Department of Planning and Zoning

Town of Vienna, Virginia 127 Center Street South Vienna, VA 22180 Phone: (703) 255-6341 Email: DPZ@viennava.gov

Mah Boutique

Project Overview

Project Title: Mah Boutique Application Type: Board of Architectural Review: Signs Workflow: 1. Initial Review

Project Contacts

Contact Information: Applicant Ehsan Ayoub Mah Boutique LLC 527 Maple Avenue W, SUITE 1 **VIENNA, VA 22180** P:2028678388 mah_boutique@yahoo.com

Indicate which of the following additional project contacts are to be included on project correspondences .: None of the Above

Project Address

Project Address: 527 MAPLE AVE W

Parcel (PIN): Address/Parcel

527 MAPLE AVE W: 0383 38 B3

Current Zoning: Address/Parcel

• 527 MAPLE AVE W: C-1

Project Description

Project Description:

Hello

I submitted my application for a business sign previously, but I have no idea why my previous application was removed from my application portal. I am applying for a business sign for Mah Boutique in the address 527 maple avenue w, vienna va 22180.

Project Information

Business/Development Name: Mah Boutique Total Allowable Building Sign Area: 450

Width of Building Frontage/Leased Area: 450 Are any Fairfax County Building Permit application numbers associated with this application?: No

527 MAPLE AVE W: IN TOWN OF VIENNA

Fairfax County Building Permit Number(s):

Contact Information: Owner Ehsan Avoub Mah Boutique LLC 527 Maple Avenue W, SUITE 1 **VIENNA, VA 22180** P:2028678388 mah_boutique@yahoo.com

Town Limits: Address/Parcel

Jurisdiction: Town of Vienna

State: VA

Suite: 1

County: Fairfax

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BAR Meeting Date:

Project Information

BAR Agenda Item: 15*30 Polycarbonate 3/16 thick black vinyl sign

Project File Number: I dont have it

Total Number of Signs Proposed: 1		
Sign Type A (please provide all applicable details belo	w)	×
Proposed Sign Type: Front Facade	Scope of Work: Reface	
Description of Sign:	Sign Area Height: 3	
polycarbonate black vinyl		
Sign Area Width: 15	Total Sign Face Area: 450	
Sign Depth: 0.7	Window Height:	
Window Width:	Total Window Area:	
Awning Depth:	Awning Width:	
Height from Bottom to Sidewalk:	Total Structure Height:	
Illumination Type: LED	Lumens: 750	
Kelvins: 750	Alternative Measurement:	
Sign Type B (please provide all applicable details belo	w)	×
Proposed Sign Type:	Scope of Work:	
Description of Sign:	Sign Area Height:	
Sign Area Width:	Total Sign Face Area:	
Sign Depth:	Window Height:	
Window Width:	Total Window Area:	
Awning Depth:	Awning Width:	
Height from Bottom to Sidewalk:	Total Structure Height:	
Illumination Type:	Lumens:	
Kelvins:	Alternative Measurement:	
Sign Type C (please provide all applicable details belo	w)	×
Proposed Sign Type:	Scope of Work:	
Description of Sign:	Sign Area Height:	
Sign Area Width:	Total Sign Face Area:	
Sign Depth:	Window Height:	
Window Width:	Total Window Area:	
Awning Depth:	Awning Width:	
Height from Bottom to Sidewalk:	Total Structure Height:	
Illumination Type:	Lumens:	
Kelvins:	Alternative Measurement:	
Sign Type D (please provide all applicable details belo	w)	×
Proposed Sign Type:	Scope of Work:	
Description of Sign:	Sign Area Height:	
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Sign Area Width: Sign Depth: Window Width: Awning Depth: Height from Bottom to Sidewalk: Illumination Type: Kelvins: Total Sign Face Area: Window Height: Total Window Area: Awning Width: Total Structure Height: Lumens: Alternative Measurement:



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Town of Vienna, Virginia 127 Center Street S Vienna, Virginia 22180 Phone: 703-255-6341 | Email: DPZ@viennava.gov Hours: Monday – Friday, 8:00 am - 4:30 pm

APPLICANT AUTHORIZATION FORM

I hereby certify that I am the property owner or I have authority of the property owner to make this application, that the information is complete, and that if a permit or certificate is issued, the construction and/or use will conform to the zoning ordinance and other applicable laws and regulations including private building restrictions, if any, which relate to the property. This form must be submitted prior to issuance of any permit or certificate.

I understand that the permits or certificates obtained pursuant to this permit authorization form will be in my name. I accept full responsibility for the work performed.

Check one box below:

✓ I am the property owner

I am an applicant who has the authority of the property owner (owner will still need to sign)

Description of permits or certificates being applied for:

Seller ofBridal gowns, party dress, Afghani and Indian dress, and accessories.

at the following address: 529 Maple Ave W, Veinna, VA 22180	
Applicant Name (fill out if owner is not applicant): EHSAN	AYOUB
Signature of Applicant:	Date: 2/2012025
Property Owner's Name: Amer Dalo	
Signature of Property Owner:	Date: 02/20/2025