



APPLICATION SPECIAL USE PERMIT

ADMINISTRATIVE CHANGE OF OWNERSHIP OR MINOR AMENDMENT

☒ **Change of Ownership**

☐ **Minor Amendment**

[must use black ink or type]

PROPERTY LOCATION: 499 Pickett Street and 5651 Edsall Road

TAX MAP REFERENCE: 058.03-01-05 and -06

ZONE: CSL

APPLICANT

Name: NCALEXANDRIA, LLC

Address: 358 Broadway Ste 403 Saratoga Springs, NY 12866

PROPERTY OWNER

Name: Alexandria Pickett Street, LLC

Address: 1902 Association Drive Reston, VA 20191

SITE USE: Automotive Sales, Service, and Storage

Business Name: **Current:** BMW of Alexandria **Proposed (if changing):** no change

☒ **THE UNDERSIGNED** hereby applies for a Special Use Permit for **Change in Ownership**, in accordance with the provisions of Article XI, Division A, Section 11-503 (5)(f) of the 1992 Zoning Ordinance of City of Alexandria, Virginia.

☒ **THE UNDERSIGNED**, having read and received a copy of the special use permit, hereby agrees to comply with all conditions of the current special use permit, including all other applicable City codes and ordinances.

☐ **THE UNDERSIGNED** hereby applies for a Special Use Permit for **Minor Amendment**, in accordance with the provisions of Article XI, Division A, Section 11-509 and 11-511 of the 1992 Zoning Ordinance of City of Alexandria, Virginia.

☒ **THE UNDERSIGNED**, having obtained permission from the property owner, hereby requests this special use permit. The undersigned also attests that all of the information herein required to be furnished by the applicant are true, correct and accurate to the best of his/her knowledge and belief.

NCALEXANDRIA, LLC By: M. Catharine Puskar

Print Name of Applicant or Agent

2200 Clarendon Boulevard, Suite 1300

Mailing/Street Address

Arlington, VA 22201

City and State Zip Code

MC Puskar

Signature

703-528-4700

Telephone #

cpuskar@thelandlawyers.com

Email address

October 10, 2025

Date

DO NOT WRITE IN THIS SPACE - OFFICE USE ONLY

Application Received: _____

Fee Paid: \$ _____

Legal advertisement: _____

ACTION - PLANNING COMMISSION _____

ACTION - CITY COUNCIL: _____

The following information must be furnished to the Department of Planning and Zoning to determine if the current use conducted on the premises complies with the special use permit provisions and all other applicable codes and ordinances.

1. Please describe prior special use permit approval for the subject use.

Most recent Special Use Permit # 2019-0048

Date approved: June / 14 / 2019
month day year

Name of applicant on most recent special use permit AV Automotive Munich, LLC

Use Automotive Sales, Service, and Storage

2. Describe below the nature of the *existing operation in detail* so that the Department of Planning and Zoning can understand the nature of the change in operation; include information regarding type of operation, number of patrons served, number of employees, parking availability, etc. (Attach additional sheets if necessary.)

The existing use is an automotive sales, service, and storage center that has operated in this location since the 1980s. The operation will remain consistent with the current dealership hours of operation, number of patrons, number of employees, parking, etc. and consistent with the current SUP conditions and approved parking plan.

3. Describe any proposed *changes* to the business from what was represented to the Planning Commission and City Council during the special use permit approval process, including any proposed changes in the nature of the activity, the number and type of patrons, the number of employees, the hours, how parking is to be provided for employees and patrons, any noise emitted by the use, etc. (Attach additional sheets if necessary)

No changes to the business operation or SUP conditions are proposed.

[illegible]

4. **Is the use currently open for business?** ☒ Yes ☐ No

If the use is closed, provide the date closed.

_____/_____/_____
month day year

5. **Describe any proposed changes to the conditions of the special use permit:**

No changes are proposed.

6. **Are the hours of operation proposed to change?** ☐ Yes ☒ No

If yes, list the current hours and proposed hours:

Current Hours:

n/a

Proposed Hours:

n/a

7. **Will the number of employees remain the same?** ☒ Yes ☐ No

If no, list the current number of employees and the proposed number.

Current Number of Employees:

n/a

Proposed Number of Employees:

n/a

8. **Will there be any renovations or new equipment for the business?** _____ Yes ☒ No

If yes, describe the type of renovations and/or list any new equipment proposed.

9. **Are you proposing changes in the sales or service of alcoholic beverages?** _____ Yes ☒ No

If yes, describe proposed changes:

- 10. Is off-street parking provided for your employees?** ☒ Yes ☐ No

If yes, how many spaces, and where are they located?

Consistent with Condition #15 and parking plans approved with SUP#2000-0093.

- 11. Is off-street parking provided for your customers?** ☒ Yes ☐ No

If yes, how many spaces, and where are they located?

Consistent with parking plans approved with SUP#2000-0093.

- 12. Is there a proposed increase in the number of seats or patrons served?** ☐ Yes ☒ No

If yes, describe the current number of seats or patrons served and the proposed number of seats and patrons served. For restaurants, list the number of seats by type (i.e. bar stools, seats at tables, etc.)

Current:

n/a

Proposed:

n/a

- 13. Are physical changes to the structure or interior space requested?** ☐ Yes ☒ No

If yes, attach drawings showing existing and proposed layouts. In both cases, include the floor area devoted to uses, i.e. storage area, customer service area, and/or office spaces.

- 14. Is there a proposed increase in the building area devoted to the business?** ☐ Yes ☒ No

If yes, describe the existing amount of building area and the proposed amount of building area.

Current:

n/a

Proposed:

n/a

- 15. The applicant is the** (check one) ☐ Property owner ☐ Lessee

☒ other, please describe: dealership owner and operator

- 16. The applicant is the** (check one) ☐ Current business owner ☒ Prospective business owner

☐ other, please describe: _____

17. Each application shall contain a clear and concise statement identifying the applicant, including the name and address of each person owning an interest in the applicant and the extent of such ownership interest. If the applicant, or one of such persons holding an ownership interest in the applicant is a corporation, each person owning an interest in excess of ten percent (3%) in the corporation and the extent of interest shall be identified by name and address.

For the purpose of this section, the term "ownership interest" shall include any legal or equitable interest held in the subject real estate at the time of the application. If a nonprofit corporation, the name of the registered agent must be provided.

Please provide ownership information here:

see attached

Alexandria Pickett Street, LLC
1902 Association Drive
Reston, VA 20191

Paul Stoddard
301 King Street
City Hall, Room 2100
Alexandria, Virginia 22314

Re: Consent to File for an Administrative Special Use Permit
499 Pickett Street and 5651 Edsall Road, Tax Map Nos. #058.03-01-05 and -06) (the
"Property")

Dear Mr. Stoddard:

As owner of the above-referenced Property, Alexandria Pickett Street, LLC hereby consents to the filing of an Administrative Special Use Permit application for a change of ownership and any related requests by NCALEXANDRIA, LLC.

Very Truly Yours,

ALEXANDRIA PICKETT STREET, LLC

By:  _____

J.H. GRIFIN, ESQ
VSB # 29369
Manson

Its:  _____

Date:  _____

NCALEXANDRIA, LLC
358 Broadway Ste 403
Saratoga Springs, NY 12866

Paul Stoddard
301 King Street
City Hall, Room 2100
Alexandria, Virginia 22314

Re: Authorization to File an Administrative Special Use Permit
499 Pickett Street and 5651 Edsall Road, Tax Map Nos. #058.03-01-05 and -06) (the
"Property")

Dear Mr. Stoddard:

NCALEXANDRIA, LLC hereby authorizes Walsh, Colucci, Lubeley & Walsh, P.C. to
act as agent on its behalf for the filing and representation of an Administrative Special Use
Permit to application for a change of ownership and any related requests.

Very Truly Yours,

NCALEXANDRIA, LLC

By: Trudy Beulia

Its: Secretary

Date: 10-10-2025

Entity	DBA	Address	Entity Type	Filing State	Filing Date	Fed EIN	Members / Shareholders	Officers	Additional Information
NCALEXANDRIA, LLC Principal Address: 358 Broadway Ste 403 Saratoga Springs, NY 12866	BMW of Alexandria	499 S Pickett St Alexandria, VA 22304 & 5651 Edsall Rd Alexandria, VA 22304	LLC	DE	10/30/2024	33-2533141	Michael J. Cantanucci - 1.0% (9 Voting Units; 1 Non-voting Unit) Farokh Bagha - 10% (1 Voting Unit; 99 Non-voting Units) MJC 2018 Business Trust- 79% (790 Non-voting Units) CDB Business Assets, LLC- 10% (100 Non-voting Units)	Michael J Cantanucci, Chairman Jared Cantanucci, President Farokh Bagha, Vice President Trudy Boulia, Secretary/Treasurer	MJC - Sole Director & Chairman

Owners Name & Adresses:

Michael J. Cantanucci
 589 N County Rd
 Palm Beach, FL 33480

Farokh Bagha
 7009 Churchill Rd
 McLean, VA 22101

CDB Business Assets, LLC
 CDB Trust, Sole Member
 Wilmington Trust Company, Trustee
 1100 N Market Street
 Wilmington, DE 19890

MJC 2018 Business Trust
 Carl Leuchten, Trustee
 38 High Rock Ave
 Saratoga Springs, NY 12866