | 0.00                                      | 0.00                           | 14.00                          |   |       |                             |                      |                   |
|   | NON          |       | AC-Commercial, Agric                   |  |   |                                |                                |   |       |                             |                      |                   |
|   | NON          |       | AC-Commercial, Agric                   |  |   |                                |                                |   |       |                             |                      |                   |
|   | NON          |       | AC-Commercial, Agric                   |  |   |                                |                                |   |       |                             |                      |                   |
|   | NON          |       | AC-Commercial, Agric                   |  |   |                                |                                |   |       |                             |                      |                   |
| Total plan acres  |              | 4     | Total Resid'l                          | 0.00                                       |   |                                | 23.00                          |   |       |                             |                      |                   |
|   |              |       | Total Comm'l                           |  |   |                                |                                |   |       |                             |                      |                   |
| * Maximum number of dwelling units allowed by zoning ↑ (make only one entry per zone) |              |       |  |  |   |                                |                                |   |       |                             |                      |                   |

Total Number of Proposed Development Lots/Parcels 10  
Total Number of Proposed Outlots 0 Total Number of Proposed Non-Development Parcels 0  
Total Square footage of Areas Dedicated to Public Use: 0

**Supplementary Information:**

Previous Plan Submittals: (enter information, if applicable)

Zoning case Case No. \_\_\_\_\_  
Development Plan/Schematic DP Case No. \_\_\_\_\_  
Conditional Use/Special Exception Case No. \_\_\_\_\_  
Variance Case No. \_\_\_\_\_  
NRI/FSD (if applicable) File Number 4- 4358  
Pre-Application Submission File Number 7- \_\_\_\_\_  
Concept Plan File Number 5- \_\_\_\_\_  
Project Plan File Number 9- \_\_\_\_\_  
Sketch Plan File Number 3- \_\_\_\_\_  
Preliminary Plan File Number 1- \_\_\_\_\_  
Site Plan File Number 8- 20200050

If property contains recorded lots, enter M-NCPPC record plat number(s) \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Is this preliminary plan being reviewed concurrently? Sketch/Project Plan \_\_\_\_\_ or Site Plan 820200050

Has the applicant had any pre-submission meetings with M-NCPPC staff?  Yes  No

Name of Staff: \_\_\_\_\_ Date of meeting(s): \_\_\_\_\_

Is the property in the Locational Atlas and Index of Historic Sites?  Yes  No

Is the property in the Master Plan for Historic Preservation?  Yes  No

Is the property within a school cluster in moratorium under the current Annual Growth Policy?  Yes  No

Does this project use deed transfers from other properties, if yes, list the property ID Nos.  Yes  No

1: \_\_\_\_\_ 2: \_\_\_\_\_ 3: \_\_\_\_\_ 4: \_\_\_\_\_ 5: \_\_\_\_\_

6: \_\_\_\_\_ 7: \_\_\_\_\_ 8: \_\_\_\_\_ 9: \_\_\_\_\_ 10: \_\_\_\_\_

Waiver(s) requested, if any  Yes  No (Identify code section and address in a separately provided Statement of Justification)

Are there any legal restrictions on property not shown on plan\*?  Yes  No

(If any, address in your Statement of Justification.)

\*NOTE: MNCPPC does not enforce private easements or any other private legal agreements, but they should be noted as part of the application.

**Existing Sewer and Water Categories:**

Existing Service Category: Sewer S1 Water W1

Pending Service Category: Sewer S1 Water W1

**Proposed Sanitary Systems:**  Public Water  Public Sewer  Well  Septic

**Forest Conservation Plan Supplemental Information**

Does the FCP involve impacts to trees that require a variance per the Forest Conservation Law?  Yes  No

Is amendment in response to violation?  Yes  No

**Signature of Applicant (Owner, Owner's Representative or Contract Purchaser)**

Applicant hereby certifies that he/she is  the sole owner of the subject property, is  otherwise legally authorized to represent the owner(s) (written verification provided), or is  a contract purchaser authorized to submit this application by the property owner (written verification provided).



June 20, 2022

Signature

Date

Jian Jin

Name (Type or Print)