



SUP # \_\_\_\_\_

# Administrative Special Use Permit Application

Please type or print legibly

PROPERTY LOCATION: 3900 King St. Alexandria 22302

ZONE: RA

TAX MAP REFERENCE: 021.02-01-06

### APPLICANT'S INFORMATION:

Applicant: Fairlington Preschool Business/Trade Name: Fairlington Preschool

Address: 3900 King St Alexandria

Phone: 703-671-3939

Email: preschool@fairlingtonumc.org

### PROPOSED USE:

- Day Care Center *increase capacity in current half day preschool*
- 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 interim 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 Fairlington VMC  
(property address), for the purposes of operating a Fairlington Preschool (increased capacity) (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: Christian White Phone 703-671-8557

Address: 3900 King Street Alexandria, VA 22302 Email: christian@fairlingtonvmc.org

Signature:  Date: 10/15/2012

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.

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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:

Fairlington Preschool would like to increase Capacity for 3+4 year olds in partnership w/ ACPs. 2 classrooms, 24 additional children + 4 additional staff. See attached letter.

3. Please describe the proposed hours of operation:

Days	Hours
Daily	

Or give hours for each day of the week

Monday	9-12
Tuesday	9-12
Wednesday	9-12
Thursday	9-12
Friday	9-12
Saturday	
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).

increase capacity from 75 to 99 and 4 <sup>Student</sup> staff members

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

additional 4 from 8:30-12:30

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

159 shared spaces  
 Standard and compact spaces  
4 Handicapped accessible spaces  
 Other

B. Please give the number of:

Parking spaces on-site ~~100~~ 52

Parking spaces off-site ~~100~~ 107 (across street)

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

\_\_\_\_\_

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

A. How many loading spaces are available for the use? Parents park in the lot

B. Where are off-street loading spaces located? N/A + drop off children

C. During what hours of the day do you expect loading/unloading operations to occur? 9:00-9:15, 11:45-12:00

D. How frequently are loading/unloading operations expected to occur, per day or per week, as appropriate? 2 times per day

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:

NO

\_\_\_\_\_

\_\_\_\_\_

**APPLICANT'S SIGNATURE**

Please read and initial each statement:

Initial: OK 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: OK 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.

Carol H Keller  
Print Name of Applicant or Representative

Carol H Keller  
Signature

Date 10/10/12

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

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Fax: \_\_\_\_\_

## DAY CARE IN A CHURCH OR SCHOOL BUILDING

Zoning Ordinance Section 11-513(D)

### Qualify for Administrative Review?

Will the day care be located in any one of the residential zones?  Yes \_\_\_ No

Will the day care be located in a church or school building?  Yes \_\_\_ No

If yes to all questions, the business qualifies for administrative review. If no to any question, speak to P&Z staff about the full SUP process.

Note: City staff will need to determine if the proposed location provides adequate drop off and pick up, and if there is an adequate buffer between the day care and near-by residents.

**WORKSHEET – Answer each question. Attach a separate sheet of paper if necessary.**

### DROP OFF AREA

There must be an area that is large enough to pick up and drop off the children without interfering with other cars and pedestrians.

Where will the pick-up/drop-off area be located? There is a parking lot that holds ~~50~~ cars as well as a satellite lot

How many cars will fit in the area at one time? 52+

**The pick up/drop off area must be shown on the site plan which is part of the application.**

### PROTECTION FOR NEARBY HOMES

The location must be far enough away from nearby homes and apartments so they will not be affected by the operations of the day care facility.

Where in the church or school building will the day care be located? (i.e. basement, upper floors, west side of the building ) \_\_\_\_\_

Current preschool is on 2nd floor - proposed expansion to 3rd floor

How large an area is proposed for day care's operations? \_\_\_\_\_ sq. feet

What steps will be taken to buffer the day care from nearby residences (ex. shrubbery, fencing, etc.)? \_\_\_\_\_

Currently in place

**The location of the child care in relation to nearby homes and apartments must be shown on the site plan which is part of the application.**

**Complete the Administrative Special Use Permit Application on the following pages.**





*Fairlington Preschool*  
*Come and see how we play!*

August 21, 2012

TO WHOM IT MAY CONCERN:

I am writing to request an increase in capacity to our Certificate of Occupancy. We are tentatively planning to have 2 classes in partnership with Alexandria city Public Schools. These classes will be inclusion classes with 12 children in each. 6 children will be ACPS children and 6 will be enrolled Fairlington Preschool children. The teachers will be ACPS employees; not Fairlington Preschool employees. I am requesting an increase from 75 children to 99 children in our licensing capacity from the Virginia Department of Social Services. DSS licensing has let me know that I need to change the Certificate of Occupancy from 75 – 99. The rooms we are planning to use are upstairs from the current preschool classrooms. They are accessible by stairs and an elevator. The dimensions of the rooms are 25x18 and 20x25. The floor plan mirrors the 2<sup>nd</sup> floor which is the floor used for the preschool. There are 2 bathrooms with 3 toilets and 1 urinal between them. There are 2 sinks in each bathroom.

Alexandria City Public Schools would like to have these classes open in October so time will be of the essence in moving forward.

Thanks for your consideration and please let me know what we need to do next.

Sincerely,

Carol Keller  
Director

*3900 King Street, Alexandria, VA 22302-1510*  
*Phone: 703-671-3939*

