



TOWN OF
VIENNA
since 1890

Conditional Use Permit

GeoCivix, LLC

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Project Overview

#1713550

Project Title: 419A Maple Ave E - CUP - Future Innovators of Vienna LLC

Jurisdiction: Town of Vienna

Application Type: Conditional Use Permit

State: VA

Workflow: 1. Application Completeness Review

County: Fairfax

Project Contacts

Contact Information: Applicant

david dilly

Future Innovators of Vienna

419-A MAPLE AVE E

Vienna, VA 22180

P:9158613483

usmarun@hotmail.com

Contact Information: Owner

david dilly

Future Innovators of Vienna

419-A MAPLE AVE E

Vienna, VA 22180

P:9158613483

usmarun@hotmail.com

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

Project Address

Project Address: 419 MAPLE AVE E

Suite: A

Parcel (PIN): Address/Parcel

- 419 MAPLE AVE E: 0382 10 B

Town Limits: Address/Parcel

- 419 MAPLE AVE E: IN TOWN OF VIENNA

Current Zoning: Address/Parcel

- 419 MAPLE AVE E: C-1

Project Description

Project Description:

Use of the area for summer camp activities such as micro drone flying, competition robotics fields, and 3D printing.

Fairfax County Building Permit Number(s): none

Trade Name of Business (DBA): iCode

Business Hours: 8am-6pm (summer hours)

Type of Conditional Use Requested: Special Instruction - Summer STEM Camps

Number of Proposed Employees: 6

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

iCode provides children with computer skills, programming, robotics, design, 3D printing, and digital arts instruction.

Recently, there is a great interest in competitive robotics programs as well as drone programming. The landlord and iCode have reached an agreement to let this business expand the activities into an empty space immediately behind iCode.

Expanding the area will allow the children to more fully explore their programs and designs with a greater degree of flexibility.

Competition fields are 6x8 feet in size while drone flying fields are typically 20x20 feet. All can be contained indoors within the space covered in this conditional use permit.



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: David Dilly Date: April 30th 2025

Property Owner's Name: _____

Signature of Property Owner: Christian Mical Date: 5/1/25