APPLICATION
SPECIAL USE PERMIT

ADMINISTRATIVE CHANGE OF OWNERSHIP OR MINOR AMENDMENT

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

[*must use black ink or type*]

PROPERTY LOCATION: 654 S. Pickett Street, Alexandria, VA 22304

TAX MAP REFERENCE: 067-02-02-09 **ZONE:** I

APPLICANT

Name: S & A Restaurant Lounge & Entertainment, LLC

Address: P.O. Box 11936 Alexandria, VA 22312

PROPERTY OWNER

Name: Pickett Square M, LLC

Address: 4350 East-West Hwy, Suite 500, Bethesda, MD 20814

SITE USE: Change of Ownership Parking Reduction Special Use Permit SUP 209-0079

[✓] **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.

Abel A. Woldu
Print Name of Applicant or Agent

Signature

P.O. Box 11936
Mailing/Street Address

703-898-5535
Telephone # Fax #

Alexandria, VA 22312 awoldu06@yahoo.com
City and State Zip Code Email address

1/17/2014, Revised 3/10/2014
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 # 2014-0031

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 # 2009-0079

Date approved: 02 / 02 / 2010
month day year

Name of applicant on most recent special use permit Seleshi Getachew

Use Parking Reduction

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 applicant S & A Restaurant Lounge & Entertainment, LLC (the "Applicant") is requesting an administrative change of ownership of SUP 2009-0079 granting a 23 space parking reduction from the number of parking spaces required by the Alexandria Zoning Ordinance to support Applicant's 150 seat permitted restaurant at 654 Pickett Street, Alexandria, Virginia.

Condition 1 of SUP 2009-0079 limited the right to the granted parking reduction to the applicant in 2009.

The Applicant acquired the restaurant and intents to operate it in the same manner as the prior owners consistent with the level of intensity i.e. number of seat, hours of operation and uses (the front room a 40 seat restaurant and the back room for funerals, weddings parties and other events)

The Applicant has agreed that the back room will only be open and used on Thursday, Friday, Saturday and Sunday and will be closed on Monday, Tuesday and Wednesday.

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 except hours of use for back room.

Special Use Permit # 2014-0031

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:

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:
8 am - 2 am Back room Sun-Sat	Closed Mon - Wed
	Open Thurs - Sun 8am - 2am

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.

Not Applicable to this application for parking reduction

9. Are you proposing changes in the sales or service of alcoholic beverages? ____ Yes ____ No
If yes, describe proposed changes:

Not Applicable to this application for parking reduction

Special Use Permit # 2014-0031

10. **Is off-street parking provided for your employees?** ☐ Yes ☑ No
If yes, how many spaces, and where are they located?
We will comply with Condition # 4.

11. **Is off-street parking provided for your customers?** ✓ Yes ___ No
If yes, how many spaces, and where are they located?
The landlord has designated 15 spaces and the non used spaces of other tenant's businesses during their non-business hours.

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.

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) X 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:

S & A Restaurant Lounge & Entertainment, LLC

654 S. Pickett St., Alexandria, VA 22304

Member/Owner - Abel A. Woldu - 50% ownership
3920 Bentwood Court, Fairfax, VA 22301

Member/Owner - Solomon Ephrem - 50% ownership
6895 Washington Blvd, Elkridge, MD 21075