



**TOWN OF
VIENNA**
since 1890

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

#1945127

Project Title: 438 and 440 Mill St - CrossFit Mill Street - CUP

Jurisdiction: Town of Vienna

Application Type: Conditional Use Permit

State: VA

Workflow: 2. Staff Review

County: Fairfax

Project Contacts

Contact Information: Applicant

Brett Wilson

Elite Athletic Performance (EAP), LLC

9613 Whitecedar Ct.

Vienna, VA 22181



Contact Information: Owner

Brett Wilson

Elite Athletic Performance (EAP), LLC

9613 Whitecedar Ct.

Vienna, VA 22181



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

Project Address

Project Address: 438 MILL ST NE

Suite: 438 and 440

Parcel (PIN): Address/Parcel

- 438 MILL ST NE: 0382 02 0145

Town Limits: Address/Parcel

- 438 MILL ST NE: IN TOWN OF VIENNA

Current Zoning: Address/Parcel

- 438 MILL ST NE: CM

Project Description

Project Description:

Request for a Conditional Use Permit and Certificate of Occupancy for 438 and 440 Mill Street NE.

Trade Name of Business (DBA): CrossFit Mill Street

Business Hours: 5:00AM-8:00PM

Type of Conditional Use Requested: Indoor Recreation (Fitness Facility)

Number of Proposed Employees: 14

Project Narrative:

Currently, CrossFit Mill Street occupies 432, 434, and 436 Mill Street NE and we are requesting a Conditional Use Permit and Certificate of Occupancy for 438 Mill Street NE as well as 440 Mill Street NE (future use, post 2026).

Are you amending an existing conditional use permit?: No



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: 438 and 440 Mill Street NE, Vienna, VA 22180

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

Signature of Applicant: Elite Athletic Performance, LLC Brett Wilson Date: 24 Nov 2025

Property Owner's Name: SPR-ON ASSOCIATES, LLC Tom Speirs

Signature of Property Owner: [Signature] PARTNER Date: 01/24/25