



APPLICATION
SPECIAL USE PERMIT

REVISED

ADMINISTRATIVE CHANGE OF OWNERSHIP
OR MINOR AMENDMENT

[] Change of Ownership

Minor Amendment

[must use black ink or type]

PROPERTY LOCATION: 510 John Carlyle St.

TAX MAP REFERENCE: _____ ZONE: _____

APPLICANT

Name: Michael Anderson PTD BBQ, LLC by Michael Anderson
Address: 1320 N. Pegram Street, Alexandria, Va. 22304

PROPERTY OWNER

Name: Post Properties attn:William Gallagher
Address: 5040 Addison Circle, Suite 200 Addison, TX 75001
SITE USE: restaurant

8/2/10

[] 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.

Michael Anderson

Print Name of Applicant or Agent
1320 N. Pegram St.

Mailing/Street Address
Alexandria, Va. 22304

City and State _____ Zip Code _____

Signature
703 362 3539

Telephone # _____ Fax # _____
mike@bbqdelray.com

Email address
1.20.2016

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:
 Adding liquor, on premise only.

6. Are the hours of operation proposed to change? Yes No
 If yes, list the current hours and proposed hours:

Current Hours:

11:00 AM - Midnight

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:

25 full + part time

Proposed Number of Employees:

SBU
2/10

8. Will there be any renovations or new equipment for the business? _____ Yes ^X _____ 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 ^X _____ No
 If yes, describe proposed changes:
 Adding on premise liquor.

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

SBV
2/10

2 spaces located beneath the building

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

SBV
2/10

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.)

SBV
2/10

Current:

48 inside
20 outside

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.

SBV
2/10

Current:

1,800

Proposed:

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:
Michael & Donna Anderson, 1320 N. Pegram St. Alexandria, Va. 22304
