ATTACHMENT 1

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-053
(Staff to assign)

RECEIVED
Department of Planning & Zoning
JAN 24 2014
Zoning Evaluation Division

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

DBA "Gude's Home Child Care LLC"

APPLICANT	**NAME** Juana Gudelia Bernardez
	MAILING ADDRESS 3502 Elmwood Dr. Alexandria Va. 22303
	PHONE HOME (703) 3298658 **WORK** ( ) SAME as Home
	PHONE MOBILE (571) 299-5144 **EMAIL** gudebernardez@yahoo.com
PROPERTY INFORMATION	**PROPERTY ADDRESS** 3502 Elmwood Dr. Alexandria Va. 22303
	TAX MAP NO. 0822130071 **SIZE (ACRES/SQ FT)** 1,200 SQ FT
	ZONING DISTRICT: R-4 (Residential 4 DU/AC) **MAGISTERIAL DISTRICT** Lee Dist #1A
	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 applicant
	MAILING ADDRESS
	PHONE HOME (703) 3298658 **WORK** (703) 329-8658
	PHONE MOBILE (571) 299-5144 **EMAIL** gudebernardez@yahoo.com
MAILING	**Send all correspondence to (check one):** ☑ **Applicant** –or- ☐ **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.

Juana G. Bernardez
TYPE/PRINT NAME OF APPLICANT/AGENT

SIGNATURE OF APPLICANT/AGENT

Deborah Lecho Lubitar

SP 2014-0028

DO NOT WRITE IN THIS SPACE

4/28/14
LDS

Date Application accepted: 4/28/14 Application Fee Paid: $ 435.00