

VALET PARKING

Zoning Ordinance Section 11-513(N)

Qualify for Administrative Review?

Will the proposed valet parking be located in the King Street Overlay zone? Yes No

If yes, the business qualifies for administrative review. If no, speak to P&Z staff about the full SUP process.

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

VALET PARKING PLAN

Please provide a copy of the plan with your application.

A detailed plan must be submitted showing and explaining all components of the valet parking, including at least the following:

- (a) The location of the drop off area as well as the location for the parked vehicles to be stored;
- (b) The proposed days and hours of operation of the valet parking plan;
- (c) The number of spaces available at the vehicle storage site, which must be of sufficient capacity for the use or uses from which vehicles will be valeted;
- (d) Adequate assurance that the owner and operator of the vehicle storage site is agreeable to the proposed valet plan;
- (e) The size and design of the drop off site and identification of any on street parking spaces that will be lost during the period that the valet parking plan is in effect, such spaces to be kept to a minimum;
- (f) Demonstration that the location of the drop off site will not interfere with traffic, remaining parking, bus stops, or transit passengers or pedestrians;
- (g) The proposed graphics for the drop off site, including signage and uniformed staff, with sufficient visibility but designed to be compatible with the streetscape as determined by the director;
- (h) The proposed number of attendants, which must be sufficient to adequately staff the operation; and
- (i) If the proposed valet plan includes more than one business, the identity of the party or entity responsible for compliance with the approved valet parking plan.

LOCATION OF STORED VEHICLES

Vehicles may not be parked or temporarily stored by an attendant on streets or sidewalks.

Where will the parked vehicles be stored?

SHARED PARKING PROGRAM

No structures are permitted in conjunction with a valet parking program, unless associated with a shared parking program among several businesses, and only after the design is reviewed for comment by the Old and Historic Alexandria District Board of Architectural Review. Please review Section 11-513 (N) of the Zoning Ordinance for more detail.

Are any structures proposed as part of the valet parking program?

If so, please include a detailed description and plan for the structure with your application. Attach a separate sheet, if necessary.

Is the program part of a shared parking program with other businesses?

If so, please describe the program and identify the other businesses to be included. Attach a separate sheet.

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



SUP #

Administrative Special Use Permit Application

PROPERTY LOCATION: _____

ZONE: _____ TAX MAP REFERENCE: _____

APPLICANT'S INFORMATION:

Applicant: _____ Business/Trade Name: _____

Address: _____

Phone: _____

Email: _____

PROPOSED USE:

- | | |
|---|--|
| <input type="checkbox"/> Day Care Center | <input type="checkbox"/> Restaurant |
| <input type="checkbox"/> Light Auto Repair | <input type="checkbox"/> Outdoor Dining (exclude King Street Retail) |
| <input type="checkbox"/> Overnight Pet Boarding | <input type="checkbox"/> Live Theater |
| <input type="checkbox"/> Outdoor Garden Center | <input type="checkbox"/> Outdoor Food and Crafts Market Center |
| <input type="checkbox"/> Catering Business | <input type="checkbox"/> Outdoor Display |
| <input type="checkbox"/> Valet Parking | <input type="checkbox"/> 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: _____

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 interior 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.

SUP #

PROPERTY OWNER'S AUTHORIZATION

As the property owner, I hereby grant the applicant use of _____
(property address), for the purposes of operating a _____(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: _____ Phone: _____

Address: _____ Email: _____

Signature: _____ Date: _____

- 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.

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:

3. Please describe the proposed hours of operation:

Days	Hours
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).

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

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

_____ Standard and compact spaces
 _____ Handicapped accessible spaces
 _____ Other

B. Please give the number of:

Parking spaces on-site _____

Parking spaces off-site _____

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

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

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

B. Where are off-street loading spaces located?

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

D. How frequently are loading/unloading operations expected to occur per day or per 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, will be handled, stored, or generated on the property, provide the name, monthly quantity, and specific disposal method below:

SUP #

APPLICANT’S SIGNATURE

Please read and initial each statement:

Initial: _____ 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: _____ 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.

Print Name of Applicant or Representative

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: _____