



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

#1883736

Project Title: ELECTRIC BULL - 176 W. Maple Ave
Application Type: Board of Architectural Review: Signs
Workflow: 1. Initial Review

Jurisdiction: Town of Vienna
State: VA
County: Fairfax

Project Contacts

Contact Information: Applicant

MATTHEW HIGGINS
 Concept Unlimited, Inc.
 10020 FARROW ROAD
 COLUMBIA, SC 29203

Contact Information: Owner

Sarith Ercoline
 Rappaport Mgmt for The Vienna Shopping Center LP
 8405 Greensboro Drive, Eighth Floor
 McLean, VA 22102

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

Project Address

Project Address: 176 MAPLE AVE W

Parcel (PIN): Address/Parcel

- 176 MAPLE AVE W: 0384 02 0076

Current Zoning: Address/Parcel

- 176 MAPLE AVE W: C-2

Suite:

Town Limits: Address/Parcel

- 176 MAPLE AVE W: IN TOWN OF VIENNA

Project Description

Project Description:

(1) SET OF INTERNALLY ILLUMINATED CHANNEL LETTERS MOUNTED ABOVE FRONT ENTRY.

Project Information

Business/Development Name: Avenue Center

Total Allowable Building Sign Area: 56

BAR Meeting Date:

Width of Building Frontage/Leased Area: 28

BAR Agenda Item:

Request for approval of a sign for ELECTRIC BULL, located at
 176 Maple Ave W.

Project File Number: 000

Project Information

Total Number of Signs Proposed: 1

Sign Type A (please provide all applicable details below)



Proposed Sign Type: Front Facade

Scope of Work: New

Description of Sign:

Sign Area Height: 4.6667

(1) set of internally illuminated channel letters. LED's with low voltage power supply.

Sign Area Width: 9.2865

Total Sign Face Area: 41.41

Sign Depth: 6.5

Window Height:

Window Width:

Total Window Area:

Awning Depth:

Awning Width:

Height from Bottom to Sidewalk:

Total Structure Height:

Illumination Type: LED

Lumens: 98

Kelvins: 3000

Alternative Measurement:

Sign Type B (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:

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 below)



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 below)



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:
Illumination Type:

Kelvins:

Total Structure Height:
Lumens:

Alternative Measurement:



Department of Planning and Zoning

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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:

1 set of internally illuminated channel letters

at the following address: 176 W. Maple Ave

Applicant Name (fill out if owner is not applicant): Kathy Baker / Matt Higgins

Signature of Applicant: Kathy Baker

Date: 9/29/25

Property Owner's Name: Dave Lynch, Rappaport Management Company

Signature of Property Owner: [Signature]

Date: 9/29/25