

# Conditional Use Permit GeoCivix, LLC

9420 E. Golf Links Rd. Suite 108, #296 | Tucson, AZ 85730 P: 520 319-0988 | F: (520) 319-1430 | E: jace.coleman@geocivix.com

Project Overview #1377403

dlynch@rappaportco.com

Project Title: 160 Maple Avenue W - Seray Restaurant Jurisdiction: Town of Vienna

Application Type: Conditional Use PermitState: VAWorkflow: 1. Application Completeness ReviewCounty: Fairfax

**Project Contacts** 

Contact Information: Applicant Contact Information: Owner

Stephen Kenney David Lynch RV Architects

467A N Washington Street, Falls Church, VA 22046 8405 Greensboro Drive, 8th floor Falls Church, VA 22046 McLean, VA 22102

P:7035333577 P:571-382-1239

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

Above

Project Address

skenney@rvarchitects.com

Project Address: 160 MAPLE AVE W

Suite:

Parcel (PIN): Address/Parcel

Town Limits: Address/Parcel

160 MAPLE AVE W: 0384 02 0076
 160 MAPLE AVE W: IN TOWN OF VIENNA

Current Zoning: Address/Parcel160 MAPLE AVE W: C-2

### **Project Description**

#### **Project Description:**

Request for approval to increase outdoor seating area from 12 seats (by right) to 18 seats. We have applied for approval of the furniture via BAR. We also have allocated seating capacity to match parking spaces in the attached spreadsheet.

Trade Name of Business (DBA): Seray

Business Hours: Noon to 10pm

Type of Conditional Use Requested: Outdoor dining

Number of Proposed Employees: 14

Project Narrative: Are you amending an existing conditional use permit?: No

Request to increase the outdoor seating area from 12 seats (by right) to 18 seats.



# **Department of Planning and Zoning**

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

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:

Outdoor seating furniture.

at the following address: 136A Maple Ave W

Applicant Name (fill out if owner is not applicant:

Date: 5-30-24

Property Owner's Name: Dave Lynch, Director of Construction - Rappaport

Date: 5/31/24