



SUP # 209-0043

Administrative Special Use Permit Application

Please type or print legibly

PROPERTY LOCATION: 115 KING STREET

ZONE: KR TAX MAP REFERENCE: 075-01-03-05

APPLICANT'S INFORMATION:

Applicant: NOE LANDINI Business/Trade Name: LANDINI BROTHERS

Address: 115 KING STREET

Phone: 703 836 8404

Email: NOE@LANDINIBROTHERS.COM

PROPOSED USE:

- Day Care Center
- Restaurant
- Outdoor Dining (not within the King Street Retail Overlay)
- Light Auto Repair
- Overnight Pet Boarding
- Live Theater
- Outdoor Food and Crafts Market Center
- Outdoor Garden Center
- Catering Business
- Outdoor Display
- Valet Parking

Please read and sign after the statement:

I have read and understand the general standards and the requirements for the use for which I am applying and have attached the Worksheet for the use.

Signature: [Handwritten Signature]

Please submit the following with this application form:

Site Plan At a minimum, show and label the subject property, surrounding buildings, and streets. Show, label and give dimensions for all parking spaces, entrances and exits, and trees and shrubbery.

Floor Plan At a minimum, show and label all interior features inside and outside seats, tables, counters, equipment, etc. as appropriate to the use. Show, label and give dimensions for all entrance and exit doors and windows, rooms/areas, staircases, elevators and bathrooms.

Worksheet for specific use from Checklist and Worksheet package.

Other materials, as required by specific use (see Guide to Administrative SUPs Checklist & Worksheets).

PROPERTY OWNER'S AUTHORIZATION

As the property owner, I hereby grant the applicant use of _____
(property address), for the purposes of operating a _____ (use)
business as described in this application.

I also grant permission to the City of Alexandria to visit, inspect, photograph and post placard notice on my property.

Name: _____ Phone: _____

Address: _____ Email: _____

Signature: _____ Date: _____

1. The applicant is the (check one):

- Owner
- Contract Purchaser
- Lessee or
- Other: _____

of the subject property.

State the name, address and percent of ownership of any person or entity owning an interest in the applicant or owner, unless the entity is a corporation or partnership, in which case identify each owner and the percent of ownership.

If property owner or applicant is being represented by an authorized agent such as an attorney, realtor, or other person for which there is some form of compensation, does this agent or the business in which the agent is employed have a business license to operate in the City of Alexandria, Virginia?

- Yes. Provide proof of current City business license
- No. The agent shall obtain a business license prior to filing application, if required by the City Code.

USE CHARACTERISTICS

2. Please give a brief statement describing the use:

LANDWI BROTHERS WISHES TO USE TWO
PARKING SPACES IN ORDER TO PROVIDE
VALET PARKING FOR LANDWI BROTHERS AND
FISH MARKET

3. Please describe the proposed hours of operation:

Days <u>FRI-SAT</u>	Hours <u>5:30PM - 11:00PM</u>
Daily	

Or give hours for each day of the week

Monday	
Tuesday	
Wednesday	
Thursday	
Friday	<u>5:30 - 11:00PM</u>
Saturday	<u>5:30 - 11:00PM</u>
Sunday	

4. Please describe the capacity of the proposed use:

A. How many patrons, clients, pupils and other such users do you expect? Specify time period (i.e., day, hour, or shift).

MIN = 25 CARS MAX = 50 CARS

B. How many employees, staff and other personnel do you expect? Specify time period (i.e., day, hour, or shift).

2 ATTENDANTS PER SHIFT

5. A. How many parking spaces of each type are provided for the proposed use:

- 2 Standard and compact spaces
- X Handicapped accessible spaces
- X Other

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- B. Please give the number of:
Parking spaces on-site 0
Parking spaces off-site 50

If the required parking will be located off-site, where will it be located?

115 S. UNION STREET

6. Please provide information regarding loading and unloading for the use:

- A. How many loading spaces are available for the use? 0
- B. Where are off-street loading spaces located? 0
- C. During what hours of the day do you expect loading/unloading operations to occur? 5:30 AM - 11:00 PM
- D. How frequently are loading/unloading operations expected to occur, per day or per week, as appropriate? EVERY 5-15 MINUTES

7. If any hazardous materials or organic compounds (for example paint, ink, lacquer thinner, or cleaning or degreasing solvent), as defined by the state or federal government, be handled, stored, or generated on the property, provide the name, monthly quantity, and specific disposal method below:

N/A

APPLICANT'S SIGNATURE

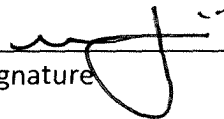
Please read and initial each statement:

Initial: ML THE UNDERSIGNED, hereby applies for a Special Use Permit in accordance with the provisions of Article XI, Section 11-500 of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.

Initial: ML THE UNDERSIGNED, hereby attests that all of the information herein provided and specifically including all surveys, drawings, etc., required to be furnished by the applicant are true, correct and accurate to the best of their knowledge and belief. The applicant is hereby notified that any written materials, drawings or illustrations submitted in support of this application and any specific oral representations made to the Director of Planning and Zoning on this application will be binding on the applicant unless those materials or representations are clearly stated to be non-binding or illustrative of general plans and intentions, subject to substantial revision, pursuant to Article XI, Section 11-207(A)(10), of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.

NOE LANDINI

Print Name of Applicant or Representative


Signature

7.21.09
Date

If this application is being filed by someone other than the business owner (such as an agent or attorney), please provide the information below:

Representative's Address: 115 KING ST.

ALEX. VA. 22314

Phone: 571.238.7613

Email: NOE @ LANDINI BROTHERS. COM

Fax: 703.549.3896

Landini Brothers, Inc. Restaurant

115 King Street
Alexandria, Virginia 22314
Tel: (703) 836-8404
Fax: (703) 549-3596
www.landinibrothers.com

July 23, 2009

City of Alexandria

Valet parking plan for Landini Brothers Inc.,

- a. The location of the drop off area is in front of 115 King Street (Landini Brothers entrance). The location of the parked vehicles is 115 S. Union Street.
- b. The proposed days and hours of operation are Friday and Saturday, 5:30pm – 11:00pm.
- c. The number of spaces available at the storage site is 50, which is the entire second floor of the garage.
- d. The owners of Landini Brothers, the valet company and the garage are agreeable to the terms and information submitted with this plan.
- e. The size of the drop off site is approximately 50 feet which is roughly the size of two street side parking spaces of which will be lost during the proposed hours of operation.
- f. The location of the drop off site will not interfere with traffic because vehicles will be able to pull into the vacant spots reserved for the hours of operation.
- g. *Drop off site, frontal view:*



Drop off site including valet route to storage location:

A = drop off in front of Landini Brothers

B = storage location

