



APPLICATION SPECIAL USE PERMIT

Sop 2011-0023

ADMINISTRATIVE CHANGE OF OWNERSHIP OR MINOR AMENDMENT

Change of Ownership Minor Amendment

[must use black ink or type] 1931 (@ 1925)
PROPERTY LOCATION: ~~1925~~ Ballenger Ave Suite 118 Alexandria, VA 22314
TAX MAP REFERENCE: ~~009~~ 073.03-02-16 **ZONE:** CPD #1

APPLICANT

Name: Party of Six Foods, LLC
Address: 11867 Timber Knoll Ct, Herndon VA 20170

PROPERTY OWNER

Name: Carlyle-Lane-CFRF Venture II, LLC
Address: 15 Old Danbury Road, Wilton CT 06897
SITE USE: Retail

THE UNDERSIGNED hereby applies for a Special Use Permit for **Change in Ownership**, in accordance with the provisions of Article XI, Division A, Section 11-503 (5)(f) of the 1992 Zoning Ordinance of City of Alexandria, Virginia.

THE UNDERSIGNED, having read and received a copy of the special use permit, hereby agrees to comply with all conditions of the current special use permit, including all other applicable City codes and ordinances.

THE UNDERSIGNED hereby applies for a Special Use Permit for **Minor Amendment**, in accordance with the provisions of Article XI, Division A, Section 11-509 and 11-511 of the 1992 Zoning Ordinance of City of Alexandria, Virginia.

THE UNDERSIGNED, having obtained permission from the property owner, hereby requests this special use permit. The undersigned also attests that all of the information herein required to be furnished by the applicant are true, correct and accurate to the best of his/her knowledge and belief.

Leslie A. Hutchinson
Print Name of Applicant or Agent
11867 Timber Knoll Ct
Mailing/Street Address
Herndon, VA 20170
City and State Zip Code

Leslie A. Hutchinson
Signature
571-426-5953 _____
Telephone # Fax #
Leslie Hutch@aol.com
Email address
4/11/11
Date

DO NOT WRITE IN THIS SPACE - OFFICE USE ONLY

Application Received: _____	Fee Paid: \$ _____
Legal advertisement: _____	_____
ACTION - PLANNING COMMISSION _____	ACTION - CITY COUNCIL: _____

The following information must be furnished to the Department of Planning and Zoning to determine if the current use conducted on the premises complies with the special use permit provisions and all other applicable codes and ordinances.

1. Please describe prior special use permit approval for the subject use.

Most recent Special Use Permit # 2007-0019

Date approved: 5 / 1 / 2007
month day year

Name of applicant on most recent special use permit Daniel Garcia

Use operation of a restaurant

2. Describe below the nature of the *existing operation in detail* so that the Department of Planning and Zoning can understand the nature of the change in operation; include information regarding type of operation, number of patrons served, number of employees, parking availability, etc. (Attach additional sheets if necessary.)

The existing operation is a "Robeks Fruit Smoothies"
franchise location that sells fruit smoothies, fresh
juices, vitamin supplements and healthy snacks.

This existing operation will not change. Party of Six
Foods will continue to run this Robeks franchise
location so patrons, employees and parking will
not change from existing operation.

3. Describe any proposed changes to the business from what was represented to the Planning Commission and City Council during the special use permit approval process, including any proposed changes in the nature of the activity, the number and type of patrons, the number of employees, the hours, how parking is to be provided for employees and patrons, any noise emitted by the use, etc. (Attach additional sheets if necessary)

No changes are proposed. Party of Six Foods plans to continue the operation at the site exactly as it currently is. Only the ownership will change, not the business operations.

4. Is the use currently open for business? ___ Yes X No

If the use is closed, provide the date closed. 12 / 15 / 2010
month day year

5. Describe any proposed changes to the conditions of the special use permit:

None

6. Are the hours of operation proposed to change? X Yes ___ No

If yes, list the current hours and proposed hours:

Current Hours:

Mon-Fri 7am-7pm
Sat 9am-7pm
Sun 9am-6pm

Proposed Hours:

mon - Fri 7am-6pm
Sat 9am-3pm
Sun closed

7. Will the number of employees remain the same? X Yes ___ No

If no, list the current number of employees and the proposed number.

Current Number of Employees:

Proposed Number of Employees:

8. Will there be any renovations or new equipment for the business? ___ Yes X No

If yes, describe the type of renovations and/or list any new equipment proposed.

9. Are you proposing changes in the sales or service of alcoholic beverages? ___ Yes X No

If yes, describe proposed changes:

10. **Is off-street parking provided for your employees?** ___ Yes No
If yes, how many spaces, and where are they located?

11. **Is off-street parking provided for your customers?** Yes No
If yes, how many spaces, and where are they located?
According to the existing SUP, there are 3 spaces
available in the onsite parking garage.

12. **Is there a proposed increase in the number of seats or patrons served?** ___ Yes No
If yes, describe the current number of seats or patrons served and the proposed number of seats and patrons served. For restaurants, list the number of seats by type (i.e. bar stools, seats at tables, etc.)

Current: _____ Proposed: _____
_____ _____
_____ _____

13. **Are physical changes to the structure or interior space requested?** ___ Yes No
If yes, attach drawings showing existing and proposed layouts. In both cases, include the floor area devoted to uses, i.e. storage area, customer service area, and/or office spaces.

14. **Is there a proposed increase in the building area devoted to the business?** ___ Yes No
If yes, describe the existing amount of building area and the proposed amount of building area.

Current: _____ Proposed: _____
_____ _____
_____ _____

15. **The applicant is the** (check one) ___ Property owner Lessee
___ other, please describe: _____

16. **The applicant is the** (check one) ___ Current business owner Prospective business owner
___ other, please describe: _____

17. Each application shall contain a clear and concise statement identifying the applicant, including the name and address of each person owning an interest in the applicant and the extent of such ownership interest. If the applicant, or one of such persons holding an ownership interest in the applicant is a corporation, each person owning an interest in excess of ten percent (10%) in the corporation and the extent of interest shall be identified by name and address.

For the purpose of this section, the term "ownership interest" shall include any legal or equitable interest held in the subject real estate at the time of the application. If a nonprofit corporation, the name of the registered agent must be provided.

Please provide ownership information here:

Party of Six Foods, LLC is comprised of
two members, each has 50% ownership in
the business.

David T. Hutchinson + Leslie A. Hutchinson.
2) 11867 Timber Knoll Ct, Herndon VA 20170

Party of Six Foods, LLC is currently a Robeks franchisee
with 7 current locations in the No. VA area.
The Ballenger Ave location would be #8.