



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

#636481

Project Title: Increase in Medical Use from 50% to 100%**Jurisdiction:** Town of Vienna**Application Type:** Site Plan (Commercial)**State:** VA**Workflow:** 3. Town Council**County:** Fairfax

Project Contacts

Contact Information: Applicant

Kim Luu-Tu
White Oak Tower Office Condominium Association
301 Maple Avenue West, 520
Vienna, VA 22180
P:703-766-2025 x101
kluutu@gmail.com

Contact Information: Owner

Kim Luu-Tu
White Oak Tower Office Condominium Association
301 Maple Avenue West, 520
Vienna, VA 22180
P:703-766-2025 x101
kluutu@gmail.com

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

Project Address

Project Address: 301 MAPLE AVE W**Parcel (PIN): Address/Parcel**

- 301 MAPLE AVE W: 0383 61 0630

Town Limits: Address/Parcel

- 301 MAPLE AVE W: IN TOWN OF VIENNA

Resource Management Area: Resource Management Area

- 301 MAPLE AVE W: LOCATED OUTSIDE RMA

Future Land Use Plan: Address/Parcel

- 301 MAPLE AVE W: MIXED-USE

Resource Protection Area : Resource Protection Area

- 301 MAPLE AVE W: LOCATED OUTSIDE RPA

Current Zoning: Address/Parcel

- 301 MAPLE AVE W: C-1A

Windover Heights Historic District: Address/Parcel

- 301 MAPLE AVE W: LOCATED OUTSIDE WINDOVER HEIGHTS

Project Description

Project Description:

WOTUOCA is requesting Town of Vienna to allow the office condominium to increase the medical use from 50% to 100%. There is no other building in the Town of Vienna that has such restrictions on medical use. The other rationale for the request are:

The existing medical practices in the building are not all open M-F. Some medical offices are closed 1-2 days during the week.

We have 2 level parking in addition to private parking in the basement. Our upper level parking deck at most, even during the busiest times, are no more than 25% utilized.

Due to the pandemic, many business owners are working remotely from home. This trend may continue due to the ease of doing

business utilizing video conferencing.

Project Data

Proposed Use: Office	Area of Site: 58804
Area of Land Disturbance: 0	Area of Existing Building Square Footage to Remain: 48323
New Building Floor Area Square Footage: 48323	Proposed Building Height: 65
Existing Tree Canopy Coverage: 5880	Proposed Tree Canopy Coverage: 5880
Number of Parcels included with Site: 1	Number of Existing Parking Spaces: 183
Number of Proposed Parking Spaces: 183	Are there any modifications of requirements being requested?: Yes
Please describe all requested modifications of requirements: WOTUOCA is requesting Town of Vienna to allow the office condominium to increase the medical use from 50% to 100%.	Is a wall waiver being requested?: No
Are there any existing easements?: No	Are there any proposed easements?: No



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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:

White Oak Tower Office Condominium Association is requesting to increase the medical use for the building to 60% from the current 50%

at the following address: 301 Maple Avenue West Vienna, VA 22180

Applicant Name (fill out if owner is not applicant): Kim Luu-Tu, President of WOTUOCA

Signature of Applicant: [Signature]

Date: 10/07/2021

Property Owner's Name: Kim Luu-Tu, President of WOTUOCA

Signature of Property Owner: [Signature]

Date: 10/07/2021