Docket Item #3
SPECIAL USE PERMIT #2005-0102

Planning Commission Meeting
November 1, 2005

ISSUE: Consideration of a request for a special use permit to operate a massage therapy business.

APPLICANT: Rany Srey and Caroline Pirtle

LOCATION: 1007 King Street; 2nd floor

ZONE: KR/King Street Urban Retail Zone

PLANNING COMMISSION ACTION, NOVEMBER 1, 2005: By unanimous consent, the Planning Commission recommended approval of the request.

STAFF RECOMMENDATION: Staff recommends approval subject to compliance with all applicable codes and ordinances and the recommended permit conditions found in Section III of this report.
I. DISCUSSION

REQUEST
The applicants, Rany Srey and Caroline Pirtle, request special use permit approval for the operation of a massage therapy facility located at 1007 King Street.

SITE DESCRIPTION
The subject property is one lot of record with 27 feet of frontage on King Street, 100 feet of depth and a total lot area of 2,540 square feet. The site is developed with a 2-1/2 story building with retail on the first floor and offices on the subsequent floors. Access to the property is from King Street.

The surrounding area is occupied by a mix of retail and office uses with some residential uses on upper levels. Immediately to the north is a public alley. To the south across King Street are retail and office uses and to the east and west are retail uses with office and residences on the upper floors.

PROJECT DESCRIPTION
The applicants request special use permit approval to operate a massage therapy facility. As depicted on the interior layout plans, the applicant proposes to have one massage room with therapists alternating the use of the room.

- Hours: The applicants propose to operate from 9 a.m. to 9 p.m. seven days a week.

- Number of clients: The applicants anticipate three to eight clients per day.

- Noise: Noise levels will be low, which is consistent with a massage therapy facility.

- Trash/Litter: The applicants anticipate minimal trash. Trash will be collected daily.

PARKING
The proposed use is located within the Central Business District (CBD) and is exempt from the parking requirements of Section 8-200(A)(17) per Section 8-300(B) of the Zoning Ordinance.
ZONING/MASTEr PLAN DESIGNATION
The subject property is located in the KR/King Street Urban Retail Zone. Section 6-702(B)(2)(a) of the Zoning Ordinance allows a massage therapy facility in the KR zone only with a special use permit.

The proposed use is consistent with the King Street Retail Strategy chapter of the Master Plan which encourages non-retail uses to locate on upper floors.

II. STAFF ANALYSIS

Staff does not object to the proposed massage establishment located at 1007 King Street. The site is suited for small scale commercial uses such as the proposed facility. Additionally, the proposed use is compatible with the other office uses in the building, which include a law office and an architect’s office. The location of the facility is consistent with the King Street Retail Strategy as the facility will be located on the second floor of the building with retail on the first floor. Staff anticipates that the demand for parking for this use will be minimal as there is only one massage therapy room and that there is adequate on-street parking to serve this use.

With the following conditions, staff recommends approval of the special use permit.

III. RECOMMENDED CONDITIONS

Staff recommends approval subject to compliance with all applicable codes and ordinances and the following conditions:

1. The special use permit shall be granted to the applicant only or to any corporation in which the applicant has a controlling interest. (P&Z)

2. The hours of operation of the massage therapy facility shall be limited to between 9 a.m. and 9 p.m. daily. (P&Z)

3. The applicant shall post the hours of operation at the entrance of the business. (P&Z)

4. The applicant shall encourage its employees to use mass transit or to carpool when traveling to and from work, by posting information regarding DASH and METRO routes, the location where fare passes for transit are sold, and advertising of carpooling opportunities. (P&Z)
5. The applicant shall conduct employee training sessions on an ongoing basis, including as part of any employee orientation, to discuss all SUP provisions and requirements. (P&Z)

6. The applicant is to contact the Community Relations Unit of the Alexandria Police Department at 703-838-4520 regarding a security survey for the business and a robbery awareness program for all employees. This is to be completed prior to opening for business. (Police)

7. Only City licensed therapists may provide massage services at the facility. (P&Z)

8. The Director of Planning and Zoning shall review the special use permit after it has been operational for one year, and shall docket the matter for consideration by the Planning Commission and City Council if (a) there have been documented violations of the permit conditions which were not corrected immediately, constitute repeat violations or which create a direct and immediate adverse zoning impact on the surrounding community; (b) the director has received a request from any person to docket the permit for review, or (c) the director has determined that there are problems with the operation of the use and that new or revised conditions are needed. (P&Z)

STAFF: Eileen Fogarty, Director, Department of Planning and Zoning;
Richard Josephson, Deputy Director;
Katrina Newton, Urban Planner.

Staff Note: In accordance with section 11-506(c) of the zoning ordinance, construction or operation shall be commenced and diligently and substantially pursued within 18 months of the date of granting of a special use permit by City Council or the special use permit shall become void.
IV. CITY DEPARTMENT COMMENTS

Legend:  C - code requirement  R - recommendation  S - suggestion  F - finding

Transportation & Environmental Services:

F-1 No comments

Code Enforcement:

F-1 There is insufficient information to determine the location of this business within the
listed address. Therefore additional code requirements may be required at the time
of permit application.

C-1 The current use is classified as M, Merchantile; the proposed use is B, Business.
Change of use, in whole or in part, will require a certificate of use and occupancy
(USBC 119.4) and compliance with USBC 119.2, including but not limited to:
limitations of exit travel distance, emergency and exit lighting, a manual fire alarm
system, and accessibility for persons with disabilities.

C-2 Prior to the application for new Certificate of Occupancy, the applicant shall submit
a building permit for a change of use. Drawings prepared by a licensed architect or
professional engineer shall accompany the permit application. These plans shall
show provide existing conditions, construction type data, and a plot plan. In
addition, these plans shall show proposed conditions and provide data by the design
professional which details how the proposed use will comply with the current edition
of the Virginia Uniform Statewide Building Code for the new use in the area of
structural strength, means of egress, passive and active fire protection, heating and
ventilating systems, handicapped accessibility and plumbing facilities.

C-3 New construction must comply with the current edition of the Uniform Statewide
Building Code (USBC).

C-4 Alterations to the existing structure must comply with the current edition of the
Uniform Statewide Building Code (USBC).

C-5 Construction permits are required for this project. Plans shall accompany the permit
application that fully detail the construction as well as layouts and schematics of the
mechanical, electrical, and plumbing systems.
C-6 Compliance with handicap accessibility will be determined upon submission of more detailed information and plans.

Health Department:

C-1 An Alexandria Health Department Permit is required for all regulated facilities. Permits are not transferable.

C-2 Permits must be obtained prior to operation.

C-3 The massage and personal grooming sections of the business must be permitted separately.

C-4 Five sets of plans must be submitted to and approved by this department prior to construction/modifications. Plans must comply with the Alexandria City Code, Title 11, Chapter 2, Food and Food Establishments. There is a $135.00 fee for review of plans for food facilities.

C-5 All massage therapist must possess a current massage therapist certification issued by the Commonwealth of Virginia in accordance with the Code of Virginia Chapter 599, § 54.1-3029 and must possess a current massage therapist permit issued in accordance with Alexandria City Code Title 11, Chapter 4.2 prior to engaging in any massage activity.

Police Department:

R-1 The applicant is to contact the Community Relations Unit of the Alexandria Police Department at 703-838-4520 regarding a security survey for the business.

R-2 The applicant is to contact the Community Relations Unit of the Alexandria Police Department at 703-838-4520 regarding a robbery awareness program for all employees.

F-1 The applicant is not seeking an “ABC” permit. The Police Department concurs.
APPLICATION for SPECIAL USE PERMIT #2005-0102

[must use black ink or type]

PROPERTY LOCATION: 1007 KING STREET; 2nd floor

TAX MAP REFERENCE: 64.03.07.24 ZONE: CD

APPLICANT Name: Rany Srzy & Caroline Pintle

Address: 1007 King Street

PROPERTY OWNER Name: Robert Montague

Address: 5041 9th St. South Arlington VA 22204

PROPOSED USE: Massage Therapy

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.

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 XI, Section 11-301(B) 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 Planning Commission or City Council in the course of public hearings 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 Agent

5041 9th St South

Mailing/Street Address

Arlington VA 22204

City and State Zip Code

Signature

(703) 313-08-71

(703) 931-5761

(703) 931-5761

Telephone # Fax #

DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

Application Received: Date & Fee Paid: $ 

ACTION - PLANNING COMMISSION: 

ACTION - CITY COUNCIL: 

07/26/99 p:\zoning\pc-app\forms\app-sup1
Special Use Permit #2005-0102

All applicants must complete this form. Supplemental forms are required for child care facilities, restaurants, automobile oriented uses and freestanding signs requiring special use permit approval.

1. The applicant is (check one) [ ] the Owner [ ] Contract Purchaser
   [x] 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, unless the entity is a corporation or partnership in which case identify each owner of more than ten percent.

   ______________________________
   __________________________________________
   __________________________________________
   __________________________________________

   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
   [x] No. The agent shall obtain a business license prior to filing application, if required by the City Code.

2. Submit a floor plan and a plot plan with parking layout of the proposed use. One copy of the plan is required for plans that are 8½" x 14" or smaller. Twenty-four copies are required for larger plans or if the plans cannot be easily reproduced. The planning director may waive requirements for plan submission upon receipt of a written request which adequately justifies a waiver. This requirement does not apply if a Site Plan Package is required.
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, including such items as 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, and whether the use will generate any noise. (Attach additional sheets if necessary)

Rory Sey and Caroline Pistle wish to operate a small massage business. There will be one massage room. Its use will be alternated. There will be one patron at a time. The noise level will be very low. We wish to operate seven days between the hours of 9am and 9pm. No parking is provided but it is a commercial area.
USE CHARACTERISTICS

4. The proposed special use permit request is for: (check one)
   [ ] a new use requiring a special use permit,
   [ ] a development special use permit,
   [ ] an expansion or change to an existing use without a special use permit,
   [ ] 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).
      I expect three to eight clients per day.
   ________________________________________________________________

   B. How many employees, staff and other personnel do you expect? Specify time period (i.e., day, hour, or shift).
      None
   ________________________________________________________________

6. Please describe the proposed hours and days of operation of the proposed use:
   Day: Sunday to Saturday
   Hours: 9am to 9pm
   ________________________________________________________________

7. Please describe any potential noise emanating from the proposed use:
   A. Describe the noise levels anticipated from all mechanical equipment and patrons.
      The noise level anticipated will be low from patrons entering and exiting.
B. How will the noise from patrons be controlled?

N/A

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?

Minimal trash will consist of tissues and paper towels.

B. How much trash and garbage will be generated by the use?

Minimal trash will be generated.

C. How often will trash be collected?

Daily.

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

We will provide appropriate receptacles within the space. Trash cans in each room.
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:
   _____________________________________________
   _____________________________________________
   _____________________________________________

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 residents, employees and patrons?
   There is a fire escape in the massage room.
   We will have a coded lock on the inner door.

   ALCOHOL SALES

13. Will the proposed use include the sale of beer, wine, or mixed drinks?
   [ ] Yes.  [ ] No.

   If yes, describe alcohol sales below, including if the ABC license will include on-premises and/or off-premises sales. Existing uses must describe their existing alcohol sales and/or service and identify any proposed changes in that aspect of the operation.
   _____________________________________________
   _____________________________________________
   _____________________________________________
   _____________________________________________
PARKING AND ACCESS REQUIREMENTS

14. Please provide information regarding the availability of off-street parking:

A. How many parking spaces are required for the proposed use pursuant to section 8-200 (A) of the zoning ordinance?

N/A 0 spaces Central Business District

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

- Standard spaces
- Compact spaces
- Handicapped accessible spaces.
- Other.

C. Where is required parking located? [ ] on-site [ ] off-site (check one)

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

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.

D. 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.

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

A. How many loading spaces are required for the use, per section 8-200 (B) of the zoning ordinance? N/A

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

C. Where are off-street loading facilities located?
D. During what hours of the day do you expect loading/unloading operations to occur? 

N/A

E. 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? 

N/A

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 be the total area occupied by the proposed use be? 

425 sq. ft. (existing) + _______ sq. ft. (addition if any) = _______ 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: commercial townhouse
APPLICATION for SPECIAL USE PERMIT # 005-0102

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Print Name of Applicant or Agent

Signature

Mailing/Street Address

Telephone #

Fax #

City and State Zip Code Date

DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

Application Received: Date & Fee Paid: $ 

ACTION - PLANNING COMMISSION: By unanimous consent recommended approval 11/01/05

ACTION - CITY COUNCIL: 11/12/05 - CC approved the PC recommendation 6-0

07/16/99 p: zoning/icp-app/forms/appl-suppl