



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

#1312986

Project Title: 430 Old Courthouse Rd NE - Family Day Home - Conditional Use Permit

Jurisdiction: Town of Vienna

Application Type: Conditional Use Permit

State: VA

Workflow: 2. Staff Review

County: Fairfax

Project Contacts

Contact Information: Applicant

Bahareh Ranjbar

430 Old Courthouse Rd NE

Vienna, VA 22180

P:5715958171

bahar_hi5@yahoo.com

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

Contact Information: Owner

Bahareh Ranjbar

430 Old Courthouse Rd NE

Vienna, VA 22180

P:5715958171

bahar_hi5@yahoo.com

Project Address

Project Address: 430 OLD COURT HOUSE RD NE

Parcel (PIN): Address/Parcel

- 430 OLD COURT HOUSE RD NE: 0293 10 0015

Resource Management Area: Resource Management Area

- 430 OLD COURT HOUSE RD NE: LOCATED IN RMA

Resource Protection Area : Resource Protection Area

- 430 OLD COURT HOUSE RD NE: LOCATED OUTSIDE RPA

Windover Heights Historic District: Address/Parcel

- 430 OLD COURT HOUSE RD NE: LOCATED OUTSIDE WINDOVER HEIGHTS

Suite:

Town Limits: Address/Parcel

- 430 OLD COURT HOUSE RD NE: IN TOWN OF VIENNA

Future Land Use Plan: Address/Parcel

- 430 OLD COURT HOUSE RD NE: LOW DENSITY RESIDENTIAL

Current Zoning: Address/Parcel

- 430 OLD COURT HOUSE RD NE: RS-12.5

Project Description

Project Description:

Home Daycare

Trade Name of Business (DBA): Happy Hive

Business Hours: 7:30-5:30

Type of Conditional Use Requested: Home Daycare

Number of Proposed Employees: 1

Project Narrative:

Are you amending an existing conditional use permit?: No

This is a request for zoning approval as part of the county permit and the States license for a home daycare for 12 kids



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 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)

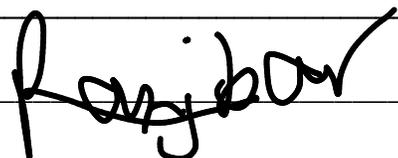
Description of permits or certificates being applied for:

at the following address: _____

Applicant Name (fill out if owner is not applicant): _____

Signature of Applicant: _____ Date: _____

Property Owner's Name: _____

Signature of Property Owner:  _____ Date: 04/26/2024