



APPLICATION SPECIAL USE PERMIT

SUP # 2010-0074

ADMINISTRATIVE CHANGE OF OWNERSHIP OR MINOR AMENDMENT

Change of Ownership Minor Amendment

[must use black ink or type]

PROPERTY LOCATION: 3507 Mt. Vernon Ave Alexandria VA 22305
TAX MAP REFERENCE: 015.01-05-13 **ZONE:** NR

APPLICANT

Name: Gregory Pehlivanis
Address: 3507 Mt. Vernon Ave Alexandria VA 22305

PROPERTY OWNER

Name: Zlotnic Kraft & Mers
Address: 6305 Ivy Lane Suite 202 Green Belt MD 20770

SITE USE: _____

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.

Gregory Pehlivanis
Print Name of Applicant or Agent

[Signature]
Signature

3507 Mt Vernon Ave.
Mailing/Street Address

703-549-8948 703-549-9340
Telephone # Fax #

Alexandria, VA 22305
City and State Zip Code

Gvigorios1@verizon.net
Email address

10-27-10
Date

| DO NOT WRITE IN THIS SPACE - OFFICE USE ONLY | |
|--|------------------------------|
| Application Received: _____ | Fee Paid: \$ _____ |
| Legal advertisement: _____ | _____ |
| ACTION - PLANNING COMMISSION _____ | ACTION - CITY COUNCIL: _____ |

Sept 2010-0074

Special Use Permit # 95/0026

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 # 95/0026

Date approved: 03 / 16 / 1995
month day year

Name of applicant on most recent special use permit Greg's Auto service INC

Use Auto Repair Shop

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.)

General Auto Repair Shop
Operating Business from ^{8:00 AM} ~~7:30 AM~~ to ^{6:00 PM} ~~7:30 PM~~
Mon to Frid.

Sat. from 8: to 5 PM
with 4 employees

14 available parking spots

SUP # 2010-0074

Special Use Permit # ~~95/0026~~

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)

I Request. To change Hours operation.
From 8:00 AM TO 7:30 AM and,
From 6:00 PM TO 7:30 PM

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

If the use is closed, provide the date closed. _____ / _____ / _____
month day year

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

~~703~~
Home operation No other changes

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

If yes, list the current hours and proposed hours:

Current Hours:
~~Monday to Friday~~
8:00 AM To 6 PM
Saturday 8:00 AM
To 5:00 PM

Proposed Hours:
7:30 AM To 7:30 PM
Monday to Friday
Saturday 8: AM To 5:00 PM

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

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

Current Number of Employees:
4

Proposed Number of Employees:
4

8. Will there be any renovations or new equipment for the business? Yes 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 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?
14 spaces on property

11. **Is off-street parking provided for your customers?** Yes No
If yes, how many spaces, and where are they located?
14 spaces on property

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: 8 Customers/Day Proposed: 8 Customers/Day

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: 2000 sqft. Proposed: 2000 sqft.

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:

Gregory Pehlivanis 100%
3507 Mt. Vernon Ave Alexandria VA
