



# Administrative Special Use Permit Application

Department of Planning & Zoning  
301 King Street, Room 2100, Alexandria, Virginia 22314  
Phone: 703.746.4666 | [www.alexandriava.gov/planning](http://www.alexandriava.gov/planning)

### PROPERTY LOCATION:

ZONE: *CC / commercial low*

TAX MAP REFERENCE: *043.02-09-14*

### APPLICANT'S INFORMATION:

Applicant: *Beckham Baffer*  
Address: *2711 33rd st SE  
Washington DC*  
Phone: *202-304-7111*

Business/Trade Name: *Salad Topia LLC  
French Toast LLC*

Email: *beckham.baffer123@gmail.com*

### PROPOSED USE:

- Animal Care with Overnight Accommodations
- Auto Trailer Rental or Sales
- Catering Operation
- Child and Elder Care Homes
- Day Care Center
- Health and Athletic Club
- Light Assembly, Service, and Craft
- Light Auto Repair
- Live Theater

- Massage Establishment
- Outdoor Dining (Other than King Street Outdoor Dining Area)
- Outdoor Food and Crafts Market
- Outdoor Garden Center
- Outdoor Display
- Public School Trailers
- Valet Parking
- Vehicle Parking or Storage for More Than 20 Vehicles

*✓ Restaurant with outdoor dining*

PROPERTY OWNER'S AUTHORIZATION

As the property owner, I hereby grant the applicant use of (property address), for the purposes of operating a (use) business as described in this application. I also grant permission to the City of Alexandria to visit, inspect, photograph and post placard notice on my property.

Name: Michael Hadeed

Phone: (703) 298-2372

Address: 607 Oakley Pl. Alexandria, VA

Email: Michael@hadeedlaw.com

Signature: [Handwritten Signature]

Date: 9/20/24

1. The applicant is the (check one):

Owner

Contract Purchaser Lessee or

Other: Lessee of property

of the subject property.

State the name, address and percent of ownership of any person or entity owning an interest in the applicant or owner, unless the entity is a corporation or partnership, in which case identify each owner and the percent of ownership.

Beckham Baffer  
50%  
2711 33rd St SE  
Washington DC 20020

Justin Wallace  
50%  
1506 Mount Vernon Ave  
Alexandria, VA 22301

If property owner or applicant is being represented by an authorized agent such as an attorney, realtor, or other person for which there is some form of compensation, does this agent or the business in which the agent is employed have a business license to operate in the City of Alexandria, Virginia?

Yes. Provide proof of current City business license

No. The agent shall obtain a business license prior to filing application, if required by the City Code.

**USE CHARACTERISTICS**

2. Please give a brief statement describing the use:

• Food trailer Being parked on private driveway. In order to serve clients on the private patio. We will operate ~~for~~ from kitchen.

3. Please describe the proposed hours of operation:

Days Hours  
Daily

In the future it will also be seating for Salad Topia LLC.

Or give hours for each day of the week

Monday closed  
Tuesday 8-2 pm  
Wednesday 8-2 pm  
Thursday 8-2 pm  
Friday 8-2 pm  
Saturday 8-3 pm  
Sunday 8-3 pm

4. Please describe the capacity of the proposed use:

A. How many patrons, clients, pupils and other such users do you expect? Specify time period (i.e., day, hour, or shift).

80 on weekends & 60 on week days per day

B. How many employees, staff and other personnel do you expect? Specify time period (i.e., day, hour, or shift).

2

5. A. How many parking spaces of each type are provided for the proposed use:

Standard and compact spaces ~~1~~ 3

Handicapped accessible spaces 0

Other

B. Please give the number of:

Parking spaces on-site 1

Parking spaces off-site 0

If the required parking will be located off-site, where will it be located?

N/A

6. Please provide information regarding loading and unloading for the use:

A. How many loading spaces are available for the use?

1

B. Where are off-street loading spaces located?

N/A

C. During what hours of the day do you expect loading/unloading operations to occur?

Noon - 2 pm

D. How frequently are loading/unloading operations expected to occur per day or per week?

2

7. If any hazardous materials or organic compounds (for example paint, ink, lacquer thinner, or cleaning or degreasing solvent), as defined by the state or federal government, be handled, stored, or generated on the property, provide the name, monthly quantity, and specific disposal method below: We don't plan to use such chemicals

8. What is the square footage the use will be occupying?

square feet 45 ft<sup>2</sup>

**APPLICANT'S SIGNATURE**

Please read and initial each statement:

- THE UNDERSIGNED, hereby applies for a Special Use Permit in accordance with the provisions of Article XI, Section 11-500 of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.
- THE UNDERSIGNED, hereby attests that all of the information herein provided and specifically including all surveys, drawings, etc., required to be furnished by the applicant are true, correct and accurate to the best of their knowledge and belief. The applicant is hereby notified that any written materials, drawings or illustrations submitted in support of this application and any specific oral representations made to the Director of Planning and Zoning on this application will be binding on the applicant unless those materials or representations are clearly stated to be non-binding or illustrative of general plans and intentions, subject to substantial revision, pursuant to Article XI, Section 11-207(A)(10), of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.
- THE UNDERSIGNED, having obtained permission from the property owner, hereby grants permission to the City of Alexandria to post placard notice on the property for which this application is requested, pursuant to Article IV, Section 4-1404 of the 1992 Zoning Ordinance of the City of Alexandria, Virginia.
- THE UNDERSIGNED, having obtained permission from the property owner, hereby grants permission to the City of Alexandria staff to visit, inspect, and photograph the building premises, land etc., connected with the application.

**Print Name of Applicant or Representative**

Signature *Becky Bepko*

Date *09/22/2024*


If this application is being filed by someone other than the business owner (such as an agent or attorney), please provide the information below:

Representative's Address:

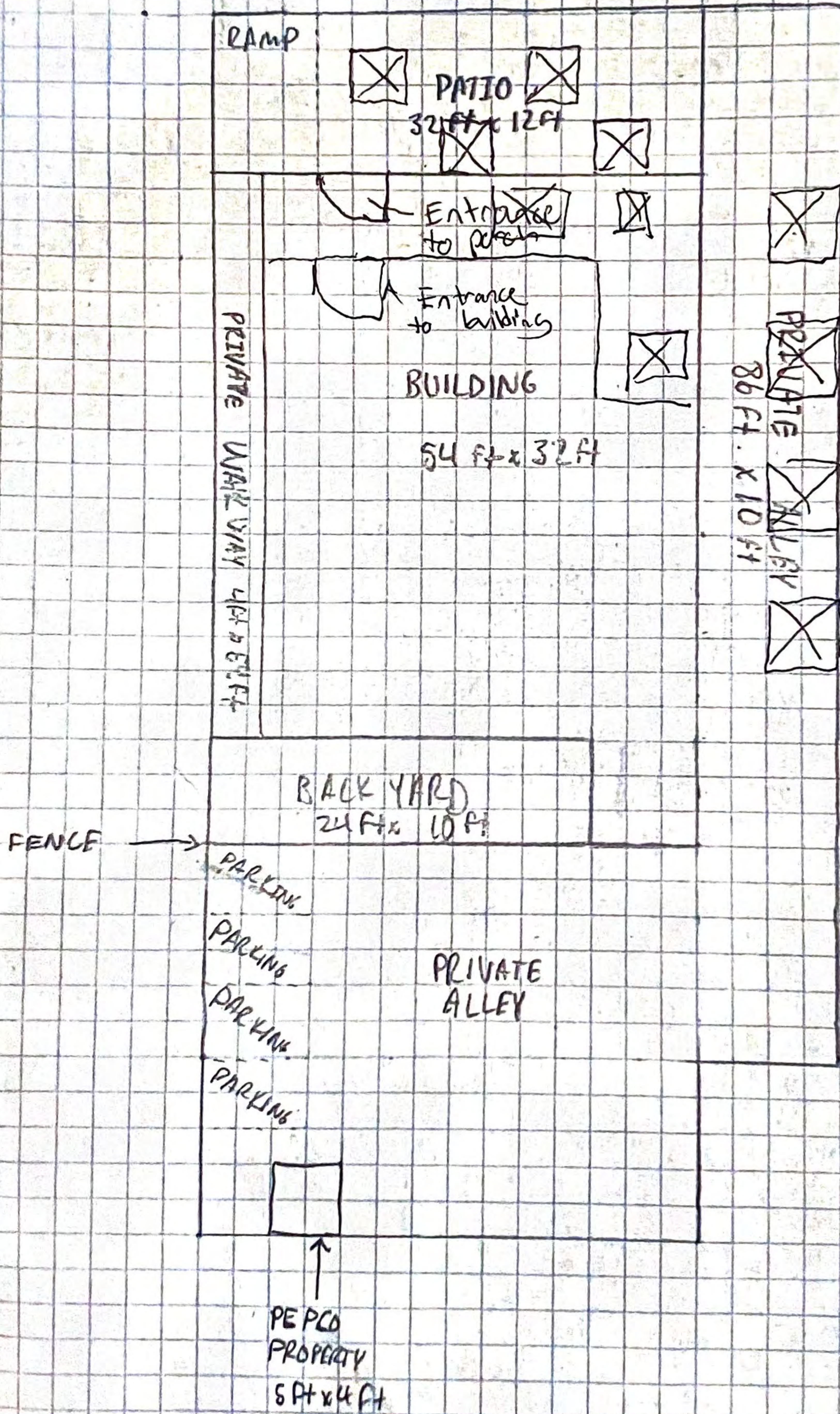
Phone:

Email:

Fax:

KEY  
 8ft = 3 cubes  
 8ft<sup>2</sup> = 9 cubes<sup>2</sup>  
 Table = 

SITE MAP 1506 MT VERNON AVE





# SUPPLEMENTAL APPLICATION

## RESTAURANT

All applicants requesting a Special Use Permit for a restaurant shall complete the following section.

1. How many seats are proposed?

Indoors: 0

2. Will the restaurant offer any of the following?

Alcoholic beverages

On-premises

Yes

No

Off-premises

Yes

No

3. The restaurant will offer the following service (check items that apply):

table service

bar

carry-out

delivery

4. If delivery service is proposed, how many vehicles do you anticipate? N/A

Will delivery drivers use their own vehicles?

Yes

No

Where will delivery vehicles be parked when not in use?  
\_\_\_\_\_

**Parking impacts.** Please answer the following:

1. What percent of patron parking can be accommodated off-street? (check one)  
 100%  
 75-99%  
 50-74%  
 1-49%  
 No parking can be accommodated off-street
  
2. What percentage of employees who drive can be accommodated off the street at least in the evenings and on weekends? (check one)  
 All  
 75-99%  
 50-74%  
 1-49%  
 None
  
3. What is the estimated peak evening impact upon neighborhoods? (check one)  
 No parking impact predicted  
 Less than 20 additional cars in neighborhood  
 20-40 additional cars  
 More than 40 additional cars

**Litter plan.** The applicant for a restaurant featuring carry-out service for immediate consumption must submit a plan which indicates those steps it will take to eliminate litter generated by sales in that restaurant.

**Alcohol Consumption and Late Night Hours.** Please fill in the following information.

1. Maximum number of patrons shall be determined by adding the following:  
+ 0 Maximum number of patron dining seats  
+ 0 Maximum number of patron bar seats  
+ 20 Maximum number of standing patrons  
= 20 Maximum number of patrons
  
2. \_\_\_\_\_ Maximum number of employees by hour at any one time
  
3. Hours of operation. Closing time means when the restaurant is empty of patrons. (check one)  
 Closing by 8:00 PM  
 Closing after 8:00 PM but by 10:00 PM  
 Closing after 10:00 PM but by Midnight  
 Closing after Midnight
  
4. Alcohol Consumption (check one)  
 High ratio of alcohol to food  
 Balance between alcohol and food  
 Low ratio of alcohol to food





**Department of Planning & Zoning**  
**Administrative Special Use Permit New Use**  
**Outdoor Dining Supplemental**

**WORKSHEET – Answer each question. Attach a separate sheet of paper if necessary.**

Describe the outdoor dining arrangement. What type of food service establishment is this associated with? There will be tables and chairs placed on the private patio and porch. It is associated with the French Toast Trailer parked in the private driveway

**HOURS**

What are the proposed hours for the outdoor dining?

Monday : closed  
Tuesday - Friday : 8 am - 2 pm  
Saturday - Sunday : 8 am - 3 pm

**LOCATION ON PRIVATE PROPERTY**



Outdoor dining, including seats, planters, wait stations and barriers, must be located on private property unless authorized by an encroachment ordinance.

Will the outdoor dining be located only on private property? What is the square footage of the outdoor dining area? Everything is on private property.

32 ft x 12 ft

Submit a drawing indicating the layout for tables, seats, planters, wait stations and barriers.

**NUMBER OF SEATS**

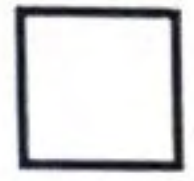


Only 20 seats may be located at outdoor tables in front of the restaurant.

How many seats will be included in the outdoor seating?

16

**ALCOHOL SERVICE**

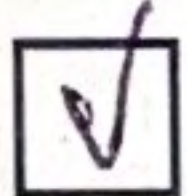


Alcohol service, to the extent allowed for indoor dining, is permitted; no off-premise alcohol sales are permitted.

Is on-premise alcohol service proposed?

NO

**OUTDOOR DINING PLAN**



**Please submit a detailed plan with your application**

A plan for layout of the outdoor dining must be submitted for review and approval by the director. The business must maintain compliance with the approved layout. Any changes to the approved layout may require further review by staff.