APPLICATION
SPECIAL USE PERMIT

SPECIAL USE PERMIT # 2012-0048

PROPERTY LOCATION: 5100 TALBot PL. Alexandria Va. 22304

TAX MAP REFERENCE: 038.04-07-30 **ZONE:** R8

APPLICANT:

Name: Ana Lucia Benavides

Address: 5100 TalBot Pl. Alexandria, Va 22304

PROPOSED USE: Home Daycare

[✓] **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.

Ana Lucia Benavides Print Name of Applicant or Agent	x [signature] Signature	06-22-12 Date
5100 TalBot PL Mailing/Street Address	703-340-7925 Telephone #	Fax #
Alexandria Va 22304 City and State Zip Code	giomarcelo1@hotmail.com Email address	

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

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

SUP # 2012-0048

PROPERTY OWNER'S AUTHORIZATION

As the property owner of 5100 TALBOT PL., I hereby
(Property Address)
grant the applicant authorization to apply for the Child Care Home use as
(use)
described in this application.

Cesar Name: Giovanni SABA/ANA BENAVIDES Phone _____
Please Print

Address: _____ Email: _____

Signature: [signature] **Date:** 07-03-12

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 ten 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 ten 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. Ana Lucia Benavides	5100 Talbot Pl	100%
2. Cesar G. Saba	5100 Talbot Pl	100%
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 ten 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. Same as Above		
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 the12-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 below and "None" in the corresponding fields)**

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. ANA Lucia Benavides	None	City Council and Planning Commission
2. Cesar Giovanni SABA	/	
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.

07-03-12 Giovanni SABA

Date Printed Name Signature

SUP # 2012-0048

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.

NARRATIVE DESCRIPTION

3. The applicant shall describe below the nature of the request **in detail** so that the Planning Commission and City Council can understand the nature of the operation and the use. The description should fully discuss the nature of the activity. (Attach additional sheets if necessary.)

My name is Ana Lucia Benavides, I have been working with children for 11 years. I have been a licenced childcare provider in Arlington County for 3 years. I have been a state of Virginia licenced home day care provider for 9 children. I Currently have my MAster in "Education Managment". I was in a Rental Property in Arlington working as a home daycare provider and Now I have the opportunity to purchase my home in Alexandria and I wish to continue providing care to children in Alexandria, and with your support I hope that I will be allowed to continue providing Care to children and helping Parents go to work knowing that there children are in a safe enviroment.

Thank you for your kind support,

Ana Benavides.

SUP # 2012-0048

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).

9 children

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

2 employees

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

Day:	Hours:
Monday throug friday	7:00 AM to 6:00 PM

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

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

No mechanical Noise

B. How will the noise be controlled?

Noise level will be controlled by our staff

SUP # 2012-0048

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

No Odors

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)

Regular (House hold trash)

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

Regular House hold trash

C. How often will trash be collected?

once a week

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

Staff and I will make sure there is no littering on streets or nerby properties

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:

SUP # 2012-0048

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:

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

Employees will be trained on safety matters
children will be supervised all times

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.

SUP # 2012-0048

PARKING AND ACCESS REQUIREMENTS

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

2 Standard spaces
_____ Compact spaces
_____ Handicapped accessible spaces.
_____ Other.

Planning and Zoning Staff Only
Required number of spaces for use per Zoning Ordinance Section 8-200A_____
Does the application meet the requirement? [ ] Yes [ ] No

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?

~~In front of house~~

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? _____

Planning and Zoning Staff Only
Required number of loading spaces for use per Zoning Ordinance Section 8-200_____
Does the application meet the requirement? [ ] Yes [ ] No

SUP # 2012-0048

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?

N/A

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

N/A

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

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?

1700 sq. ft. (existing) + Ø sq. ft. (addition if any) = 1700 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

SUP # 2012-0048

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? 9

4. How many children reside in the home? 1

5. How old are the children? (List the ages of all children to be cared for)

Resident: 0 to 5 years old

Non-resident: _____

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: up to 9 x 75 square feet = 675 square feet

Play area provided: 1500 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: N/A

NOTE: Child care homes are not permitted to display signs.

SUP # 2012-0048

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? 2 + operator (3)

How many staff members will be on the job at any one time? 2 + operator (3)

2. Where will staff and visiting parents park? Staff take public transportation visiting parents have on and off street parking

3. Please describe how and where parents will drop off and pick up children.
Parents will drop of children at the door of the home daycare were they will be recived by one of the staff members. Pick up will be also at the Front door of the home daycare.

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

Drop-off: 7:00 am To 9:00 am

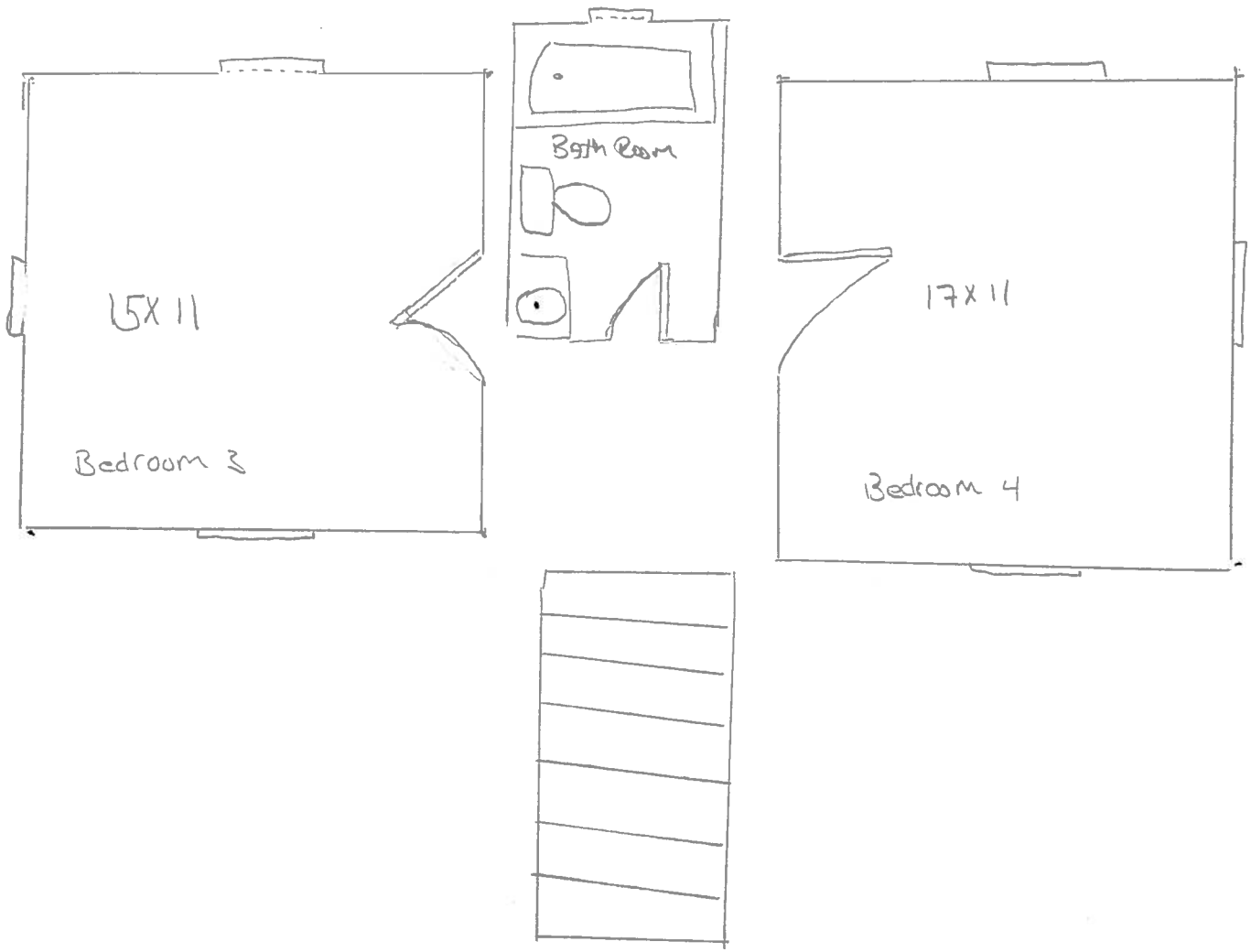
Pick-up: 4:00Pm to 6:00 pm

5. What type of outdoor play equipment is proposed for the child care facility, if any? Where will it be located on the property?
Located in back yard, Kitche, play house, slides, balls, basketball.

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.
Existing Fence Enclosed Part of rear yard that will be used For the play area.



SUP 2012-0048

Total Living Area 1,714