



APPLICATION SPECIAL USE PERMIT

ADMINISTRATIVE CHANGE OF OWNERSHIP OR MINOR AMENDMENT

Change of Ownership **Minor Amendment**

[must use black ink or type]

PROPERTY LOCATION: 911 King Street
TAX MAP REFERENCE: 064.04-05-42 **ZONE:** KR

APPLICANT

Name: ARP-Majestic, LLC
Address: PO Box 2937, Duluth, GA 30096

PROPERTY OWNER

Name: Gadonas, Pauline and Demetrios
Address: 501 Carlisle Dr., Alexandria, VA 22301

SITE USE: Restaurant

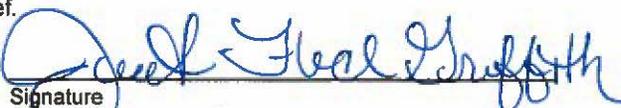
THE UNDERSIGNED hereby applies for a Special Use Permit for **Change in Ownership**, in accordance with the provisions of Article XI, Division A, Section 11-503 (5)(f) of the 1992 Zoning Ordinance of City of Alexandria, Virginia.

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.

Janet Fleck Griffith
Print Name of Applicant or Agent
1750 Tysons Blvd., Suite 1800
Mailing/Street Address
Tysons Corner, VA 22102
City and State Zip Code


Signature
703-712-5429 703-712-5210
Telephone # Fax #
jgriffith@mcguirewoods.com
Email address
August 7, 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. _____ / _____ / _____
month day year

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

No changes to current approval.

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

If yes, list the current hours and proposed hours:

Current Hours:
No changes to current approval.

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:
No changes to current approval.

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.

No changes to current approval.

9. Are you proposing changes in the sales or service of alcoholic beverages? _____ Yes No

If yes, describe proposed changes:

No changes to current approval.

10. Is off-street parking provided for your employees? Yes No
 If yes, how many spaces, and where are they located?
No changes to current approval.

11. Is off-street parking provided for your customers? Yes No
 If yes, how many spaces, and where are they located?
No changes to current approval.

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:
<u>No changes to current approval.</u>	_____
_____	_____
_____	_____

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:
<u>No changes to current approval.</u>	_____
_____	_____
_____	_____

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:

Alexandria Restaurant Partners, LLC, a Virginia limited liability company, owns all of the

membership interest in the applicant, ARP-Majestic, LLC. Each of the followings owns

(directly or indirectly) one-third (1/3) of the membership interest in Alexandria Restaurant

Partners, LLC:

David E. Clapp, 5066 Staverly Ln., Norcross, GA 30092

David R. Nicholas, 610 S. Royal St., Alexandria, VA 22314

Scott Shaw, 221 South Pitt St., Alexandria, VA 22314