

Town of Vienna Board of Architectural Review Sign Review Application

Application Number: PF-01-18. -BAR

(Office Use Only)

Name of Project: MAGNOLIA west	Acreage:
Location: 43/ MAPLE AVE VIEWNA V	
Business Owner: THAVORN LLC.	
Address: 43/ MAPLE AVE VIENNA	VA 22/80Phone: 571-265.1891
Property Owner: MAVV LLC.	
Address: PO. BOX 59153 POTOMAC A	10 -9/53 Phone:
E-mail Address (for "Contact Person"): <u>のWNEP: SUN</u>	OLTITA@LIVE. COM
	ESIGN SOD CAMCAST, NET

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. Scaled drawings: Seven (7) copies of drawings of all proposed signs; drawn to scale; include all

- 1. **Scaled drawings:** Seven (7) copies of drawings of all proposed signs; drawn to scale; include all proposed text and images; show dimensions of sign, letters, and images; all sets are to be in color
- 2. Complete Application on reverse side of this form.
- 3. Samples of proposed colors, materials, and paint chips.
- 4. Photographs with the proposed location of any sign indicated as nearly as possible
- 5. **Site Plan:** Seven (7) **folded** copies showing the proposed location of any freestanding sign (no larger than 11x17 format)
- 6. Electronic Copy of application, plans, and drawings 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.

M:1438

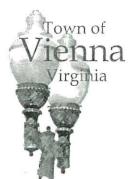
and m	ollowing must be completed by the applicant and submitted along with all other required information aterials for review by the Board of Architectural Review in accordance with Chapter 4 of the Code Town of Vienna, Virginia:				
1.	Type of sign: Façade ☑ Freestaning □ Monument □ Replacement Face Panel □ Under Canopy □ Window □ Other				
2.	Location of proposed sign(s) on-site (include dimensions as necessary):				
	ON CENTER WALL PANEL ABOVE EXISTING AWNING CANOPY				
3.	Dimensions (sign exterior and interior design elements):				
	18"×12-0" AND 4"×10'-6" ON AWNING				
4.	Colors and materials (include manufacturer, number, thickness, etc.):				
	BLACK ALUMINOM PETURNS BLACK TRIMS WHITE ACPYLIC FACE 5" THICK				
5.	Illumination details:				
	WHITE LED.				

_		
6.	informa	

			MOUNTED	ON PAINTED
WALL COLOR	- PACEWA	47		v

Applicant's Name: W. BAKIE BHAR.
Company: K&KS16N SERVICE
Address: 8219 CRYDEN WAY FORESTVILLE MI) 2074
Phone: 301-452-9216
E-mail: SAKIESIGNS @ COMCAST. net
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.



Town of Vienna Sign Permit Application

Y T	Permit Number:
	(Office Use Only)
Name of Project: MAGNOLIA	
Address: A31 MAPLE AVE VIENNA	VA 22/80 Zoning:
Contact Person: W. SAKIE BHAR	
Type of Work: New ☑ Repair □ Alter □	
□ Façade Sign: Dimensions: 1811×12-011	Total Square Feet: 18 4
☐ Freestanding Sign: Dimensions:	Total Square Feet:
□ Freestanding Sign: Dimensions:	(IN6) Total Square Feet: 3.3.4
Wording: MAGNOLIA DESSEIZT	BAR & COFFBE
Location on Building or Site: ON CENTER	WALL ABOVE AWNING
Length of Frontage (building or suite):	AND ON AWNING
Applicant's Name: W. SAKIE BHAR	
Company: K&K SIGN SERVICE	5 INC.
Address: 8219 CPYDEN WAY	PORESTVILLE, MD 20747
Phone: 301-452-9216	
E-mail: Sakiesigns @ Como	ast.het
Signature:	
I am the Owner or have received Owner's	
Consent for this Application (Please Check)	
Planning and Zoning Approval:	Date:
Master Sign Plan: BAR Approved:	

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.