APPLICATION
SPECIAL USE PERMIT

ADMINISTRATIVE CHANGE OF OWNERSHIP OR MINOR AMENDMENT

[✓] Change of Ownership **[ ] Minor Amendment**

[*must use black ink or type*]

PROPERTY LOCATION: 721 N. Columbus Street

TAX MAP REFERENCE: 054.04-08-13 **ZONE:** RB

APPLICANT

Name: The Del Ray Montessori School

Address: 100 E. Windsor Avenue, Alexandria, VA 22301

PROPERTY OWNER

Name: Reverend Michael F. Burbidge Bishop of Catholic Diocese of Arlington

Address: 721 N. Columbus Street, Alexandria, VA 22314

SITE USE: Day Care Center

Business Name: **Current:** Flagstone of Alexandria **Proposed (if changing):** The Del Ray Montessori School

[✓] **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.

The Del Ray Montessori School By: M. Catharine Puskar Attorney/Agent
Print Name of Applicant or Agent

MCPuskar
Signature

2200 Clarendon Boulevard, Suite 1300
Mailing/Street Address

7035284700 Telephone # Fax #

Arlington, VA 22201
City and State Zip Code

cpuskar@thelandlawyers.com
Email address

7/14/2026
Date

DO NOT WRITE IN THIS SPACE - OFFICE USE ONLY

Application Received: _____ Fee Paid: $_____

Legal advertisement: _____

ACTION - PLANNING COMMISSION _____ ACTION - CITY COUNCIL: _____

Special Use Permit #_____

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 # 2443-B

Date approved: 9 / 13 / 1994
month day year

Name of applicant on most recent special use permit Flagstone Associates, Inc.

Use Day Care Center

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 previous day care center run by Flagstone Associates, Inc. closed in September 2025.

There are no proposed changes in the operation of the day care center.

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)

There are no proposed changes to the business from what was approved in the previous SUP.

Special Use Permit #_____

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

If the use is closed, provide the date closed. 9 (month) / 21 (day) / 2025 (year)

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

N/A

6. Are the hours of operation proposed to change? _____ Yes ☑ No

If yes, list the current hours and proposed hours:

Current Hours:	Proposed Hours:
M-F, 6:30am - 6:30pm	M-F, 6:30am - 6:30pm (Same)

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:	Proposed Number of Employees:

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:

N/A

Special Use Permit #_____

10. **Is off-street parking provided for your employees?** ☑ Yes ☐ No
If yes, how many spaces, and where are they located?
10 off-street parking spaces are provided for employee use in the adjoining surface parking lot as shown in the attached exhibit.

11. **Is off-street parking provided for your customers?** ☐ Yes ☑ No
If yes, how many spaces, and where are they located?

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:	Proposed:
100 children maximum	100 children maximum (Same)

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:	Proposed:

15. **The applicant is the** (check one) ☐ Property owner ☑ Lessee
☐ other, please describe:_____

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.

DIOCESE OF ARLINGTON
Office of the Bishop
200 North Glebe Road, Suite 914 • Arlington, Virginia 22203 • Office (703) 841-2511 • Fax (703) 524-5028

July 10, 2026

Paul Stoddard
421 King Street, Suite 205
Alexandria, Virginia 22314

Re: Consent to File for an Administrative Special Use Permit
721 N. Columbus Avenue, Tax Map No. 054.04-08-13 (the "Property")

Dear Mr. Stoddard:

As owner of the above-referenced Property, I hereby consent to the filing of an application for a change of the ownership of the Day Care Center located at 721 N. Columbus Street, and any related requests by The Del Ray Montessori School.

Very truly yours,

Michael F. Burbidge

Most Reverend Michael F. Burbidge,
Bishop of the Catholic Diocese of Arlington,
Virginia, and His Successors in Office

The Del Ray Montessori School
100 E. Windsor Avenue
Alexandria, VA 22301

Paul Stoddard
421 King Street, Suite 205
Alexandria, Virginia 22314

Re: Authorization to File for an Administrative Special Use Permit
721 N. Columbus Avenue, Tax Map No. 054.04-08-13 (the "Property")

Dear Mr. Stoddard:

The Del Ray Montessori School hereby authorizes Walsh, Colucci, Lubeley & Walsh, P.C. to act as agent on its behalf for the filing and representation of an application for a change of ownership of the Day Care Center located at 721 N. Columbus Avenue and any related requests.

Very truly yours,

The Del Ray Montessori School

By: _____

Its: Head of School

Date: 23 June 2026

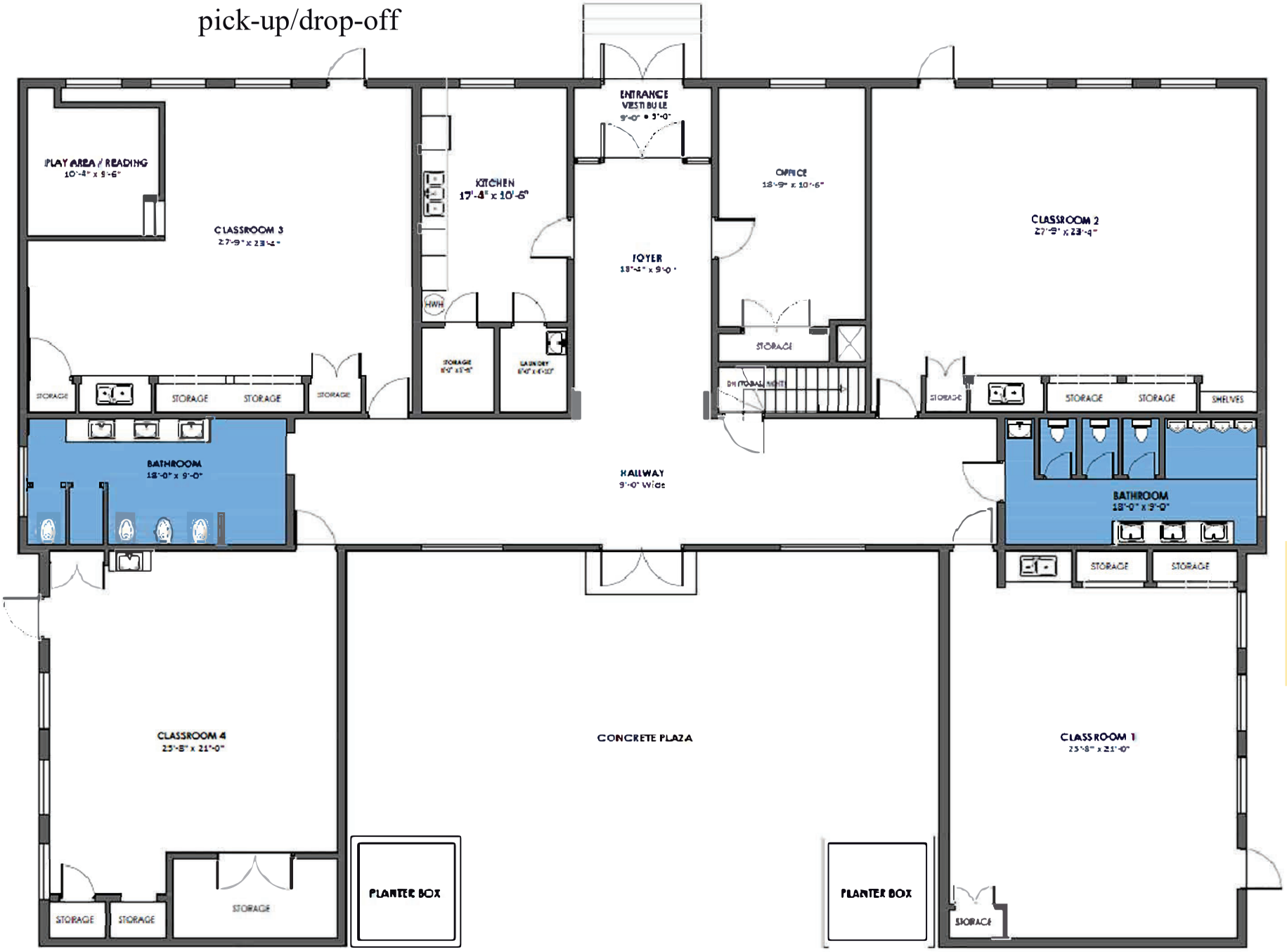
The Del Ray Montessori School – Ownership Chart
June 23, 2026

The Del Ray Montessori School, a 501(c)(3) corporation
Address: 100 E. Windsor Avenue, Alexandria, VA 22301

Board of Directors:

Bonita Lea, President
Douglass McQuiston, Secretary
John Bonhom, Member
Ian Soule, Member
Emily Utzerath, Member
Alina Scott, Member
Jennifer Bush, Ex-Officio Non-voting Member

2 existing street spaces for 15 minute pick-up/drop-off



Wythe St

Madison St.

GROUND FLOOR PLAN


Parking for Staff
playground for students
721 N Columbus St
St Joseph Catholic Church