



SUP # 2014-0114

# Administrative Special Use Permit Application

PROPERTY LOCATION: 311 N. Washington Street, Suite 1L, Alexandria, VA 22304

ZONE: Commercial CD TAX MAP REFERENCE: 064.04-02-24

### APPLICANT'S INFORMATION:

Applicant: Marcia Noble Business/Trade Name: Your Life Energy

Address: 714 S Saint Asaph St Alexandria, VA 22314

Phone: 202 425 4505 Email: \_\_\_\_\_

### PROPOSED USE:

- |                          |                        |                                     |   |
|--------------------------|------------------------|-------------------------------------|---|
| <input type="checkbox"/> | Day Care Center        | <input type="checkbox"/>            | Restaurant                                  |
| <input type="checkbox"/> | Light Auto Repair      | <input type="checkbox"/>            | Outdoor Dining (exclude King Street Retail) |
| <input type="checkbox"/> | Overnight Pet Boarding | <input type="checkbox"/>            | Live Theater                                |
| <input type="checkbox"/> | Outdoor Garden Center  | <input type="checkbox"/>            | Outdoor Food and Crafts Market Center       |
| <input type="checkbox"/> | Catering Business      | <input type="checkbox"/>            | Outdoor Display                             |
| <input type="checkbox"/> | Valet Parking          | <input checked="" type="checkbox"/> | Massage Establishment                       |

### 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: Marcia Noble  
marice/noble@yahoo.com

### 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.

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PROPERTY OWNER'S AUTHORIZATION

As the property owner, I hereby grant the applicant use of 311 N. Washington Street - Suite 1A (property address), for the purposes of operating a Message / Holistic Center (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: Emanuel A. Baker Jr. Phone: 703-536-2300

Address: 115 Park Ave Falls Church VA 22046 Email: TCPMD@EROLS.COM

Signature: Emanuel A. Baker Jr. Date: 10/22/14

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

1300 sq ft

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2. Please give a brief statement describing the use:

Holistic Center - Massage, Reiki, Crystal Healing, EFT, Meditation, Yoga, Zumba, Tuning Forks Therapy (Resonance Therapy) Tai Chi, Holistic Classes & Workshops

3. Please describe the proposed hours of operation:

Days	Hours
Daily	8:00 am to 8:30 pm

Or give hours for each day of the week

Monday	8 am - 8:30 pm
Tuesday	8 am - 8:30 pm
Wednesday	8 am - 8:30 pm
Thursday	8 am - 8:30 pm
Friday	8 am - 8:30 pm
Saturday	8 am - 6 pm
Sunday	8 am - 6 pm

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).

Please see attached document

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

Please see attached document

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

- 4 Standard and compact spaces
- 1 Handicapped accessible spaces
- ~~2~~ Other ~~public~~ street parking

B. Please give the number of:

Parking spaces on-site ~~X~~ 4

Parking spaces off-site ~~X~~ 0

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?

1

B. Where are off-street loading spaces located?

to left of entrance - street level

C. During what hours of the day do you expect loading/unloading operations to occur?

It might be once a month

D. How frequently are loading/unloading operations expected to occur per day or per week?

It might be once a month

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:

We do not use hazardous materials  
we had only Herbal oil for  
massage

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APPLICANT'S SIGNATURE

Please read and initial each statement:

Initial: JMN 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: JMN 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.

Maricela Noble  
Print Name of Applicant or Representative

Maricela Noble  
Signature

10/27/14  
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:

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

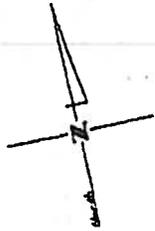
Email: \_\_\_\_\_

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

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4110-414

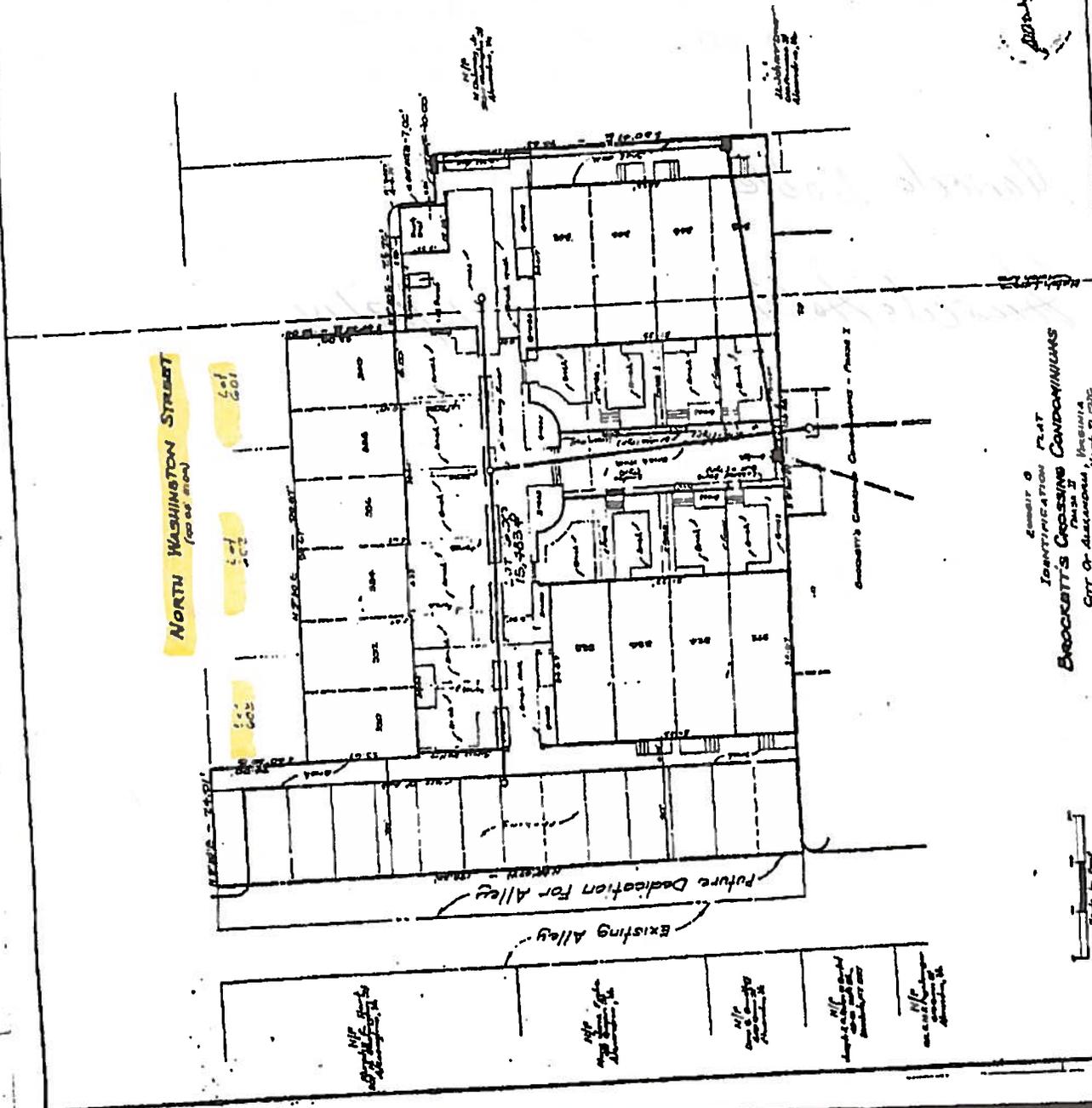


NOTES:  
 1) Improvements Shown Hereon Are Proposed  
 2) Proposed Lpt 600 Was Taken From An Unrecorded Plat Of Resubdivision Of Lot 501 Of A Resubdivision Of The Land Of First Investment, Trp. By Alfred Copeland, C.L.S. Dated June 1, 1935 And Is Not The Result Of A Field Survey.



EXHIBIT 6  
 IDENTIFICATION PLAT  
 BROCKETT'S CROSSING CONDOMINIUMS  
 Phase II  
 CITY OF ALEXANDRIA, MARCH 21, 2010  
 Scale: As Shown

John A. Beatty, P.E., C.L.S.  
 1000 Lakeside Drive  
 Alexandria, VA 22304  
 Phone: 703-536-5300



No Title Report Furnished

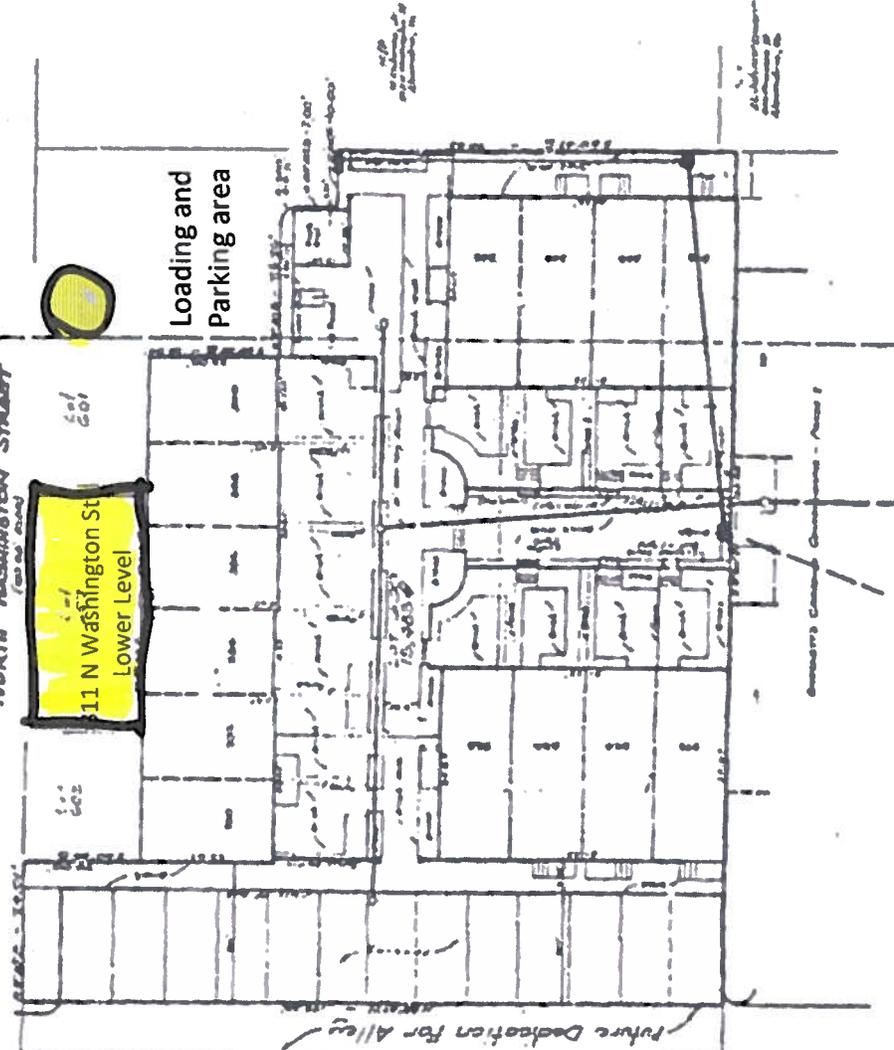


NOTES:  
 1) Improvements Shown Hereon Are Proposed  
 2) Proposed Lpt 600 Was Taken From An Unrecorded Plat Of Reservation Of Lot 501 Of A Residential Subdivision Of The Land Of First Investment By Dr. Alfred Copeland, C.L.S. Dated June 6, 1925 And Is Not The Result Of A Field Survey.



Survey 6  
 Identification Plat  
 BROCKETT'S CROSSING CONDOMINIUMS  
 City Of Alexandria, Virginia  
 Sheet No. 1000

John A. Anest, P.E., C.L.S.  
 State of Virginia  
 License No. 1000

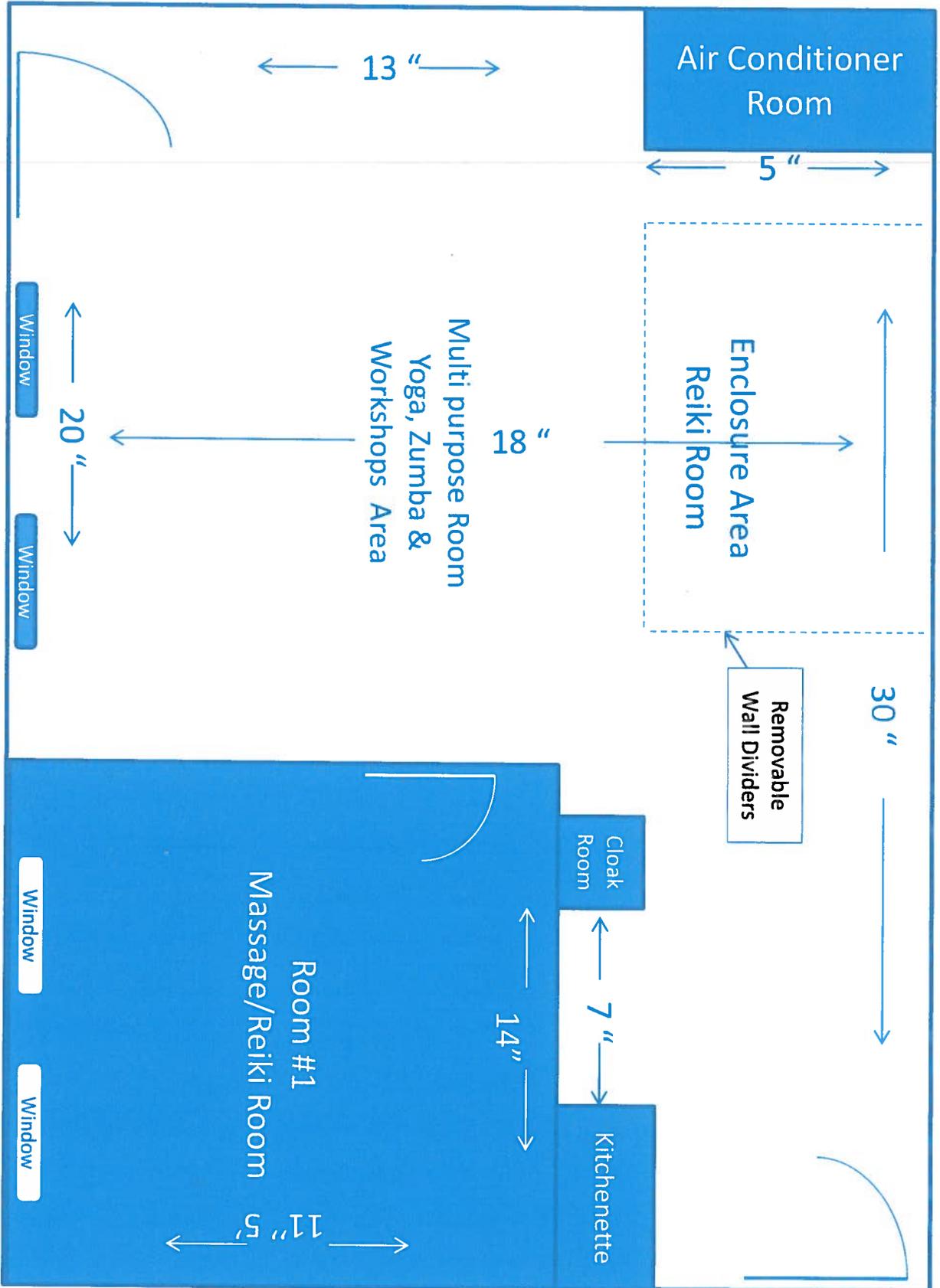


Survey 6  
 Identification Plat  
 BROCKETT'S CROSSING CONDOMINIUMS  
 City Of Alexandria, Virginia  
 Sheet No. 1000

1" = 20'  
 1/4" = 5'

See Title Record Enclosed

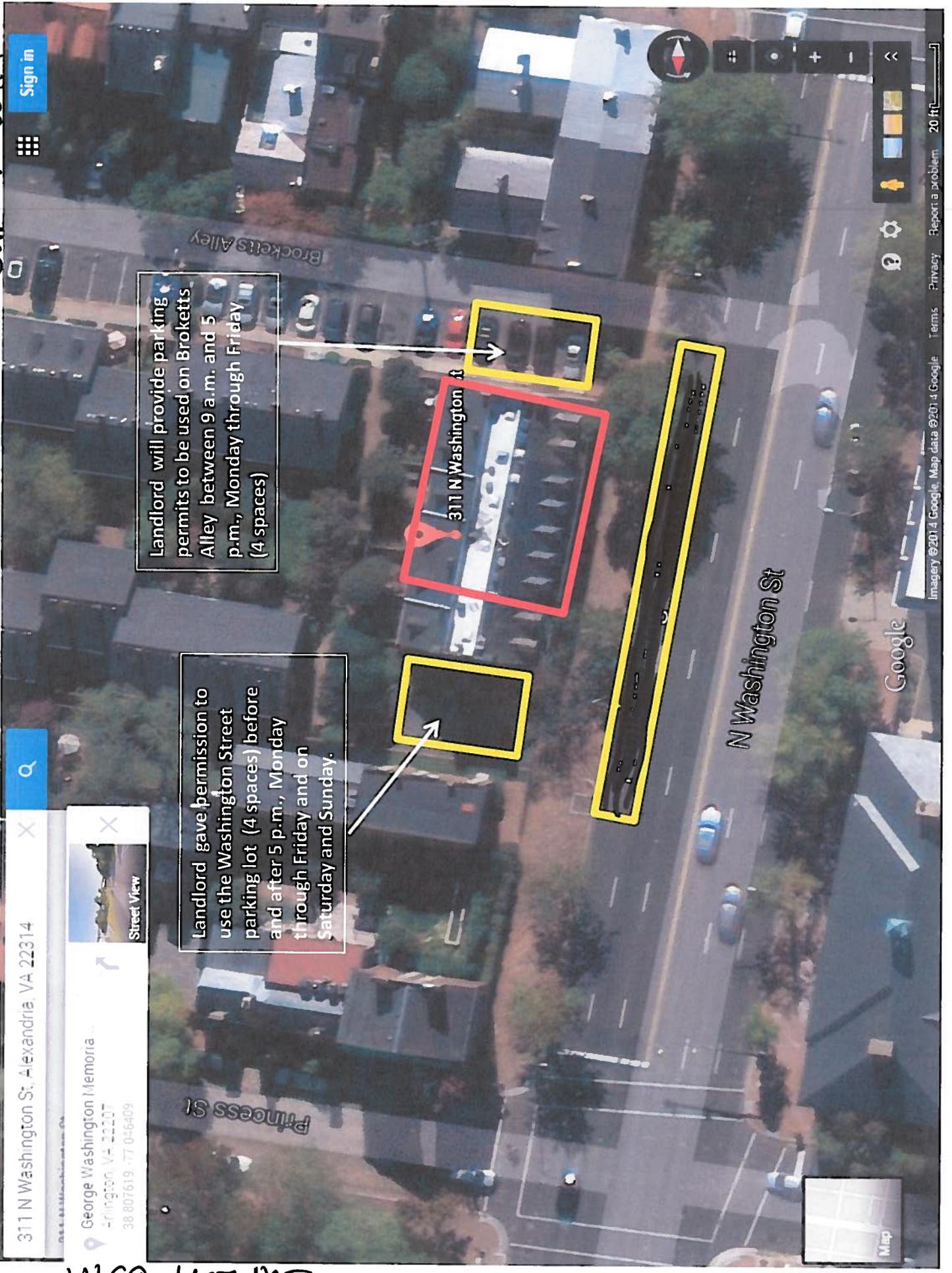
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Sign in

Q

311 N Washington St, Alexandria, VA 22314

George Washington Memoria  
 Arlington, VA 22207  
 38.807619 -77.056409

Street View

Landlord will provide parking permits to be used on Brockett's Alley between 9 a.m. and 5 p.m., Monday through Friday (4 spaces)

Landlord gave permission to use the Washington Street parking lot (4 spaces) before and after 5 p.m., Monday through Friday and on Saturday and Sunday.

311 N Washington St

N Washington St

Brockett's Alley

Princess St

Google

Map

20 ft

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