



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: SP2014-PR-195
 (Staff will assign)

RECEIVED
 Department of Planning & Zoning

AUG 26 2014

Zoning Evaluation Division

APPLICATION FOR A SPECIAL PERMIT

(PLEASE TYPE or PRINT IN BLACK INK)

APPLICANT	NAME Anju Upreti ANJU DAY CARE INC.
	MAILING ADDRESS 3043 Braxton Wood Ct, Fairfax VA 22031
	PHONE HOME (703) 942-8265 WORK (703) 942-8265
	PHONE MOBILE (703) 577-5287
PROPERTY INFORMATION	PROPERTY ADDRESS 3043 Braxton Wood Ct, Fairfax VA 22031
	TAX MAP NO. 48-4((19))35 SIZE (ACRES/SQ FT) 1300 Sq.Ft
	ZONING DISTRICT R-12 HC <input checked="" type="radio"/> MAGISTERIAL DISTRICT Providence <input checked="" type="radio"/>
	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 N/A
	MAILING ADDRESS N/A
	PHONE HOME () WORK ()
	PHONE MOBILE ()
MAILING	Send all correspondence to (check one): <input checked="" type="checkbox"/> Applicant -or- <input type="checkbox"/> Agent/Contact
<p>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.</p> <p>ANJU UPRETI (Applicant) <u>Anju Upreti</u> TYPE/PRINT NAME OF APPLICANT/AGENT SIGNATURE OF APPLICANT/AGENT</p>	

DO NOT WRITE IN THIS SPACE

Deborah Lesko Leuberton

SP 2014-0180

Date Application accepted: September 5, 2014

Application Fee Paid: \$ 435.00