# OUTDOOR DINING
Zoning Ordinance Section 11-513(M)

**Qualify for Administrative Review?**

Is the proposed outdoor dining accessory to an approved indoor restaurant? ☑ Yes  ☐ No

Will the hours for outdoor dining be the same as those approved for the indoor restaurant? ☑ Yes  ☐ No

Will the outdoor dining have 20 seats or fewer? ☑ Yes  ☐ No

Will live entertainment be **prohibited** from the outdoor seating area? ☑ Yes  ☐ No

Will advertising be **excluded** from the outdoor seating area? ☑ Yes  ☐ No

Will an employee be assigned to the outdoor dining area to make sure it is cleared and washed at the close of each business day? ☑ Yes  ☐ No

If yes to all questions, the business qualifies for administrative review. If no to any question, speak to P&Z staff about the full SUP process. A layout plan must be reviewed and approved for the outdoor dining.  
Note: This process does not apply to businesses within the King Street Retail Overlay. Please speak to P&Z staff about a different administrative process for outdoor dining.

**WORKSHEET** – Answer each question. Attach a separate sheet of paper if necessary.

## PART OF APPROVED INDOOR RESTAURANT

☑ Outdoor dining must be connected to an approved indoor restaurant.

What restaurant is the outdoor dining connected to?

The patio space is located adjacent to our warehouse space.

## HOURS

☑ The hours of operation for the outdoor dining must be the same as permitted for the indoor restaurant, unless there is a neighborhood standard for a different time. In the NR (Arlandria), Mount Vernon Avenue Overlay and West Old Town neighborhood areas, outdoor dining shall be closed and cleared of all customers by 10pm Sunday through Thursday and by 11pm Friday and Saturday.

What are the proposed hours for the outdoor dining?

- 10am - 11pm
- 11am-10pm
- 10am-11pm
- 10am-11pm

## LOCATION ON PRIVATE PROPERTY

☑ Outdoor dining, including seats, planters, wait stations and barriers, must be located on private property unless authorized by an encroachment ordinance.

Will the outdoor dining be located only on private property?

What steps will you take to ensure that components, such as planters and barriers, do not encroach onto the public sidewalk?

Yes. Patio will be located in a consolidated corner which abuts our loading area and is no located near a public sidewalk.
<table>
<thead>
<tr>
<th>NUMBER OF SEATS</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Only 20 seats may be located at outdoor tables in front of the restaurant.</td>
</tr>
</tbody>
</table>

How many seats will be included in the outdoor seating?

20

<table>
<thead>
<tr>
<th>ALCOHOL SERVICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Alcohol service, to the extent allowed for indoor dining, is permitted; no off-premise alcohol sales are permitted.</td>
</tr>
</tbody>
</table>

Is on-premise alcohol service proposed?

no.

<table>
<thead>
<tr>
<th>OUTDOOR DINING PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Please submit a detailed plan with your application</td>
</tr>
</tbody>
</table>

A plan for layout of the outdoor dining must be submitted for review and approval by the director. The business must maintain compliance with the approved layout. Any changes to the approved layout may require further review by staff.

Complete the Administrative Special Use Permit Application on the following pages.
Administrative Special Use Permit Application

317 Hooffs Run Dr. Alexandria VA 22314

CDD #11

ZONE: _______ TAX MAP REFERENCE: 079.01

APPLICANT’S INFORMATION:

TRISTAN WRIGHT

Applicant: ______________________________ Business/Trade Name: Virginia Ciderworks Company LLC

Address: 1103 COMMONWEALTH AVE ALEXANDRIA VA 22301

Phone: 703-868-4865

Email: TRISTAN@LOSTBOYCIDER.COM

PROPOSED USE:

- [ ] Day Care Center
- [ ] Light Auto Repair
- [ ] Overnight Pet Boarding
- [ ] Outdoor Garden Center
- [ ] Catering Business
- [ ] Valet Parking
- [X] Restaurant
- [ ] Outdoor Dining (exclude King Street Retail)
- [ ] Live Theater
- [ ] Outdoor Food and Crafts Market Center
- [ ] Outdoor Display
- [ ] Massage Establishment

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: Tristan Wright

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.
PROPERTY OWNER'S AUTHORIZATION

As the property owner, I hereby grant the applicant use of 317 HOFFS RUN DR ALEXANDRIA VA CIDERY (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: Steve Schwendinger
1850 M Street, NW
Suite 620
Washington, DC 20036
Address:

Signature: [Signature]

Phone: 301-996-2843
Email: STEVE.SCHWENDINGER@PERSEUSTDC.COM
Date: 8/5/19

1. The applicant is the (check one):
   [ ] Owner
   [ ] Contract Purchaser
   [X] 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.

CARYLCE CORNER LLC - C/O PERSEUS REALTY LLC 1850 M STREET
WASHINGTON DC 20036 - 10% owner

Carlyle Corner Holdings LLC c/o ELV Associates Inc. - 21 Custom House St. Ste. 700 Boston MA 02100 - 90% Owner

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.

2
USE CHARACTERISTICS

2. Please give a brief statement describing the use:

We are proposing a patio use located adjacent to our warehouse space to be used for outdoor space for customers. The cidery will continue to operate normally inside our warehouse space.

3. Please describe the proposed hours of operation:

<table>
<thead>
<tr>
<th>Days</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily</td>
<td></td>
</tr>
</tbody>
</table>

Or give hours for each day of the week

<table>
<thead>
<tr>
<th>Day</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>4-9pm</td>
</tr>
<tr>
<td>Tuesday</td>
<td>4-9pm</td>
</tr>
<tr>
<td>Wednesday</td>
<td>4-9pm</td>
</tr>
<tr>
<td>Thursday</td>
<td>4-9pm</td>
</tr>
<tr>
<td>Friday</td>
<td>4-10pm</td>
</tr>
<tr>
<td>Saturday</td>
<td>12pm-10pm</td>
</tr>
<tr>
<td>Sunday</td>
<td>12pm-10pm</td>
</tr>
</tbody>
</table>

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).

The patio will be fairly straightforward with garden-style tables and standing room wine barrels. The area will be roped off and tented for bad weather purposes.

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

N/A

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

<table>
<thead>
<tr>
<th>Type</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Standard and compact spaces</td>
<td>27</td>
</tr>
<tr>
<td>Handicapped accessible spaces</td>
<td>Approx 100</td>
</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>
B. Please give the number of:

Parking spaces on-site 27

Parking spaces off-site 100

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

We have parking within our parking lot as well as street parking and a separate large parking lot behind our building with approximately 150 spaces.

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

A. How many loading spaces are available for the use?

We currently operate out of two loading docs.

B. Where are off-street loading spaces located?

Adjacent to our warehouse bay.

C. During what hours of the day do you expect loading/unloading operations to occur?

7am-6pm

D. How frequently are loading/unloading operations expected to occur per day or per week?

1-2x/week

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:

N/A
APPLICANT’S SIGNATURE

Please read and initial each statement:

Initial: TW 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: TW 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.

TRISTAN WRIGHT

Print Name of Applicant or Representative

Tristan Wright 8/5/19

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: 703-888-4865

Email: tristan@lostboycider.com

Fax: ____________________________
Patio is 19 FT x 31 FT

No loss of parking spot. The area is currently unmarked + unused space.