



COUNTY OF FAIRFAX
Department of Planning and Zoning
Zoning Evaluation Division
 12055 Government Center Parkway, Suite 801
 Fairfax, VA 22035 (703) 324-1290, TTY 711
www.fairfaxcounty.gov/dpz/zoning/applications

APPLICATION No: SP 2014-LE-005
 (Staff will assign)

RECEIVED
 Department of Planning & Zoning

SEP 28 2013

APPLICATION FOR A SPECIAL PERMIT Zoning Evaluation Division
 (PLEASE TYPE or PRINT IN BLACK INK)

APPLICANT	NAME MELVA C MARTINEZ & MELVA'S LITTLE ANGELS DAYCARE LLC.
	MAILING ADDRESS 6318 ROSE HILL DR.
	PHONE HOME (703) 313-7428 WORK (703) 313-7428
	PHONE MOBILE (571) 220-0201 EMAIL MELVA.C.MARTINEZ@HOTMAIL.COM
PROPERTY INFORMATION	PROPERTY ADDRESS 6318 ROSE HILL DR ALEXANDRIA, VA 22310
	TAX MAP NO. 082314D0004 SIZE (ACRES/SQ FT) 14,436 SF
	ZONING DISTRICT R3 RESIDENTIAL 3DU/AC MAGISTERIAL DISTRICT LEE
	PROPOSED ZONING IF CONCURRENT WITH REZONING APPLICATION: N/A
SPECIAL PERMIT REQUEST INFORMATION	ZONING ORDINANCE SECTION 8-305
	PROPOSED USE HOME CHILD CARE FACILITY
AGENT/CONTACT INFORMATION	NAME SAME AS ABOVE.
	MAILING ADDRESS SAME AS ABOVE
	PHONE HOME () SAME AS ABOVE WORK () SAME AS ABOVE
	PHONE MOBILE () SAME AS ABOVE EMAIL SAME AS ABOVE
MAILING	Send all correspondence to (check one): <input checked="" type="checkbox"/> Applicant -or- <input type="checkbox"/> Agent/Contact

The name(s) and addresses of owner(s) of record shall be provided on the affidavit form attached and made part of this application. The undersigned has the power to authorize and does hereby authorize Fairfax County staff representatives on official business to enter the subject property as necessary to process the application.

MELVA C MARTINEZ
 TYPE/PRINT NAME OF APPLICANT/AGENT

Melva Martinez
 SIGNATURE OF APPLICANT/AGENT

DO NOT WRITE IN THIS SPACE

Date Application accepted: 1/28/14 Application Fee Paid: \$ 435.00