



# APPLICATION SPECIAL USE PERMIT

## ADMINISTRATIVE CHANGE OF OWNERSHIP OR MINOR AMENDMENT

**Change of Ownership**       **Minor Amendment**

[must use black ink or type]

**PROPERTY LOCATION:** 815 1/2 King Street, Alexandria, Virginia  
**TAX MAP REFERENCE:** 074.02 01 03      **ZONE:** KR/King Street Retail

**APPLICANT**

Name: Jeffrey L. Yates  
Address: 2525 King Street, Alexandria, Virginia 22301

**PROPERTY OWNER**

Name: 815 1/2 King Street LLC  
Address: 815 King Street, Suite 203, Alexandria, Virginia 22314

**SITE USE:** Amusement enterprise.

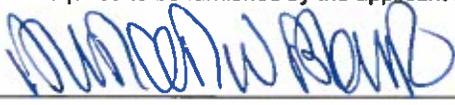
**THE UNDERSIGNED** hereby applies for a Special Use Permit for **Change in Ownership**, in accordance with the provisions of Article XI, Division A, Section 11-503 (5)(f) of the 1992 Zoning Ordinance of City of Alexandria, Virginia.

**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.

Duncan W. Blair, Esquire  
Print Name of Applicant or Agent  
524 King Street  
Mailing/Street Address  
Alexandria, VA                      22314  
City and State                      Zip Code

  
Signature  
703-836-1000                      703-549-3335  
Telephone #                      Fax #  
dblair@landcarroll.com  
Email address  
April 16, 2015  
Date

**DO NOT WRITE IN THIS SPACE - OFFICE USE ONLY**

Application Received: _____	Fee Paid: \$ _____
Legal advertisement: _____	_____
ACTION - PLANNING COMMISSION _____	ACTION - CITY COUNCIL: _____





4. Is the use currently open for business?  Yes  No  
If the use is closed, provide the date closed. 07 / 25 / 2014  
month day year

5. Describe any proposed changes to the conditions of the special use permit:  
No changes to the conditions are proposed.  
\_\_\_\_\_  
\_\_\_\_\_

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.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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?  
 \_\_\_\_\_  
 \_\_\_\_\_

**11. Is off-street parking provided for your customers?**  Yes  No  
 If yes, how many spaces, and where are they located?  
Parking is encouraged and made available to patrons at the public garage on the 100 block of North Alfred Street at a rate of \$1.00 off the regular price of parking. The garage operator will extend hours to one half (1/2) hour after the last performance and theater closing.

**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: Contract purchaser.

**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:**

Jeffrey L. Yates, will own and operate the business as an individual sole proprietorship.

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