



Administrative Special Use Permit Application

Please type or print legibly

PROPERTY LOCATION: 5107 Sutton Place, Alexandria, VA. 22304

ZONE: _____ **TAX MAP REFERENCE:** _____

APPLICANT'S INFORMATION:

Applicant: Vanessa Gutierrez Business/Trade Name: _____

Address: 5107 Sutton Place, Alexandria, Va 22304

Phone: (703) 823 3638

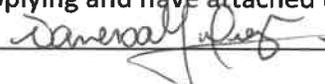
Email: Vanessarossmery@hotmail.com

PROPOSED USE:

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

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).

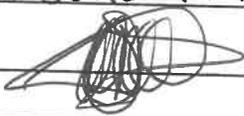
PROPERTY OWNER'S AUTHORIZATION

As the property owner, I hereby grant the applicant use of 5107 SUTTON PLACE ALEXANDRIA VA 22304 (property address), for the purposes of operating a CHILD CARE HOME (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: JOSE DOMINGUEZ Phone: 786 459 9960
VA 22304

Address: 5107 SUTTON PLACE ALEXANDRIA Email: JOSECAONE@YAHOO.COM

Signature:  Date: 4/15/19

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.

Vanessa Gutierrez 100%

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:

The applicant is requesting a SUP for home child care to care for up to 9 children. The applicant holds a family state license and is approved to care for up to 5 children. The hours of operation proposed are 24 hours per 7 days a week. Because in occasion, I offer overnight and weekend care services for parents who work during that time such as doctors, nurses, etc. The parking will be located on property's driveway and street parking.

3. Please describe the proposed hours of operation:

Days 7	Hours 24
Daily	

Or give hours for each day of the week

Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

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).

- Requesting capacity for nine children
- Hours of operation will be 7 days 24 hours. Sunday to Saturday

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

- Three employees will be working on site with the children (provider & assistant teacher)

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

- 1 Standard and compact spaces
- 0 Handicapped accessible spaces
- Other (street parking available in the neighborhood)

- B. Please give the number of:
Parking spaces on-site 1
Parking spaces off-site 3+

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

there are 3 parking spots available in front of the house and there are more parking spaces in the street (Sutton Place).

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

- A. How many loading spaces are available for the use? 4. (1 parking space in my driveway and 3 more parking spaces in front of my house)
B. Where are off-street loading spaces located? _____

In the same street of my house. Sutton Place, Alexandria 22304

- C. During what hours of the day do you expect loading/unloading operations to occur? 1st shift : DROP OFF : 7:30am - 8:30am PICK UP: 4:00pm - 5:00pm
2nd shift : DROP OFF : 6:30pm - 7:00pm PICK UP: 6:00am - 6:30am

- D. How frequently are loading/unloading operations expected to occur, per day or per week, as appropriate? Between 7:30am - 8:30am & 4:00pm - 5:00pm
I agree with parents that loading/unloading take no more than 15 minutes
There is going to be loading/unloading 2 children at the same time

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: VB 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: VB 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.

Vanessa Gutierrez
Print Name of Applicant or Representative

Vanessa Gutierrez
Signature

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: _____



APPLICATION - SUPPLEMENTAL

CHILD CARE

This Supplemental information is to be filed by applicants requesting special use permit approval of a child care home or child care center. All applicants must submit a plot plan of the property, showing play areas and parking, and an interior floor plan. If a play area that is not owned or leased by the operator is to be used by the children, written permission from the owner must be obtained and a copy submitted with this application.

CHILD CARE HOMES

Applicants requesting special use permit approval of a child care home for six to nine children within a home shall complete this section.

1. Is the proposed facility the principal residence of the operator? Yes No
2. Is the operator registered with the City of Alexandria Office of Early Childhood Development to provide child care in the home? Yes No
3. How many children, including resident children, will be cared for? nine
4. How many children reside in the home? 2
5. How old are the children? (List the ages of all children to be cared for)
 Resident: 12 x 8 (2 sons)
 Non-resident: infants, toddler, pre-school, school-age (3month -12years)
6. A minimum of 75 square feet of outdoor play area on the lot must be provided for each child above age two.
 Play area required:
 Number of children above age two: 4 x 75 square feet = 300 square feet
 Play area provided: 3100 square feet
7. If the lot does not have room for on-site play area, is the child care home within 500 feet of a park or playground available for the children to play in? Yes No

If yes, please describe the park's play area:

A Holmes Run Park is located walking distance from the residence. The park has a variety of play equipment that are suitable for many different age levels.

I have a backyard with appropriate outdoor play equipment such as slides, cars, water table, tunnel, etc.

CHILD CARE HOMES and CHILD CARE CENTERS

Applicants for both child care homes and child care centers (day care center, day nursery and nursery schools) shall complete this section.

1. How many employees will staff the child care facility, including the operator?

1st shift 3 & 2nd shift: 2

How many staff members will be on the job at any one time? 2

2. Where will staff and visiting parents park? In my driveway and Sutton Place street parking available. (3 parallel parking in the front of the house and more spaces available in Sutton Place.

3. Please describe how and where parents will drop off and pick up children. A site plan detailing where the pickup & drop off area will be & how many cars will fit in the area at any moment is also required.

Parents will come at the agreed time between 7:30am to 8:30am and parking in my driveway or in front the house. The drop off time will be at 4:00 pm to 5:00 pm. and parents will use the same parking spaces. Parents who come at 2nd shift, they will use the same parking spaces, my driveway, in front of my house, or spaces available in Sutton Place

4. At what time will children usually be dropped-off and picked-up?

	Drop-off	Pick-up
1st shift	<u>7:30 am 8:30 am</u>	<u>4:00 pm - 5:00 pm.</u>
2nd shift	<u>6:00 pm - 6:30 pm</u>	<u>6:00 am - 6:30 am.</u>

5. What type of outdoor play equipment is proposed for the child care facility, if any? Where will it be located on the property?

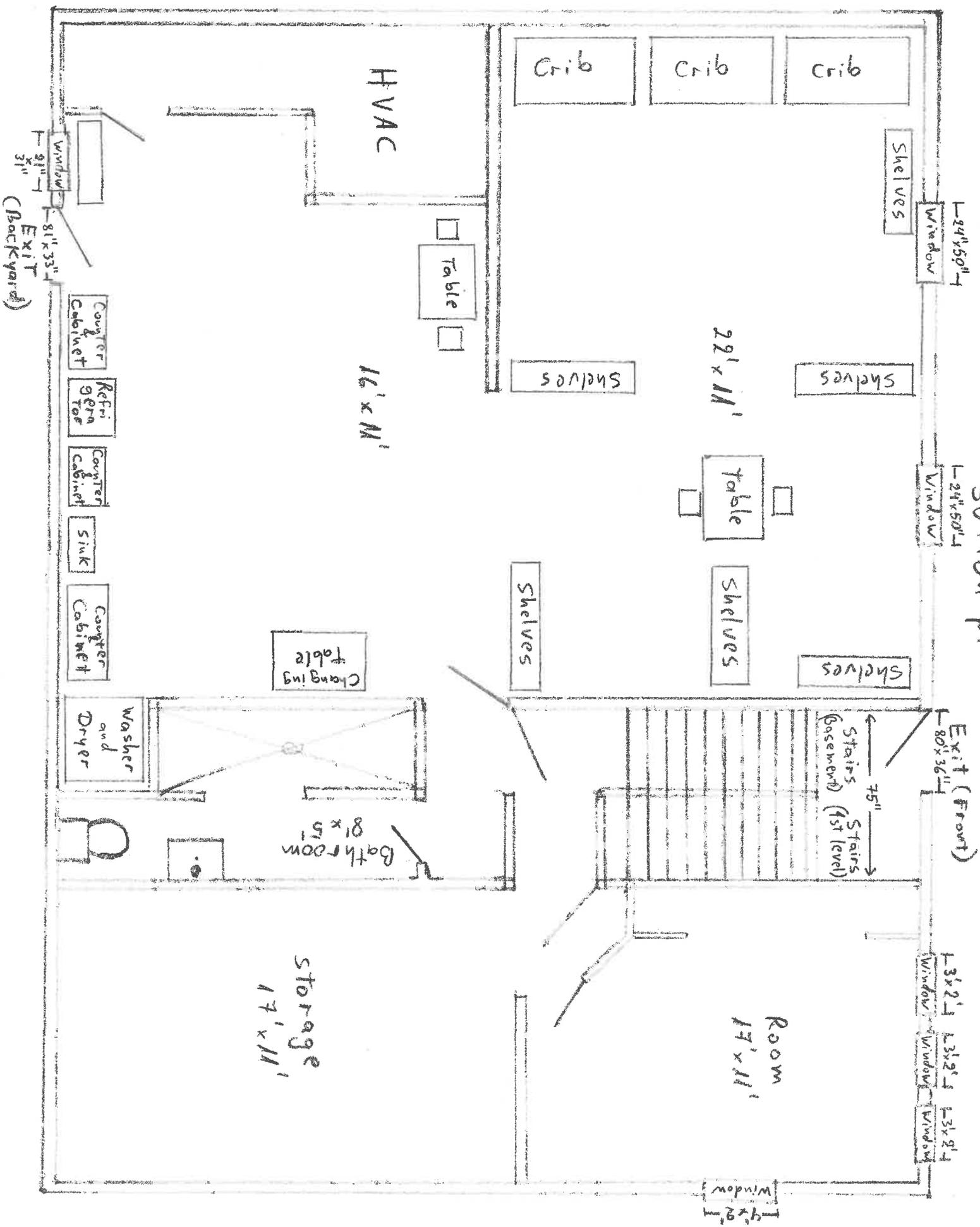
Small slides, swing, playhouse, table, pushing cars.

6. Are play areas on the property fenced? Yes No
 If no, do you plan to fence any portion of the property? Yes No

Please describe the existing or proposed fence.

My backyard is completely fenced. There are two door for access, one entrance is from the living room and the other entrance will be from Sutton Place. For daycare purposes parents and children will use Sutton Place door.

SUTTON P1



24' x 50"

24' x 50"

Exit (Front)
80' x 36"

3' x 2'

3' x 2'

3' x 2'

Shelves

Shelves

Shelves

Stairs
(Basement)
(1st level)
75"

Shelves

Room
17' x 11'

Window
4' x 2'

Crib

Crib

29' x 11'

Table

Shelves

Shelves

HVAC

16' x 11'

Table

Changing
Table

Bathroom
8' x 5'

Storage
17' x 11'

Counter
Cabinet

Refri
gerator
Top

Counter
Cabinet

Sink

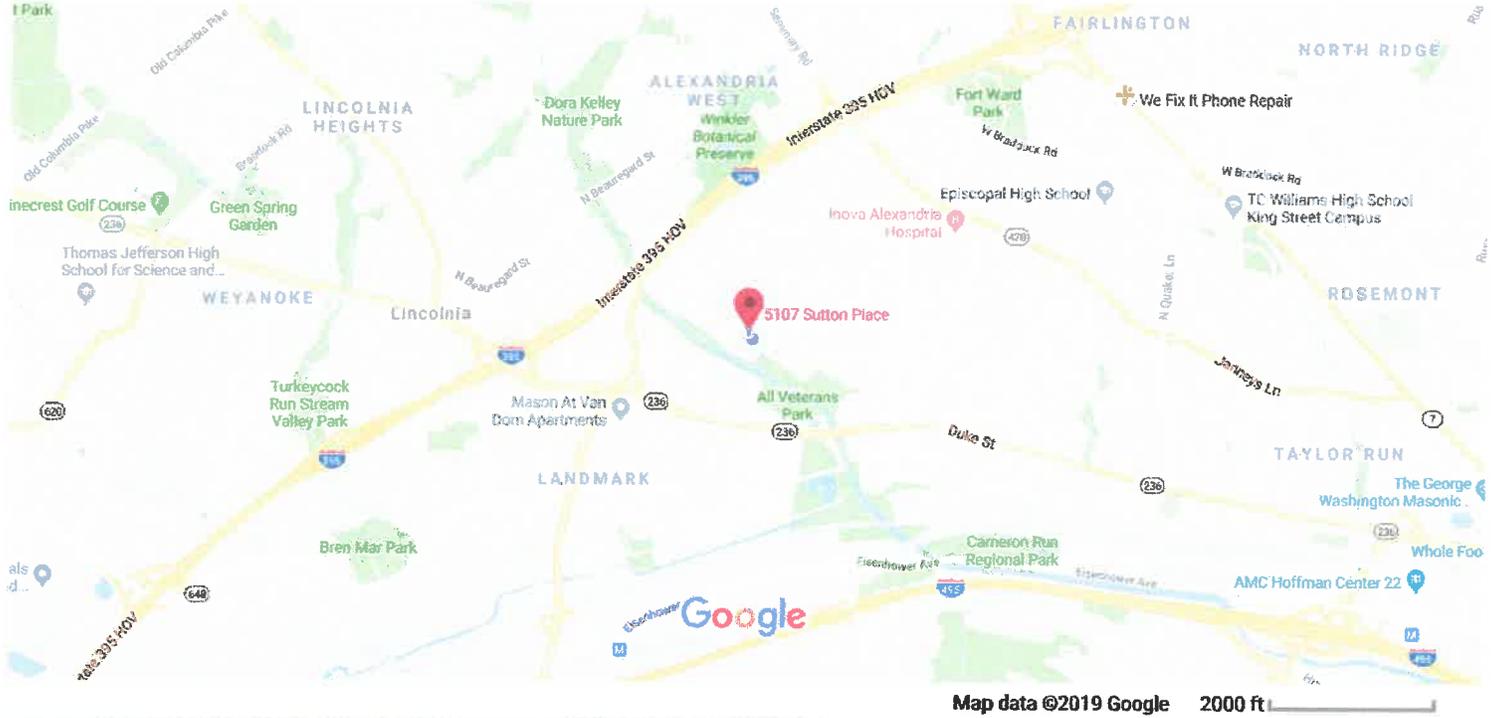
Counter
Cabinet

Washer
and
Dryer

Window
91" x 31"

EXIT
(Backyard)

Google Maps 5107 Sutton PI



5107 Sutton PI

Alexandria, VA 22304



Directions



Save



Nearby



Send to your phone



Share

Photos