



APPLICATION

SPECIAL USE PERMIT

SPECIAL USE PERMIT # _____

PROPERTY LOCATION: 421 Clifford Avenue, Alexandria, VA 22305

TAX MAP REFERENCE: 025.01.02.19 **ZONE:** CSL

APPLICANT:

Name: Antonio Claire

Address: 421 Clifford Avenue, Alexandria, VA 22305

PROPOSED USE: Automobile repair, light

THE UNDERSIGNED, hereby applies for a Special Use Permit in accordance with the provisions of Article XI, Section 4-11-500 of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.

THE UNDERSIGNED, having obtained permission from the property owner, hereby grants permission to the City of Alexandria staff and Commission Members to visit, inspect, and photograph the building premises, land etc., connected with the application.

THE UNDERSIGNED, having obtained permission from the property owner, hereby grants permission to the City of Alexandria to post placard notice on the property for which this application is requested, pursuant to Article IV, Section 4-1404(D)(7) of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.

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.

Antonio Claire

Print Name of Applicant or Agent

14 N. Fenwick Street

Mailing/Street Address

Arlington, VA 22201

City and State Zip Code



Signature

7/21/17

Date

703-850-2085

Telephone #

Fax #

d_claire@yahoo.com

Email address

ACTION-PLANNING COMMISSION: _____ **DATE:** _____

ACTION-CITY COUNCIL: _____ **DATE:** _____

SUP # _____

PROPERTY OWNER'S AUTHORIZATION

As the property owner of 421 Clifford Ave Alex. VA 22305, I hereby
(Property Address)

grant the applicant authorization to apply for the _____ use as
(use)
described in this application.

Name: Azfar Aziz

Phone: 703-549-0949

Please Print
Address: 9200 Mavojell Forest Dr.
Lovton VA 22076

Email: AZPrinting@Comcast.net

Signature: [Signature]

Date: 07/21/17

1. Floor Plan and Plot Plan. As a part of this application, the applicant is required to submit a floor plan and plot or site plan with the parking layout of the proposed use. The SUP application checklist lists the requirements of the floor and site plans. The Planning Director may waive requirements for plan submission upon receipt of a written request which adequately justifies a waiver.

Required floor plan and plot/site plan attached.

Requesting a waiver. See attached written request.

2. 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 of more than three percent.

OWNERSHIP AND DISCLOSURE STATEMENT

Use additional sheets if necessary

1. Applicant. State the name, address and percent of ownership of any person or entity owning an interest in the applicant, unless the entity is a corporation or partnership, in which case identify each owner of more than three percent. The term ownership interest shall include any legal or equitable interest held at the time of the application in the real property which is the subject of the application.

Name	Address	Percent of Ownership
1. Antonio Claure	14 N. FINWICK ST Arlington VA 22201	100%
2.		
3.		

2. Property. State the name, address and percent of ownership of any person or entity owning an interest in the property located at _____ (address), unless the entity is a corporation or partnership, in which case identify each owner of more than three percent. The term ownership interest shall include any legal or equitable interest held at the time of the application in the real property which is the subject of the application.

Name	Address	Percent of Ownership
1. AZfar Aziz	9200 NAVAJELL FOREST DR. Lorton VA 22076	100%
2.		
3.		

3. Business or Financial Relationships. Each person or entity indicated above in sections 1 and 2, with an ownership interest in the applicant or in the subject property are require to disclose any business or financial relationship, as defined by Section 11-350 of the Zoning Ordinance, existing at the time of this application, or within the 12-month period prior to the submission of this application with any member of the Alexandria City Council, Planning Commission, Board of Zoning Appeals or either Boards of Architectural Review. All fields must be filled out completely. Do not leave blank. (If there are no relationships please indicated each person or entity and "None" in the corresponding fields).

For a list of current council, commission and board members, as well as the definition of business and financial relationship, [click here](#).

Name of person or entity	Relationship as defined by Section 11-350 of the Zoning Ordinance	Member of the Approving Body (i.e. City Council, Planning Commission, etc.)
1. N/A		
2.		
3.		

NOTE: Business or financial relationships of the type described in Sec. 11-350 that arise after the filing of this application and before each public hearing must be disclosed prior to the public hearings.

As the applicant or the applicant's authorized agent, I hereby attest to the best of my ability that the information provided above is true and correct.

07/21/17
Date
Azfar Aziz
Printed Name
[Signature]
Signature

USE CHARACTERISTICS

4. The proposed special use permit request is for (check one):

- a new use requiring a special use permit,
- an expansion or change to an existing use without a special use permit,
- an expansion or change to an existing use with a special use permit,
- other. Please describe: _____

5. 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).

It is anticipated that there will be 4-5 customers at any given time during operating business hours.

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

There will be two employees on site during operating business hours.

6. Please describe the proposed hours and days of operation of the proposed use:

Day:
Monday - Friday

Hours:
8:00 am - 7:00 pm

Saturday

8:00 am - 3:00 pm

Sunday

Closed

7. Please describe any potential noise emanating from the proposed use.

A. Describe the noise levels anticipated from all mechanical equipment and patrons.

No significant patron or mechanical equipment noise is anticipated outside of that commonly associated with a light automobile repair shop. Noise levels will be in compliance with Alexandria City code.

B. How will the noise be controlled?

Noise will be controlled by occurring inside the building premises. The single greatest source of noise, the compressor, will only run on and off as necessary during business hours.

8. Describe any potential odors emanating from the proposed use and plans to control them:

It is not anticipated that offensive odors will emanate from the use of the property as a light automobile repair facility. (Oil for example will be collected by a specialized used oil recycling company, currently using Safety Kleen, and collected every week.)

9. Please provide information regarding trash and litter generated by the use.

A. What type of trash and garbage will be generated by the use? (i.e. office paper, food wrappers)

Trash and garbage will be deposited in standard private leased trash containers, by Enviro Solutions NOVA District. Light automobile repair involves much products/parts received. Recycling of those boxes will be disposed of by a registered recycling company. Used vehicle parts, tires, or other materials will be disposed of and recycled as per City of Alexandria regulations.

B. How much trash and garbage will be generated by the use? (i.e. # of bags or pounds per day or per week)

~~It is anticipated the facility will generate approximately 1-2 bags of trash per day.~~

C. How often will trash be collected?

Trash will be collected by Enviro Solutions NOVA District once every other week, or as needed by volume and demand.

D. How will you prevent littering on the property, streets and nearby properties?

All trash will be carried from the business site to the trash/recycling receptacles by hand on a daily basis.

10. Will any hazardous materials, as defined by the state or federal government, be handled, stored, or generated on the property?

Yes. No.

If yes, provide the name, monthly quantity, and specific disposal method below:

Small quantities of materials defined as hazardous generally recognized to be appropriate for use by automobile repair facilities in the operation of the business, will be stored, used as solvents, and disposed of in accordance with applicable regulations.

11. Will any organic compounds, for example paint, ink, lacquer thinner, or cleaning or degreasing solvent, be handled, stored, or generated on the property?

Yes. No.

If yes, provide the name, monthly quantity, and specific disposal method below:

Small quantities of organic compounds, generally recognized to be appropriate for use by automobile repair facilities in the operation of the business, will be stored, used, collected, and disposed of in accordance with applicable regulations.

12. What methods are proposed to ensure the safety of nearby residents, employees and patrons?

Cars will be parked in marked spaces on the property. Trash will be stored in appropriate receptacles. No other materials or equipment will be stored on site. There will be security cameras monitoring all activity on premises, including during non-business hours.

ALCOHOL SALES

13.

A. Will the proposed use include the sale of beer, wine, or mixed drinks?

Yes No

If yes, describe existing (if applicable) and proposed alcohol sales below, including if the ABC license will include on-premises and/or off-premises sales.

PARKING AND ACCESS REQUIREMENTS

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

- 7 Standard spaces
- _____ Compact spaces
- _____ Handicapped accessible spaces.
- 2, indoors Other.

<p>Planning and Zoning Staff Only</p> <p>Required number of spaces for use per Zoning Ordinance Section 8-200A _____</p> <p>Does the application meet the requirement?</p> <p style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
--

B. Where is required parking located? (check one)

on-site

off-site

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

PLEASE NOTE: Pursuant to Section 8-200 (C) of the Zoning Ordinance, commercial and industrial uses may provide off-site parking within 500 feet of the proposed use, provided that the off-site parking is located on land zoned for commercial or industrial uses. All other uses must provide parking on-site, except that off-street parking may be provided within 300 feet of the use with a special use permit.

C. If a reduction in the required parking is requested, pursuant to Section 8-100 (A) (4) or (5) of the Zoning Ordinance, complete the PARKING REDUCTION SUPPLEMENTAL APPLICATION.

Parking reduction requested; see attached supplemental form

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

A. How many loading spaces are available for the use? None.

<p>Planning and Zoning Staff Only</p> <p>Required number of loading spaces for use per Zoning Ordinance Section 8-200 _____</p> <p>Does the application meet the requirement?</p> <p style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

SUP # _____

B. Where are off-street loading facilities located? N/A

C. During what hours of the day do you expect loading/unloading operations to occur?
During normal operating business hours. Only vehicles and parts will be delivered.

D. How frequently are loading/unloading operations expected to occur, per day or per week, as appropriate?
Delivery of parts and supplies as needed, during normal operating business hours. (On average, delivery will be 1-2 vehicles or parts per day.)

16. Is street access to the subject property adequate or are any street improvements, such as a new turning lane, necessary to minimize impacts on traffic flow?

No improvements required.

SITE CHARACTERISTICS

17. Will the proposed uses be located in an existing building? Yes No
Do you propose to construct an addition to the building? Yes No
How large will the addition be? _____ square feet.

18. What will the total area occupied by the proposed use be?
1200 sq. ft. (existing) + 0 sq. ft. (addition if any) = 1200 sq. ft. (total)

19. The proposed use is located in: (check one)
 a stand alone building
 a house located in a residential zone
 a warehouse
 a shopping center. Please provide name of the center: _____
 an office building. Please provide name of the building: _____
 other. Please describe: _____

End of Application



APPLICATION - SUPPLEMENTAL

AUTOMOBILE-ORIENTED USES

Supplemental information to be completed by applicants requesting special use permit approval of an automobile-oriented use (e.g., automobile repair garage, car wash, auto or trailer sales).

1. What type of automobile oriented use do you propose?

- automobile or motor vehicle parking or storage lot.
- automobile or trailer rental or sales.
- automobile service station.
- automobile repair, including car wash.
- other: _____

2. What types of repairs do you propose to perform?

The facility will continue to provide services for repairs of brakes, exhaust, fuel systems, electrical, changing of headlight bulbs, oil filters, hood release cables, fog lights, sensors, replacing thermostat/alternators, starters, belts, CV joints, valve cover gaskets, brake pad sets, disc brakes, and shocks related to automobiles and light trucks.

3. How many of each of the following will be provided?

- 2 hydraulic lifts or racks
- 0 service pits
- 1 service bays

4. How many vehicles will be parked on-site at any one time. Please provide information on the type (i.e., for sale, customers, employees, or repairs)?

Two employees, five customers on site, and two automobiles inside.

5. Will a loudspeaker or intercom system be used outside of the building? _____ Yes No

Please note: All repair work must occur within an enclosed building.

HUME AVENUE

37.6'

10.5'

●
HYDRAULIC
LIFT
●

27.5'

● ●
HYDRAULIC
LIFT

OFFICE

BATHROOM

ENTRY BAY

17'

23'

14.6'

ROUTE 1

MONTROSE AVENUE

7 PARKING
SPACES

↑ LOT ENTRANCE

421 CLIFFORD AVENUE
ALEXANDRIA, VA 22305

Clifford Ave

Jefferson Davis Hwy

421 Clifford Ave

Hume Ave

