



TOWN OF CLIFTON, VIRGINIA

Use Permit Application

Property Address: 12642 Chapel Road		Date: [Month / Year] April 18, 2022		
1. Type of Permit:	<input type="checkbox"/> Construction	<input type="checkbox"/> Commercial	<input type="checkbox"/> Residential	<input type="checkbox"/> Home Business (Code 9-19.c1)
	<input type="checkbox"/> Preliminary Site Plans Attached	<input checked="" type="checkbox"/> Office <input type="checkbox"/> Retail		
	<input type="checkbox"/> Special Use	<input type="checkbox"/> Subdivision (Code Chapter 10)	<input type="checkbox"/> Boundary Line Adjustment/Lot Consolidation (Code 10-57 to Code 10-59)	<input type="checkbox"/> Public Use
	<input type="checkbox"/> Restaurant			
	<input type="checkbox"/> Bed & Breakfast			
	<input type="checkbox"/> Multi-Family			
2. Name of Applicant:	Summit Real Estate LLC, t/a Summit Real Estate			
Mailing Address:	12642 Chapel Road Clifton VA 20124			
Phone:	703-830-2600 Ext #205			
Email Address:	jfullerton@fullertonlaw.com			
3. Name of Property Owner (if different):	Clifton Professional Offices, LLC			
Mailing Address:	12642 Chapel Road Clifton, VA 20124			
4. Name of Business / Organization:	Summit Real Estate LLC, t/a Summit Real Estate			
5. Owner of Business / Organization:	James D. Fullerton			
6. Tax Map Number:	0754 02 0022			
7. Attach a plat or plan drawn to scale showing the proposed construction, certified by an engineer, surveyor, architect, authorized to practice as such by VA, together with a surveyed plat of the property indicating all building and structure setbacks and height.	<input checked="" type="checkbox"/> Plat Attached (Construction completed in 2009)			

8. Attach Floor Plan to Scale (non-residential & home business): Note: All space used by Summit Real Estate already permitted to be used by Fullerton & Knowles, PC <input checked="" type="checkbox"/> Floor Plan Attached				
9. Zoning District of Premises:	<input type="checkbox"/> Residential (Code 9-19)	<input checked="" type="checkbox"/> Commercial (Code 9-21)	<input type="checkbox"/> Agricultural (Code 9-20)	<input type="checkbox"/> Industrial (Code 9-22)
	<input type="checkbox"/> Church, Park, Community Building			
	<input type="checkbox"/> Community Open Space & Recreation (COSR) (Code 9-23A)		<input type="checkbox"/> Low Impact Commercial (Code 9-23B)	
10. Describe Purpose of Application: Record Summit Real Estate as another entity using space permitted to be used by Fullerton & Knowles, PC, really just James D. Fullerton's Office 3 upstairs and occasionally the reception area. James D. Fullerton is a licensed attorney and licensed real estate broker that practices primarily as a lawyer but occasionally as a broker				
10. If Commercial, Home Business, Agricultural or Industrial: Commercial				
11. Describe Operation: Part time Real Estate Brokerage Office				
11.a. If Non-Residential - Office Use: <u>0</u> sf SF or Retail/Restaurant Use: _____ SF				
11.b. Days & Hours of Operation (include special events): Occasional and sporadic				
11.c. Number of Employees on Site at any One Time: <u>0</u>				
11.d. Number of Seats (Restaurant/Church): Total: _____. If applicable, provide number of seats located Inside: _____ and; Outside: _____				
11.e. Gross Floor Area (GFA) of Building or /Premises: _____ SF (Code 9-13) Net Gross Floor Area if more than one use in building: <u>3732</u> SF If applicable, GFA devoted to carry-out service within restaurant: _____ SF				
11.f. Number of Off-street Parking Spaces Required: 17 (Code 9-13)				
11.g. Number of Off-street Parking Spaces Provided* (attach parking plan to scale with dimensions identifying existing and proposed parking spaces): _____				
11.h. Gross Floor Area of Dwelling (Home Business Only): _____ SF				
12. Application Fee Enclosed: (Fee schedule in Filing Instructions) \$ <u>75</u>				

*PLEASE INCLUDE A PARKING TABULATION FORM FOR BUILDINGS THAT HAVE MORE THAN ONE USER IN THE BUILDING.

We hereby give James D. Fullerton the right to speak for us at any Town Planning Commission Meeting or Town Council meeting in connection with this application.

Is the applicant or owner a member of a homeowners association (HOA)? Yes No If yes, please obtain the approval of the HOA prior to submission of the application.

HOA REPRESENTATIVE (NAME/SIGNATURE) _____ DATE OF HOA APPROVAL: _____

The undersigned hereby applies for a Use Permit pursuant to Article 2, Section 9-10 of the Zoning Ordinance of the Code of Town of Clifton, Virginia.

APPLICANT'S SIGNATURE: _____ DATE: _____
Clifton Professional Offices, LLC

PROPERTY OWNER SIGNATURE: _____ DATE: _____
by James D. Fullerton, Managing Member

FOR TOWN USE ONLY

RECEIPT DATE: _____ DATE APPLICATION ACCEPTED: _____

APPLICATION FEE PAID: \$ _____

APPROVED DISAPPROVED

PLANNING COMMISSION: _____
SIGNATURE PRINT

CONDITIONS: _____

APPROVED DISAPPROVED

TOWN COUNCIL: _____
SIGNATURE PRINT

CONDITIONS: _____

