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 #1806106

Project Title: 515 Maple Ave E
Application Type: Board/Commission Work Session
Workflow: 1. Work Session Initial Review
Jurisdiction: Town of Vienna
State: VA
County: Fairfax

Project Contacts

Contact Information: Applicant
MIKE VAN ATA
Sekas Homes
407-L Church Street, N.E.
Vienna, VA 22180
P:703-242-2300
mike@sekashomes.com

Contact Information: Owner
Severino Rodrigues
1897 Del Prado Blvd
6180 NW 63RD WAY
POMPANO BEACH, FL 33067
P:954-647-3846
sev@grehllc.com

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

Project Address

Project Address: 515 MAPLE AVE E
Suite:

Parcel (PIN): Address/Parcel
- 515 MAPLE AVE E: 0382 09 0103

Town Limits: Address/Parcel
- 515 MAPLE AVE E: IN TOWN OF VIENNA

Current Zoning: Address/Parcel
- 515 MAPLE AVE E: C-1

Project Description

Project Description:
BAR work session for proposed mixed use residential condominium building at 515 Maple Ave E

Fairfax County Building Permit Number(s): N/A

Board/Commission Requested for Work Session: Board of Architectural Review

TOWN OF
VIENNA
since 1890

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Town of Vienna, Virginia
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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:

Proposed site plan to provide for the construction of a 3-story mixed-use building with commercial/retail space, parking garage, and multi-family units.

at the following address: 515 Maple Avenue E, Vienna, VA 22180

Applicant Name (fill out if owner is not applicant): Sekas Homes, LTD.

Signature of Applicant: _____ Date: 7/10/25

Property Owner's Name: 1897 Del Prado Blvd, LLC

Signature of Property Owner: _____ Date: 7/11/25