



Administrative Special Use Permit Application

Please type or print legibly

PROPERTY LOCATION: 901 N. WASHINGTON ST #101 ALEXANDRIA, VA 22314
ZONE: _____ TAX MAP REFERENCE: _____

APPLICANT'S INFORMATION:

Applicant: Solar Service Inc Business/Trade Name: F45
Address: 901 N. WASHINGTON ST #101 ALEXANDRIA VA 22314
Phone: 703-626-5830 Email: COO@SOLARPLANET.US

PROPOSED USE:

- Animal Care Facility with Overnight Boarding
- Automobile and Trailer Rental and Sales
- Catering Business
- Day Care
- Health and Athletic Club
- Light Auto Repair
- Live Theater
- Massage Establishment
- Motor Vehicle Storage/Parking for 20 or more Vehicles
- Outdoor Dining (exclude King Street Retail Overlay)
- Outdoor Display
- Outdoor Food and Crafts Market Center
- Outdoor Garden Center
- Restaurant
- Valet Parking

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: _____

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 interim 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.

Other materials, as required by specific use (see Guide to Administrative SUPs Checklist & Worksheets).

PROPERTY OWNER'S AUTHORIZATION

As the property owner, I hereby grant the applicant use of 901 N. Washington Street, Suite 101
 (property address), for the purposes of operating a HEALTH & ATHLETIC CLUB (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: John Mistleh, Director of Real Estate Phone: 571-357-7921
Armed Forces Benefit Assoc.

Address: 909 N. Washington Drive, Suite 400 Email: jmistleh@afba.com
Alexandria, VA 22314

Signature: [Signature] Date: 11/30/16

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.

S + S CENTRE INC. SOUTH SHORTWAY 1002
901 N. WASHINGTON ST #101
ALEXANDRIA, VA 22314

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

2. Please give a brief statement describing the use:

SMALL GYM - GROUP CLASS'S BIKES
KETTLE BELL, EXERCISE EQUIPMENT (ALL CUSTOMER)
2720 SQ FEET (BOOK CLASS'S VIA APP)

3. Please describe the proposed hours of operation:

Days	Hours
Daily	

Or give hours for each day of the week

Monday	5:15 - 1:00 - 4:30 - 7:30
Tuesday	" " " "
Wednesday	" " " "
Thursday	" " " "
Friday	5:15 - 1:00 4:30 - 6:30
Saturday	8:00 AM - 10:30 AM
Sunday	CLOSE

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).

10-12 PER CLASS

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

2 EMPLOYEES

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

7 Standard and compact spaces
1 Handicapped accessible spaces
 Other

- B. Please give the number of:
Parking spaces on-site 7
Parking spaces off-site 7

If the required parking will be located off-site, where will it be located?

801 N. ST ASAPH St (GENERATION SUITES OLD TOWN)

6. Please provide information regarding loading and unloading for the use:

- A. How many loading spaces are available for the use? N/A
- B. Where are off-street loading spaces located? N/A
- C. During what hours of the day do you expect loading/unloading operations to occur? NONE
- D. How frequently are loading/unloading operations expected to occur, per day or per week, as appropriate? NONE

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:

NONE

APPLICANT'S SIGNATURE

Please read and initial each statement:

Initial: SB 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: SB 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.

Scott L. Shortnacy
Print Name of Applicant or Representative

[Signature]
Signature

11-24-16
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: _____

Google Maps 901 N Washington St



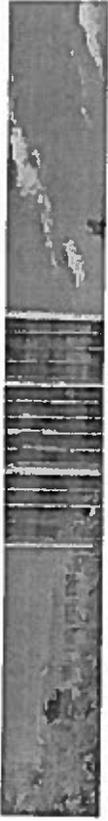
Imagery ©2016 Google, Map data ©2016 Google 50 ft



11/22/2016

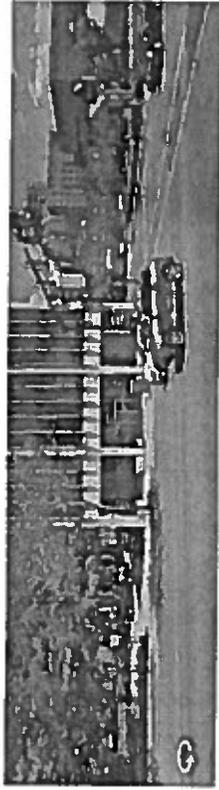
901 N Washington St - Google Maps

250 200 150 100 50



901 N Washington St

Alexandria, VA 22314



Parking Contract

Elena Baranova <ebaranova@sheratonalexandria.com>

Mon 11/28/2016 10:25 AM

To: Scott <scott@solarplanet.us>;

To Whom it may concern,

Solar Planet/ S Centre Inc has entered into a contracted agreement with the Sheraton Suites Old Town Alexandria to lease 3 parking spaces beginning December 1st, 2016. The hotel has agreed to accommodate additional spaces if necessary and upon availability.

ELENA BARANOVA

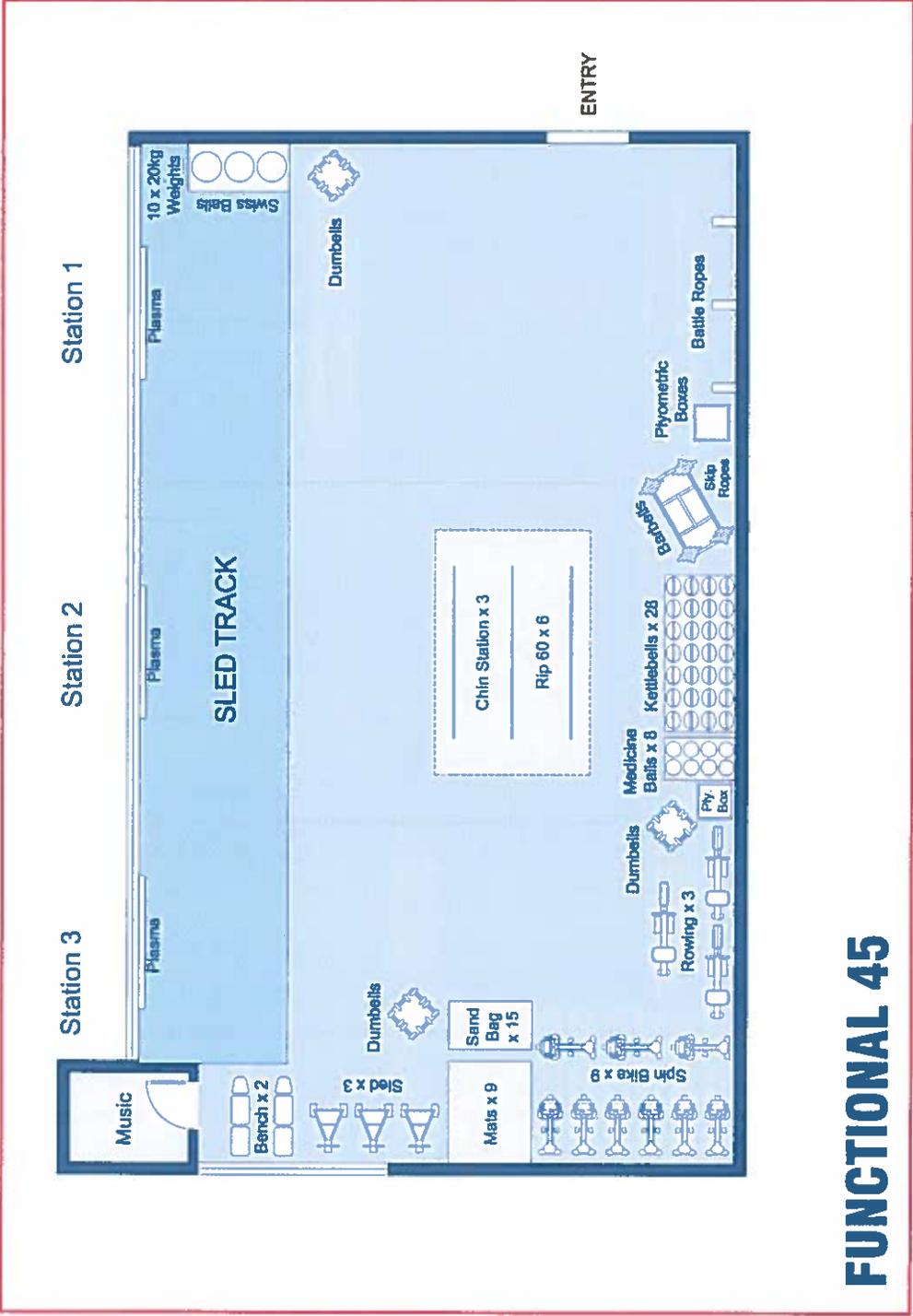
Accounting Manager

T 703 518 8783 F 703 548 4514

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SHERATON SUITES OLD TOWN ALEXANDRIA

801 N. St. Asaph Street, Alexandria, VA, 22314



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