



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 # 2001-0088

Date approved: 10 / 02 / 2001  
month day year

Name of applicant on most recent special use permit 710 King Street LLC  
Use Restaurant

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.)

Operating restaurant and bar under a new name. The hours of operation will remain the same, 11am to 11pm Sunday through Thursday, and 11am to 1am Friday and Saturday. The primary business will be food service for customers. Entertainment will be provided, secondary to the primary purpose. Acoustic music, usually a singer and a guitar player, will be provided in the first floor dining room during dinner hours. Similar entertainment, which may include two dancers (traditional), may be provided on the second floor as well. All applicable conditions of existing SUP will be complied with.



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

If the use is closed, provide the date closed. 3 / 3 / 2014  
month day year

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

None.

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

If yes, list the current hours and proposed hours:

Current Hours:	Proposed Hours:
_____	_____
_____	_____
_____	_____

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.

The decoration will be refreshed and enhanced, to highlight existing features of the building. Repairing existing plumbing, electrical, etc. Repair of kitchen equipment. New furniture. ADA accessibility increased. Service areas increased upstairs.

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?

Two spaces behind 710 King St. building, six spaces at Coat Yard Parking, S. Henry St.

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

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

As per existing agreement.

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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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.

See plans already submitted.

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 (10%) 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:**

Karla Booth, 120 S. Fayette St, Alexandria VA

Virginia Norton, 1140 Basil Rd, McLean, VA

Robert Kaufman, PMA Properties, 815 King St.,  
Alexandria VA

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