



**Town of Vienna**  
**Board of Architectural Review**  
**Exterior Improvements Application**

Application Number: \_\_\_\_\_-BAR

(Office Use Only)

Name of Project: EXTERIOR ENTRANCE CANOPY INSTALLATION Acreage: N/A

Location: 901 FOLLIN LANE SE VIENNA VIRGINIA Zoning CMP

Architect: HARRELL+COMPANY

Address: 11351 RANDOM HILLS ROAD #210 FAIRFAX VA Phone: 703-352-4141

Design Professional: T. MICHAEL HARRELL

Address: same as above Phone: \_\_\_\_\_

E-mail Address (for "Contact Person"): mike@harrellandco.com

The following is to be furnished by the applicant for review in compliance with Chapter 4 of the Code of the Town of Vienna, Virginia. All plans shall include the following applicable items:

1. **One (1) set of folded plans**, drawn to scale, noting dimensions where applicable.
2. **One (1) Color Rendering** of the drawings and/or plans.
3. **Complete Application** on reverse side of this form.
4. **Colors and Finishes:** Indicate all proposed colors, construction materials and finishes on plans and elevations. Physical samples of all materials and colors, including manufacturer names, numbers and installation details, must be provided.
5. **Photographs of Neighboring Properties:** A vicinity map and photographs of all development on immediately adjacent properties.
6. **A Site Plan**, approved in conformance with Article 25, Chapter 18 (Sections 18-250:257) of the Town Code, for any new development or structures, proposed additions, changes in external dimensions, or changes in the location of existing structures.
7. **Landscape:** Specifications on the size, type, variety and location of each plant to be used for landscaping purposes.
8. **Signage:** Proposed location of all free-standing signs with clear indication of all colors, construction materials and finishes; exterior or facade signs shall be clearly indicated on architectural elevation drawings.
9. **Electronic Copy** of application and plans submitted via email or flash drive.

**Plans will not be considered complete and eligible for a placement upon an agenda until all the information listed below has been received at least twenty-one (21) days prior to the next available Board of Architectural Review meeting.**

This following must be completed by the applicant and submitted along with all other required information and materials for review by the Board of Architectural Review in accordance with Chapter 4 of the Code of the Town of Vienna, Virginia:

**1. Describe proposed improvements (including dimensions as necessary):**

WE PROPOSE TO REMOVE THE EXISTING FABRIC CANOPY AT THE BUILDING ENTRANCE AND IN ITS PLACE INSTALL STEEL AND GLASS ENTRANCE CANOPY THAT WILL SERVE AS A PORTE COCHERE FOR THE BUILDING THAT IS UNDERGOING A FULL RENOVATION. SEE DRAWINGS

**2. Location of proposed improvements on-site (include dimensions as necessary):**

THE NEW CANOPY WILL BE LOCATED AT THE EXISTING BUILDING ENTRANCE WHICH IS LOCATED ON THE BACK SIDE OF THE BUILDING AWAY FROM THE ROAD (FOLLIN LANE)

**3. Proposed construction materials (include manufacturer, identification numbers and samples):**

ALL EXPOSED SURFACES OF THE CANOPY SHALL HAVE AN ARTICULATED METAL SKIN WITH A KYNAR 500 COATING. THE ROOF OF THE CANOPY SHALL HAVE AN A-FRAME GLASS SKYLIGHT RUNNING MOST OF THE LENGTH OF THE CANOPY

**4. List all colors and finishes (include specifications, color numbers (Pantone etc.) and provide all samples):**

THE CANOPY IS 13'-8" x 22'-0" AND IS 10'-6" ABOVE GRADE THE EXTERIOR METAL SHALL BE PAC-CLAD PAC2000R "SILVERSMITH" ALL LOGOS, NAMES AND NUMBERS SHALL BE HALO LIT AND BE BRUSHED CHROME IN COLOR.

5. Proposed landscaping (size, type and variety of each plant):

N/A

6. Listing of attachments (including drawings, photographs and plans):

- A. DESIGN BOOKLET
- B. SITE PLAN
- C. CONSTRUCTION DRAWINGS

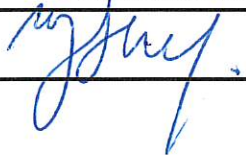
Applicant's Name: T. MICHAEL HARRELL

Company: HARRELL+COMPANY

Address: 11351 RANDOM HILLS ROAD STE 210 FAIRFAX VA 22030

Phone: 703-352-4141

E-mail: mike@harrellandco.com

Signature: 

I am the Owner or have received Owner's  
Consent for this application (Please Check)

THE TOWN OF VIENNA IS COMMITTED TO FULL COMPLIANCE WITH THE AMERICANS WITH DISABILITIES ACT STANDARDS. TRANSLATION SERVICES, ASSISTANCE OR ACCOMMODATION REQUESTS FROM PERSONS WITH DISABILITIES ARE TO BE REQUESTED NOT LESS THAN 3 WORKING DAYS BEFORE THE DAY OF THE EVENT. PLEASE CALL (703) 255-6300 (Voice) OR TTY 711.