

Department of Planning and Zoning Town of Vienna, Virginia

127 Center Street South Vienna, VA 22180 Phone: (703) 255-6341

Email: DPZ@viennava.gov

Project Overview #1623906

Project Title: Himalayan Massage & Spa

Application Type: Board of Architectural Review: Signs

Workflow: 1. Initial Review

Jurisdiction: Town of Vienna

State: VA

County: Fairfax

Project Contacts

Contact Information: Applicant

beshoy Iprahim

Himalayan Massage LLC 360 Maple ave. west, B Vienna, VA 22180 P:7037059559

Himalayanmassage1@gmail.com

Indicate which of the following additional project contacts are to be included on project correspondences.: Contractor

Contact Information: Owner

beshoy Iprahim Himalayan Massage LLC 360 Maple ave. west, B Vienna, VA 22180 P:7037059559

Himalayanmassage1@gmail.com

Project Address

Project Address: 112 PLEASANT ST NW

Parcel (PIN): Address/Parcel

• 112 PLEASANT ST NW: 0384 71 C

Current Zoning: Address/Parcel
• 112 PLEASANT ST NW: C-1A

Suite: D

Town Limits: Address/Parcel

• 112 PLEASANT ST NW: IN TOWN OF VIENNA

Project Description

Project Description:

The project is for installing a sign on the outside building wall. There is also a sign to be installed on the directory pole on the street.

Fairfax County Building Permit Number(s):

Project Information

Business/Development Name: Himalayan Massage & Spa

Total Allowable Building Sign Area: 20

Fairfax County Building Permit Number(s):

BAR Meeting Date:

Width of Building Frontage/Leased Area: 30

Are any Fairfax County Building Permit application numbers associated with this application?: No

BAR Agenda Item:

Project File Number: 000

Project Information

Created with GeoCivix
On 2/25/25
Himalayan Massage
Page 1 of 3

Total Number of Signs Proposed: 2

Sign Type A (please provide all applicable details below)

Proposed Sign Type: Front Facade Scope of Work: New Description of Sign: Sign Area Height: 3.08

It will be the letters and the logo of the company

Sign Area Width: 2.46 Total Sign Face Area: 6.9

Sign Depth: 1 Window Height:
Window Width: Total Window Area:
Awning Depth: Awning Width:

Height from Bottom to Sidewalk: Total Structure Height:

Illumination Type: None Lumens:

Kelvins: Alternative Measurement:

Sign Type B (please provide all applicable details below)

Proposed Sign Type: Directional Scope of Work: New Description of Sign: Sign Area Height: 1.3

The sign will be on a directional pole.

Sign Area Width: 2.08 Total Sign Face Area: 2.7

Sign Depth: 1 Window Height:
Window Width: Total Window Area:
Awning Depth: Awning Width:

Height from Bottom to Sidewalk: Total Structure Height: 12

Illumination Type: None Lumens:

Kelvins: Alternative Measurement:

Sign Type C (please provide all applicable details below)

Proposed Sign Type:

Description of Sign:

Sign Area Width:

Sign Depth:

Window Width:

Window Width:

Awning Depth:

Scope of Work:

Sign Area Height:

Total Sign Face Area:

Window Height:

Total Window Area:

Awning Width:

Height from Bottom to Sidewalk: Total Structure Height:

Illumination Type: Lumens:

Kelvins: Alternative Measurement:

Sign Type D (please provide all applicable details below)

Proposed Sign Type: Scope of Work:

Description of Sign: Sign Area Height:

Sign Area Width: Total Sign Face Area:

Window Height:

Window Width: Total Window Area:

Awning Depth:
Height from Bottom to Sidewalk:
Illumination Type:

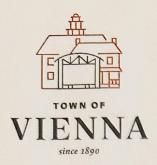
Kelvins:

Awning Width:

Lumens:

Total Structure Height:

Alternative Measurement:



Department of Planning and Zoning

Town of Vienna, Virginia 127 Center Street S Vienna, Virginia 22180

in my name. I accept full responsibility for the work performed.

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

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:

| at the following address: 112 pleasant St. Nw, Suite D. Wenna, VA
| Applicant Name (fill out if owner is not applicant): Best prahim
| Signature of Applicant: Date: 02 07 2025

| Property Owner's Name: 112 Pleasant St LLC
| Signature of Property Owner: Date: 2/12/2025