

# CONDITIONAL USE PERMIT

## APPLICATION



AUGUST 2019

### Stafford County Department of Planning & Zoning

1300 Courthouse Road  
P.O. Box 339  
Stafford, VA 22555-0339

Phone: 540-658-8668

Fax: 540-658-6824

[www.staffordcountyva.gov](http://www.staffordcountyva.gov)

## NOTICE

Stafford County treats all applications and applicants equally. The County does not discriminate against religion, or on the basis of race, sex, age, national origin, or disability, in its planning, permitting, utilities, and land use processes.

Under the laws of the United States and the Commonwealth of Virginia, no government may discriminate against any religion or on the basis of race, sex, age, national origin, or disability, in its planning, permitting, utilities, and land use processes.

Under the Religious Land Use and Institutionalized Persons Act (“RLUIPA”), no government may apply its zoning or land use laws, or its policies and procedures in a manner that unjustifiably imposes a substantial burden on the religious exercise of a person, assembly, or institution.

RLUIPA also provides that no government may apply its zoning or land use laws in a manner that treats a religious assembly or institution on unequal terms with a non-religious institution or assembly.

Finally, RLUIPA provides that no government may impose or implement a land use regulation in a manner that discriminates against a religious assembly or institution.

Stafford County does not discriminate in its planning, permitting, utilities, and land use processes, practices, and policies. Stafford County treats all applications and applicants equally.

## **Background and Process Information**

Conditional uses are uses which are generally compatible with the other land uses permitted in the zoning district but require individual review for their intensity, location, design and configuration. Conditions are imposed by the County in order to ensure the appropriateness of the use at a particular location.

Conditional Use Permits may be approved upon a finding by the Board of Supervisors that the use will not be detrimental to the character and development of the adjacent land and will be in harmony with the purpose and intent of the zoning ordinance. Applications for conditional use permits must be submitted to the Department of Planning & Zoning.

Each application for a Conditional Use Permit is forwarded to the Planning Commission for consideration. The Planning Commission will hold a public hearing on the application.

The applicant is required to attend this public hearing. After the public hearing, the Planning Commission forwards a recommendation to the Board of Supervisors.

The Board of Supervisors will hold a public hearing on the application. The applicant is required to attend the public hearing. The Board may approved or deny the request for a permit. Should the Board approve the permit, they may designate conditions which, in its opinion, will mitigate the impacts of the requested conditional use.

### **Conditions may be established to:**

1. Abate or restrict noise, smoke, dust or other elements that may affect surrounding properties.
2. Provide for adequate parking, ingress and egress to public streets and roads.
3. Provide adjoining property with buffers or screening to mitigate visual and/or noise impacts.
4. Establish setback, side or rear yard requirements necessary for orderly expansion and to prevent traffic congestion.

### **Amendments to Approved Conditional Use Permit Conditions:**

Any previous approved conditional use permit may be revised by the Board of Supervisors following a public hearing. Minor Amendments shall be allowed subject to the following requirements:

1. No more than two permit conditions can be changed at the time of request
2. Changes do not materially affect site layout

Conditional Use Permit Amendments are subject to the standard Conditional Use Permit fees. Minor Amendments are subject to the Minor Amendment fees in Section 2 of the Application Review Fees Calculation.

## **Conditional Use Permit Application Instructions**

1. The applicant must meet with a Planner prior to submitting an application. A preliminary conference regarding the application may be scheduled with a Planner.
2. Fill-out, sign and date the application form. If the applicant is not the property owner, attach a notarized letter of consent from the property owner authorizing the applicant to act as the owner's agent for the application.
3. The applicant must provide three copies of a boundary survey and a metes and bounds description of the land for which the Conditional Use Permit would apply.
4. The applicant must provide the names and addresses of all adjacent property owners, including those immediately across the road(s) from the property. This list is used for the notification to the adjacent owners of the public hearing.
5. The applicant must provide a General Development Plan (GDP) drawn to standards in Article 13 of the Zoning Ordinance.
6. If available, it is recommended that the applicant(s) include architectural renderings that show building materials, building heights, site design amenities, etc. Staff may ask this to be submitted by the applicant(s) on a case-by-case-basis.
7. The applicant must submit impact statements with the application. Impact studies must address traffic volumes, public utility capacities, noise, dust and smoke emissions. A Transportation Impact Analysis (TIA) is required for all projects that meet the following criteria:
  - generate 150 or more vehicle trips per day above the existing use, and
  - the site would meet the VDOT requirements for TIAs under 24 VAC 30-155 or Stafford County Rezoning TIA requirements.Proffers or conditions which limit the vehicle trips per day may be taken into consideration when calculating the maximum development. The TIA shall be developed in accordance with the guidelines established in 24 VAC 30-155.
8. Applications are due the third Friday of any month. Public hearings are required by the Planning Commission and Board of Supervisors. Public hearing dates will be determined based on application filing date, date application is deemed complete, and available meeting dates.

## Application Submittal Checklist

- 
- Completed **"Project Information & Primary Contacts"** form (Page 7)
  - Signed **"Statements of Understanding"** from the owner(s) and applicant (Page 8)
  - Signed and Notarized **Owner's Consent Statement** (if applicant/agent is not the owner)
  - Completed **"General Information"** sheet (Page 9)
  - Completed **"Review Fee Calculation"** sheet and appropriate **Fees** payable to "County of Stafford" (Page 10)
  - Completed **"List of Adjoining Property Owners"** (Pages 12 & 13)
  - Completed **"Application Affidavit"** (Pages 14 – 17)
  - Completed **"Checklist for Generalized Development Plans"** (Pages 18 & 19)
  - Completed **"Transportation Impact Analysis Determination Form"** (Page 20)
  - Proof that **Real Estate Taxes** have been paid
  - Complete **Legal Description** of the area to be reclassified (Acreage must match Boundary Survey Plat)
  - Completed **Impact Statement**
  - Completed **Transportation Impact Analysis (TIA)**, if required (Five (5) paper copies with electronic copies or ftp site)

---

### PLATS AND PLANS

- Boundary Survey Plat** of area subject to rezoning (with 3 copies at 8½" x 11" size)
- Generalized Development Plan** (12 full-size copies at 24" x 36" size)

\* See **"Checklist for Generalized Development Plans"** (Pages 18 & 19)

<p>RECEIVED</p> <p>DATE: _____ INITIALS _____</p>	<p>OFFICIALLY SUBMITTED</p> <p>DATE: _____ INITIALS _____</p>
---	---

## **Optional Application Materials**

Although not required, the following additional materials are requested to be included with the initial application submission, if available. These items are often requested during the review process. Providing the information in advance can assist in accelerating the review:

1. Site Illustrations or Building Elevations
2. Electronic Version of generalized development plans, boundary survey, and any illustrations (a pdf on a CD, DVD, sent via email, or through ftp site is acceptable)

## Project Information & Primary Contacts

<u>PROJECT INFORMATION</u>	<u>PROJECT #</u> _____
Belmont Park CUP	
PROJECT NAME	SECTION
See Attached List	35.11 (20.92 associated with this CUP)
ADDRESS (IF AVAILABLE)	TOTAL SITE ACREAGE
See Attached List	R-1 & M-1 (proposed rezoning to B-2)
TAX MAP /PARCEL(S)	ZONING DISTRICT
Along Warrenton Road (Route 17) near intersection with Falls Run Drive and Powell Lane	
LOCATION OF PROJECT	

<u>APPLICANT/AGENT</u> (Provide attachment if Applicant and Agent differ)	Primary Contact Person <input checked="" type="checkbox"/>
Charles W. Payne, Jr. (Agent)	Hirschler Fleischer
NAME	COMPANY
725 Jackson Street, Suite 200	Fredericksburg VA 22401
ADDRESS	CITY STATE ZIP
540-604-2108	540-604-2101
PHONE NUMBER	FAX NUMBER
	EMAIL ADDRESS
	cpayne@hirschlerlaw.com

<u>OWNER</u> (Provide attachments if multiple owners)	Primary Contact Person <input type="checkbox"/>
See attached list	
NAME	COMPANY
ADDRESS	CITY STATE ZIP
PHONE NUMBER	FAX NUMBER
	EMAIL ADDRESS

<u>PROFESSIONAL</u> (Engineer, Surveyor, etc.)	Primary Contact Person <input type="checkbox"/>
Dave Anderson	Timmons Group
NAME	COMPANY
1001 Boulders Parkway, Suite 300	Richmond VA 23225
ADDRESS	CITY STATE ZIP
804-200-6398	804-560-1016
PHONE NUMBER	FAX NUMBER
	EMAIL ADDRESS
	Dave.Anderson@timmons.com

## Project Information & Primary Contacts

<b><u>PROJECT INFORMATION</u></b>	<b><u>PROJECT #</u></b> _____
Belmont Park CUP _____	_____
PROJECT NAME	SECTION
_____	_____
ADDRESS (IF AVAILABLE)	TOTAL SITE ACREAGE
_____	_____
TAX MAP / PARCEL(S)	ZONING DISTRICT
_____	_____
LOCATION OF PROJECT	
_____	

<b><u>APPLICANT/AGENT</u></b> (Provide attachment if Applicant and Agent differ)	Primary Contact Person <input type="checkbox"/>
Kevin Sills (Applicant) _____	Belmont Park LLC _____
NAME	COMPANY
9161 Liberia Ave, Ste 201 _____	Manassas VA 20110 _____
ADDRESS	CITY STATE ZIP
703-928-5113 _____	kms086@aol.com _____
PHONE NUMBER	FAX NUMBER EMAIL ADDRESS
_____	_____

<b><u>OWNER</u></b> (Provide attachments if multiple owners)	Primary Contact Person <input type="checkbox"/>
_____ _____	_____ _____
NAME	COMPANY
_____ _____	_____ _____
ADDRESS	CITY STATE ZIP
_____ _____	_____ _____
PHONE NUMBER	FAX NUMBER EMAIL ADDRESS
_____	_____

<b><u>PROFESSIONAL</u></b> (Engineer, Surveyor, etc.)	Primary Contact Person <input type="checkbox"/>
_____ _____	_____ _____
NAME	COMPANY
_____ _____	_____ _____
ADDRESS	CITY STATE ZIP
_____ _____	_____ _____
PHONE NUMBER	FAX NUMBER EMAIL ADDRESS
_____	_____



## CUP Project Parcels Belmont Park

Parcel Letter *Corresponds with GDP*	Owner	Tax Map Number	Partial Parcel	Acreage	Current Zoning	Street Address
R	Alpamayo Corp.	44-124	Yes	8.99	R-1	675 Warrenton Road
T	Alpamayo Corp.	44-124A	No	0.42	R-1	N/A
S	Alpamayo Corp.	44-125	No	0.42	R-1	681 Warrenton Road
O	Alpamayo Corp.	44-129	Yes	0.32	R-1	665 Warrenton Road
P	Alpamayo Corp.	44-129A	No	0.78	R-1	N/A
M	Alpamayo Corp.	44-130	Yes	0.28	R-1	661 Warrenton Road
N	Alpamayo Corp.	44-130A	Yes	0.69	R-1	N/A
Q	Alpamayo Corp.	44-131	Yes	7.99	R-1	669 Warrenton Road
L	Golden Investment Empire Corporation	44-132	Yes	8.98	R-1	655 Warrenton Road
I	Commonwealth of Virginia	44-135	No	3.00	R-1	N/A
CC	Mark Bredesen & Saeid Asgharinia	44-123A	No	0.99	R-1	691 Warrenton Road
FF	Saeid Asgharinia & Mark Bredesen	44-123E	No	1.48	M-1	697 Warrenton Road
DD	Sam Yadzani	44-123B	No	0.31	M-1	701 Warrenton Road
EE	Sam Yadzani	44-123D	No	0.46	M-1	N/A

**Statements of Understanding**

I, as owner/co-owner of the property subject to this application, do hereby certify that I have read and understand the requirements for the submission of a conditional use permit as provided under the Stafford County Code, and further, that this submittal is in compliance with the requirements and applicable provisions of the Stafford County Zoning Ordinance, Chapter 28 of the Stafford County Code.

ALPAMAYO INVESTMENT CORP.

By: _____	Julia Sanchez, President	_____
Signature of Owner/Co Owner	Printed Name	Date
GOLDEN INVESTMENT EMPIRE CORPORATION		

By: _____	Miriam Sanchez, President	_____
Signature of Owner/Co Owner	Printed Name	Date

_____	_____	_____
Signature of Owner/Co Owner	Printed Name	Date

I, as applicant or agent for the owner(s) of the property subject to this application, do hereby certify that I have read and understand the requirements for the submission of a conditional use permit as provided under the Stafford County Code, and further, that this submittal is in compliance with the requirements and applicable provisions of the Stafford County Zoning Ordinance, Chapter 28 of the Stafford County Code.

Mid-Atlantic Real Estate Investments, Inc.

By: _____	Kevin Sills, President	_____
Signature of Applicant/Agent	Printed Name	Date

\* Additional sheets may be used, if necessary.

## Statements of Understanding

I, as owner/co-owner of the property subject to this application, do hereby certify that I have read and understand the requirements for the submission of a conditional use permit as provided under the Stafford County Code, and further, that this submittal is in compliance with the requirements and applicable provisions of the Stafford County Zoning Ordinance, Chapter 28 of the Stafford County Code.

<hr/>	Sam Yadzani	
Signature of Owner/Co Owner	Printed Name	Date
 	 Saeid ASGHARINIA	
<hr/>	<hr/>	<hr/>
Signature of Owner/Co Owner	Printed Name	Date
 	 MARK BREDESEN	
<hr/>	<hr/>	<hr/>
Signature of Owner/Co Owner	Printed Name	Date

I, as applicant or agent for the owner(s) of the property subject to this application, do hereby certify that I have read and understand the requirements for the submission of a conditional use permit as provided under the Stafford County Code, and further, that this submittal is in compliance with the requirements and applicable provisions of the Stafford County Zoning Ordinance, Chapter 28 of the Stafford County Code.

<hr/>	<hr/>	<hr/>
Signature of Applicant/Agent	Printed Name	Date

\* Additional sheets may be used, if necessary.

**STAFFORD COUNTY REZONING APPLICATION  
OWNER'S NOTARIZED CONSENT**

I, the undersigned, do hereby authorize the applicant, MID-ATLANTIC REAL ESTATE INVESTMENTS, INC., or its successors and assigns (collectively "Applicant"), to file on my behalf all rezoning, conditional use permit, special use permit or other land use or permitting applications necessary to rezone and develop Tax Map Parcel 44-123B & 44-123D from M-1 to B-2 or other zoning designation as Applicant may reasonably determine, and further authorize Applicant, at its sole cost and expense, to procure, file and provide all necessary studies, application content regarding said property, any proffer statements, plans and other application materials, and to undertake all other actions necessary to obtain approval for all of the same.


**OWNER ACKNOWLEDGMENT & CONSENT**

*Left*  
  
SAM YAZDANI  
*Hassan*

COMMONWEALTH OF VIRGINIA,  
CITY/COUNTY OF Spotsylvania, to wit:

The foregoing instrument was acknowledged before me this 24<sup>th</sup> day of February  
2019, by Sam Yazdani.

*20*  
*10*

  
\_\_\_\_\_  
Notary Public

My Commission expires: 10-31-21  
Notary Registration number: 247015



**STAFFORD COUNTY REZONING APPLICATION  
OWNER'S NOTARIZED CONSENT**

I, the undersigned, do hereby authorize the applicant, MID-ATLANTIC REAL ESTATE INVESTMENTS, INC., or its successors and assigns (collectively "Applicant"), to file on my behalf all rezoning, conditional use permit, special use permit or other land use or permitting applications necessary to rezone and develop Tax Map Parcel 44-123A & 44-123E from R-1 and M-1 to B-2 or other zoning designation as Applicant may reasonably determine, and further authorize Applicant, at its sole cost and expense, to procure, file and provide all necessary studies, application content regarding said property, any proffer statements, plans and other application materials, and to undertake all other actions necessary to obtain approval for all of the same.

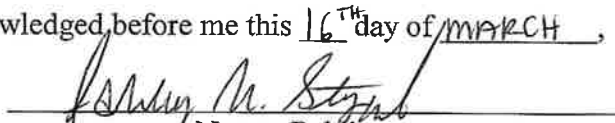
**OWNER ACKNOWLEDGMENT & CONSENT**

\_\_\_\_\_  
MARK BREDESEN

  
\_\_\_\_\_  
SAEID ASGHARINIA

COMMONWEALTH OF VIRGINIA,  
CITY/COUNTY OF PRINCE WILLIAM, to wit:

The foregoing instrument was acknowledged before me this 16<sup>TH</sup> day of MARCH, 2019, by Mark Bredesen.

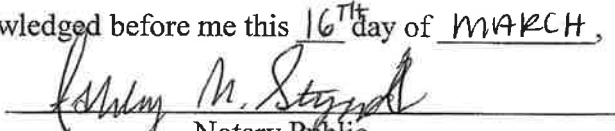
  
\_\_\_\_\_  
Notary Public

My Commission expires: NOVEMBER 30, 2021  
Notary Registration number: 7749800

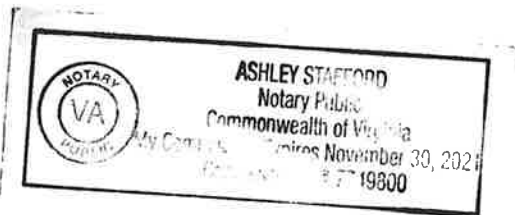


COMMONWEALTH OF VIRGINIA,  
CITY/COUNTY OF PRINCE WILLIAM, to wit:

The foregoing instrument was acknowledged before me this 16<sup>TH</sup> day of MARCH, 2019, by Saeid Asgharinia.

  
\_\_\_\_\_  
Notary Public

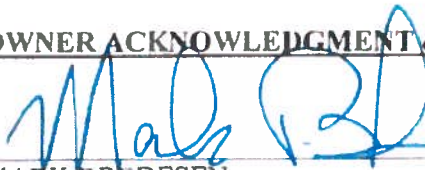
My Commission expires: NOVEMBER 30, 2021  
Notary Registration number: 7749800



**STAFFORD COUNTY REZONING APPLICATION  
OWNER'S NOTARIZED CONSENT**

I, the undersigned, do hereby authorize the applicant, MID-ATLANTIC REAL ESTATE INVESTMENTS, INC., or its successors and assigns (collectively "Applicant"), to file on my behalf all rezoning, conditional use permit, special use permit or other land use or permitting applications necessary to rezone and develop Tax Map Parcel 44-123A & 44-123E from R-1 and M-1 to B-2 or other zoning designation as Applicant may reasonably determine, and further authorize Applicant, at its sole cost and expense, to procure, file and provide all necessary studies, application content regarding said property, any proffer statements, plans and other application materials, and to undertake all other actions necessary to obtain approval for all of the same.

**OWNER ACKNOWLEDGMENT & CONSENT**

  
\_\_\_\_\_  
MARK BREDESEN

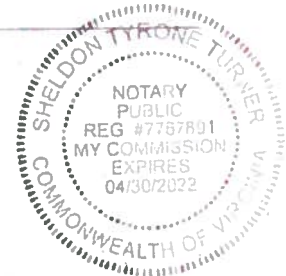
\_\_\_\_\_  
SAEID ASGHARINIA

COMMONWEALTH OF VIRGINIA,  
CITY/COUNTY OF Fairfax to wit:

The foregoing instrument was acknowledged before me this 4<sup>th</sup> day of December, 2019, by Mark Bredeesen.

  
\_\_\_\_\_  
Notary Public

My Commission expires: 4/30/2022  
Notary Registration number: 7767891



COMMONWEALTH OF VIRGINIA,  
CITY/COUNTY OF \_\_\_\_\_ to wit:

The foregoing instrument was acknowledged before me this \_\_\_ day of \_\_\_\_\_, 2019, by Saeid Asgharinia.

\_\_\_\_\_  
Notary Public

My Commission expires: \_\_\_\_\_  
Notary Registration number: \_\_\_\_\_

**STAFFORD COUNTY REZONING APPLICATION**  
**OWNER'S NOTARIZED CONSENT**

I, the undersigned, do hereby authorize the applicant, MID-ATLANTIC REAL ESTATE INVESTMENTS, INC., or its successors and assigns (collectively "Applicant"), to file on my behalf all rezoning, conditional use permit, special use permit or other land use or permitting applications necessary to rezone and develop Tax Map Parcel 44-132 from R-1 to UD-5 and B-3 or other zoning designation as Applicant may reasonably determine, and further authorize Applicant, at its sole cost and expense, to procure, file and provide all necessary studies, application content regarding said property, any proffer statements, plans and other application materials, and to undertake all other actions necessary to obtain approval for all of the same.

**OWNER ACKNOWLEDGMENT & CONSENT**

**GOLDEN INVESTMENT EMPIRE CORPORATION,**  
a Florida Profit Corporation

By: \_\_\_\_\_

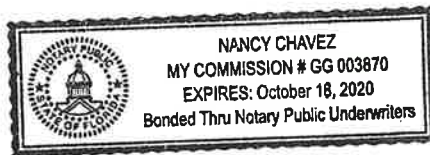
Miriam Sanchez, CEO

STATE OF FLORIDA,  
CITY/COUNTY OF MIAMI DADE, to wit:

The foregoing instrument was acknowledged before me this 14<sup>TH</sup> day of JULY, 2018, by Miriam Sanchez, CEO of GOLDEN INVESTMENT EMPIRE CORPORATION, a Florida Profit Corporation, on behalf of the company.

\_\_\_\_\_  
Notary Public

My Commission expires: 10/18/2020  
Notary Registration number: GG 003870



**STAFFORD COUNTY REZONING APPLICATION  
OWNER'S NOTARIZED CONSENT**

I, the undersigned, do hereby authorize the applicant, MID-ATLANTIC REAL ESTATE INVESTMENTS, INC., or its successors and assigns (collectively "Applicant"), to file on my behalf all rezoning, conditional use permit, special use permit or other land use or permitting applications necessary to rezone and develop Tax Map Parcels 44-124, 44-124A, 44-125, 44-129, 44-129A, 44-130, 44-130A and 44-131 from R-1 to UD-5 or other zoning designation as Applicant may reasonably determine, and further authorize Applicant, at its sole cost and expense, to procure, file and provide all necessary studies, application content regarding said property, any proffer statements, plans and other application materials, and to undertake all other actions necessary to obtain approval for all of the same.

**OWNER ACKNOWLEDGMENT & CONSENT**

**ALPAMAYO INVESTMENT CORP.**  
a Florida Profit Corporation,

By: [Signature] (SEAL)  
Name: Julia Sanchez  
Title: CEO



STATE OF FLORIDA,  
CITY/COUNTY OF MIAMI DADE, to wit:

The foregoing instrument was acknowledged before me this 12 day of July, 2018, by Julia Sanchez, CEO of ALPAMAYO INVESTMENT CORP., a Florida Profit Corporation, on behalf of the company.

[Signature]  
Notary Public

My Commission expires: Nov. 16, 2019  
Notary Registration number: FF 936393





## General Information

Clearly indicate all information that applies to this project:

### DETAILED DESCRIPTION OF PROJECT

Convenience store with vehicle fuel sales within portions of these parcels fronting on Warrenton Road.

---

---

---

### INFORMATION FOR FEE CALCULATIONS

20.92 # of Acres

Type of Conditional Use Permit:

- Standard Conditional Use Permit (including amendments)
- Minor Conditional Use Permit Amendment \*
- Minor Conditional Use Permit Amendment (submitted simultaneously with a Minor Proffer Amendment Application) \*

\* See Background Information on page 3 to determine if the request qualifies as a minor amendment.

### INFORMATIONAL

Previous Resolution # \_\_\_\_\_

Zoning District R-1 & M-1 (proposed rezoning to B-2)

Proposed Use(s) Convenience Store with vehicle fuel sales

---

---

## Review Fee Calculations

The County review fee calculations are divided into two sections. Each section is based on a different type of application. Determine the application fee by filling out the one section that applies.

**Section I. Standard Conditional Use Permit:**

A. Base Fee: (Required) .....	\$ <u>9,750.00</u>
B. General Fee: (If greater than 5 acres)	
( <u>20.92</u> Acres – 5) X \$125 .....	\$ <u>1990.00</u>
C. Fire & Rescue Review Fee (required).....	\$ <u>95.00</u>
D. Utilities Department Review Fee (required).....	\$ <u>95.00</u>
E. Public Works Review Fee (required).....	\$ <u>120.00</u>
F. Traffic Impact Analysis Review Fee: (If TIA required)	
Volume <1,000 VPD .....\$200.00	
Volume >1,000 VPD .....\$400.00.....	\$ <u>400.00</u>
G. Adjacent Property Notification (required):	
( <u>22</u> Adjacent properties) X \$6.48 .....	\$ <u>142.56</u>
<b>Sub-total</b> (Add appropriate amounts from lines A thru G above).....	\$ <u>12,592.56</u>
H. Technology Fee (sub-total x 2.75% or 0.0275).....	\$ <u>346.28</u>
<b>TOTAL (Sub-total + H. Technology Fee)</b> .....	\$ <u>12,938.84</u>

**Section II. Minor Conditional Use Permit Amendment:**

A. General Fee: .....	\$ <u>6,190.00</u>
B. Adjacent Property Notification (required):	
(_____ Adjacent properties) X \$6.48 .....	\$ _____
<b>Sub-total (Add lines A and B)</b> .....	\$ _____
C. Technology Fee (sub-total x 2.75% or 0.0275).....	\$ _____
<b>TOTAL (Sub-total + C. Technology Fee)</b> .....	\$ _____

**Section III. Minor Conditional Use Permit Amendment (when submitted simultaneously with a Minor Proffer Amendment Application):**

A. General Fee: .....	\$ <u>3,095.00</u>
B. Adjacent Property Notification (required): (_____ Adjacent properties) X \$6.48 .....	\$ _____
<b>Sub-total (Add lines A and B) .....</b>	<b>\$ _____</b>
C. Technology Fee (sub-total x 2.75% or 0.0275).....	\$ _____
<b>TOTAL (Sub-total + C. Technology Fee).....</b>	<b>\$ _____</b>

**MAKE CHECK PAYABLE TO "STAFFORD COUNTY"**

- If an application is withdrawn prior to the first public hearing, fifty (50) percent of the amount of the application fee may be refunded to the applicant.
- If an application is withdrawn after the first public hearing, the application fee is non-refundable.

### List of Adjoining Property Owners

The applicant is required to provide a list of the owners as shown on the current real estate tax assessment books of all abutting properties and properties immediately across the street or road from the property to be rezoned or issued a Conditional Use Permit. If the application requests a rezoning of only a portion of the parcel or a Conditional Use Permit on only a portion of the parcel, the entire parcel must be the basis for the below listing.

Provide additional pages if needed.

*See attached list			
_____	_____		
TAX MAP / PARCEL	NAME		
_____			
MAILING ADDRESS			
_____			
CITY	STATE	ZIP	

_____	_____		
TAX MAP / PARCEL	NAME		
_____			
MAILING ADDRESS			
_____			
CITY	STATE	ZIP	

_____	_____		
TAX MAP / PARCEL	NAME		
_____			
MAILING ADDRESS			
_____			
CITY	STATE	ZIP	

_____	_____	
TAX MAP / PARCEL	NAME	
_____		
MAILING ADDRESS		
_____		
CITY	STATE	ZIP

_____	_____	
TAX MAP / PARCEL	NAME	
_____		
MAILING ADDRESS		
_____		
CITY	STATE	ZIP

_____	_____	
TAX MAP / PARCEL	NAME	
_____		
MAILING ADDRESS		
_____		
CITY	STATE	ZIP

_____	_____	
TAX MAP / PARCEL	NAME	
_____		
MAILING ADDRESS		
_____		
CITY	STATE	ZIP

**Adjoining Property Owners**

<b><u>Parcel ID</u></b>	<b><u>Owner</u></b>	<b><u>Mailing Address</u></b>
1 44-93A	CROPP GLEN H &	500 HARTWOOD RD FREDERICKSBURG VA 22406-4103
2 44-93F	LUCK STONE CORPORATION	PO BOX 101 MANAKIN SABOT VA 23103-0101
3 44-120G	702 WARRENTON ROAD LLC	PO BOX 74 THE PLAINS VA 20198-0074
4 44 -120H	FALLS RUN MINI STORAGE INC	690 WARRENTON RD FREDERICKSBURG VA 22406
5 44-123F	IEC PROPERTY LLC	PO BOX 5863 FREDERICKSBURG VA 22403-5863
6 44-123	HENDERSON DAVID L SR & DAVID L JR &	39 POWELL LANE FREDERICKSBURG VA 22406-1021
7 44-96A	WILSON TRUCKING CORPORATION	PO BOX 200 FISHERSVILLE VA 22939-0200
8 44-96C	CAMPBELL THURMAN (NMN) & SHIRLEY J	PO BOX 5099 FREDERICKSBURG VA 22403-0699
9 44-121	712 WARRENTON ROAD LLC	PO BOX 74 THE PLAINS VA 20198
10 44-122	712 WARRENTON ROAD LLC	PO BOX 74 THE PLAINS VA 20198
11 44-126	CORPENO SIMON A	8464 TERMINAL RD LORTON VA 22079
12 44-127	WELLS FARGO BANK NA TRUSTEE	PO BOX 612007 POMPANO BEACH FL 33061
13 44-128	SUN KATHY	PO BOX 5450 FREDERICKSBURG VA 22403-5450
14 44-133A	SUN ASSOCIATES LLC	PO BOX 5450 FREDERICKSBURG VA 22403
15 44-134	PALANI PROPERTIES AZ LLC	10840 JENNIFER MARIE PL FAIRFAX STATION VA 22039
16 44-134D	MAIN STREAM PARTNERSHIP LLP	1900 DALROCK RD
		1111 E BROAD ST 2ND FLOOR
		1111 E BROAD ST 2ND FLOOR RICHMOND VA 23219-1936
19 44 -137	MITCHELL HOMES INC	1650 HOLLY HILLS RD POWHATAN VA 23139-8021
20 44-137B	FIELDS INVESTMENTS LLC	3819 CARLYLE CT
		1619 JEFFERSON DAVIS HWY FREDERICKSBURG VA 22401-4651
22 45 -17G	ADVANCE STORES COMPANY INC	5008 AIRPORT RD NW ROANOKE VA 2401

## Application Affidavit

**This form to be filed with:**

**STAFFORD COUNTY  
BOARD OF SUPERVISORS  
  
1300 COURTHOUSE ROAD  
STAFFORD, VIRGINIA 22555**

Internal Use Only
Project Name: _____
A/P #: _____
Date: _____

All applicants for a special exception, a special use permit, conditional use permit, amendment to the zoning ordinance or variance shall make complete disclosure of the equitable ownership of the real estate involved in the application, including in the case of corporate ownership, limited liability company ownership or similar business ownership, the name of stockholders, officers, managing partners, general partners, owners and members, and in any case the names and addresses of all of the real parties in interest. The requirement of listing names of stockholders, officers and directors shall not apply to a corporation whose stock is traded on a national or local stock exchange and having more than 500 shareholders. In the event the ownership of the involved real estate changes in any respect during the time the application is pending, the applicant shall make complete disclosure of the new equitable ownership of the real estate involved in the application as required herein. If the applicant is a contract purchaser, the ownership information required herein shall be provided for the contract purchaser in addition to the owner of the real estate involved in the application. This section applies to applications before the board of supervisors, planning commission and board of zoning appeals.

See Section 15.2-2289 for State Enabling Authority

### 1. Applicant information

**Name of Applicant**                      Kevin Sills  
**Name of Company**                     Belmont Park LLC

**Applicant Address**                   9161 Liberia Ave. Ste 201  
   Manassas, VA 20110

**Applicant's Signature**                \_\_\_\_\_

**Name of Agent**                         Charles W. Payne, Jr.

**Address of Agent**                      725 Jackson Street, Suite 200, Fredericksburg, VA 22401

### 2. Type of Application

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> <b>Conditional Use Permit</b> | <input type="checkbox"/> <b>Variance</b>          |
| <input type="checkbox"/> <b>Rezoning</b>                          | <input type="checkbox"/> <b>Special Exception</b> |

**Application Affidavit**  
**Page 2**

**Applicant:** Belmont Park LLC

Project Name: _____
A/P #: _____
Date: _____

**3. Property Information**

**Assessor's Parcel(s)** See attached list

**Address** See attached list  
\_\_\_\_\_

**4. Unless the equitable ownership is a corporation, limited liability company or similar business ownership, list all equitable owners of the property.**

<u>Name of owners</u>	<u>Address</u>
<u>Sam Yadzani</u>	<u>346 Warrenton Road, Fredericksburg, VA 22405</u>
<u>Mark Bredesen</u>	<u>134 SPRING STREET, Herndon, VA 20170</u>
<u>Saeid Asgharina</u>	<u>134 SPRING STREET, Herndon, VA 20170</u>
_____	_____

**5. If the equitable ownership of the property is a corporation, limited liability company or similar business ownership, list all officers, managing partners, general partners, share holders, owners and members. This provision shall not apply if the corporation is listed on a national or local stock exchange and has more than 500 shareholders.**

<u>Name of Members</u>	<u>Address</u>
<u>Alpamayo Investment Corp.</u>	_____
<u>Julia Sanchez, President, CEO, Treasurer and Director</u>	<u>9421 SW 123 Ave, Miami, FL 33186</u>
<u>Magdoli Vega, VP</u>	<u>1270 Deer Lake Circle, Apopka, FL 32712</u>
<u>Golden Investment Empire Corporation</u>	_____
<u>Miriam Sanchez, President, Owner and Director</u>	<u>983 Karst Tree Lane, Apopka, FL 32703</u>

**6. Unless the applicant is a contract purchaser and is a corporation, limited liability company or similar business ownership, list all individuals involved with the purchase of the property.**

<u>Name of Members</u>	<u>Address</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____



**Application Affidavit**

**Page 3**

**Applicant:** Belmont Park LLC

Project Name:	_____
A/P #:	_____
Date:	_____

**7. If the applicant is a contract purchaser and is a corporation, limited liability company or similar business ownership, list all officers, managing partners, general partners, share holders, owners and members. This provision shall not apply if the corporation is listed on a national or local stock exchange and has more than 500 share holders**

**Name of Members**

Belmont Park LLC  
Kevin Sills, President, Owner and Director 9161 Liberia Ave, Ste 201, Manassas, VA 20110

_____	_____
_____	_____
_____	_____

**8. Have all individuals listed on this affidavit been notified of the purpose of the application?**

Yes                       No

**9. If #8 is No, list all individuals who have not been notified about this application plus submit the cost required for the Department of Planning and Zoning or Code Administration to send certified letters notifying those listed below of this application prior to the public hearing.**

<u>Name</u>	<u>Address, including zip code, no P.O. Box please</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Number of owners to be notified:** \_\_\_\_\_ **X**  
**Cost for certified letters**        \$ \_\_\_\_\_ (cost as of the day of submittal)  
**Total due:**                                \$ \_\_\_\_\_ (Make checks payable to County of Stafford)

**Please submit a check in the amount due with this application to cover the cost of serving the individuals listed in this section.**

**Application Affidavit**

**Page 4**

**Applicant:** Belmont Park LLC

Project Name:	_____
A/P #:	_____
Date:	_____

**10. Affirmation & Witness**

**I hereby make oath or affirmation that the contents of this affidavit are true and correct to the best of my knowledge, information and belief. In the event the ownership of the involved real estate changes during the time the application is pending, I shall make complete disclosure of the new equitable ownership of the real estate involved in the application as required herein.**

**Printed name of Signer** Kevin Sills

**Corporate Office of Signer** President

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

COMMONWEALTH OF VIRGINIA  
COUNTY OF STAFFORD, to wit:

The forgoing affidavit was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ by

\_\_\_\_\_

My commission expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

**Checklist for Generalized Development Plans (GDP)**

In accordance with Section 28-224 of the Stafford County Code, when a GDP involves engineering, architecture, urban land use planning or design, landscape architecture, or surveying, such work shall be performed by persons qualified and authorized to perform such professional work, in accordance with applicable provisions of the Code of Virginia.

N/A    COMPLETE

- |   |                                     |  |
|---|-------------------------------------|--|
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | <b>Sec 28-225(1)</b>   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | Date of drawing,   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | true north arrow,  |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | scale,   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | legend for all symbols used,   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | name of the applicant,   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | name of the owner,   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | name of the development,   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | person preparing the drawing,  |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | match lines if applicable;   |
|   |                                     | <b>Sec 28-225(2)</b>   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | Boundaries of the area covered by the application,                       |
| <input type="checkbox"/>                      | <input type="checkbox"/>            | vicinity map showing the general location of the proposed development,   |
|   |                                     | major roads and existing subdivisions at a scale of one inch equals two  |
|   |                                     | thousand (2,000) feet;   |
|   |                                     | <b>Sec 28-225(3)</b>   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | Approximate locations and identification of any easements and rights-of- |
|   |                                     | way on or abutting the site;   |
|   |                                     | <b>Sec 28-225(4)</b>   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | Approximate location of each existing and proposed structure on the site |
| <input checked="" type="checkbox"/> SITE PLAN | <input type="checkbox"/>            | the number of stories,   |
| <input checked="" type="checkbox"/> SITE PLAN | <input type="checkbox"/>            | height,  |
| <input checked="" type="checkbox"/> SITE PLAN | <input type="checkbox"/>            | roof line,   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | gross floor areas and  |
| <input checked="" type="checkbox"/> SITE PLAN | <input type="checkbox"/>            | location of building entrances and exits;                                |
|   |                                     | <b>Sec 28-225(5)</b>   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | Identification and location of uses and structures on all abutting       |
|   |                                     | properties;  |
|   |                                     | <b>Sec 28-225(6)</b>   |
| <input type="checkbox"/>                      | <input type="checkbox"/>            | Approximate location of all existing and proposed parking and loading    |
| <input checked="" type="checkbox"/> SITE PLAN | <input type="checkbox"/>            | areas,   |
| <input checked="" type="checkbox"/> SITE PLAN | <input type="checkbox"/>            | outdoor trash storage,   |
| <input type="checkbox"/>                      | <input type="checkbox"/>            | lighting facilities, and   |
| <input type="checkbox"/>                      | <input checked="" type="checkbox"/> | pedestrian walkways;   |
|   |                                     | <b>Sec 28-225(7)</b>   |
| <input checked="" type="checkbox"/> SITE PLAN | <input type="checkbox"/>            | Approximate location, height and type of each existing and proposed      |
|   |                                     | wall, fence, and other types of screening;                               |

**Checklist for Generalized Development Plans (continued)**

N/A    COMPLETE

- |   |                                     |  |
|---|-------------------------------------|--|
| <input checked="" type="checkbox"/> SITE PLAN                         | <input type="checkbox"/>            | <b>Sec 28-225(8)</b><br>Approximate location and description of all proposed landscaping;  |
| <input checked="" type="checkbox"/> SITE PLAN                         | <input type="checkbox"/>            | <b>Sec 28-225(9)</b><br>Approximate location, height and dimensions of all proposed signage on site;   |
| <input type="checkbox"/>  | <input checked="" type="checkbox"/> | <b>Sec 28-225(10)</b><br>Approximate location of all existing drainage ways, floodplains and wetlands on site;   |
| <input type="checkbox"/>  | <input checked="" type="checkbox"/> | <b>Sec 28-225(11)</b><br>Approximate location of all common open space, recreational areas and bufferyards;  |
| <input checked="" type="checkbox"/>                                   | <input type="checkbox"/>            | <b>Sec 28-225(12)</b><br>Where the site abuts any tidal water body or impoundments, the approximate high water line, low water line, top of bank and toe of slope;   |
| <input checked="" type="checkbox"/> NOT LOCATING TREE UNTIL SITE PLAN | <input type="checkbox"/>            | <b>Sec 28-225(13)</b><br>Approximate location and identification of all significant natural or noteworthy features including, but not limited to, historic and archeological sites, cemeteries, existing trees with a trunk diameter greater than six (6) inches DBH |

**Waiver of GDP Requirements**

In accordance with Section 28-223 of the Stafford County Code, the Director of Planning and Zoning may waive the requirement for the submission of a GDP if the application meets one of the following standards:

- (1) There will be less than two thousand five hundred (2,500) square feet of total land disturbance on lots or parcels of less than ten thousand (10,000) square feet.
- (2) For single-family dwellings intended for the occupancy of the applicant and where there will be less than five thousand (5,000) square feet of land disturbance.
- (3) For specific items of information when, in the opinion of the director of planning, their application to the subject property does not serve the purpose and intent of this article.

A request for a waiver shall be made in writing to the Director of Planning and Zoning identifying the sections in which you are requesting a waiver and the reason for the request.

**RECLASSIFICATION  
TRANSPORTATION IMPACT  
ANALYSIS DETERMINATION**

Name of development Belmont Park  
Type of development Mixed-Use  
Parcel # See attached list

RECEIVED BUT NOT OFFICIALLY SUBMITTED:  DATE: _____ INITIALS _____  OFFICIALLY SUBMITTED:  DATE: _____ INITIALS _____
--

**Traffic Volume Calculations**

This site generates:

- 1,425 VPH (highest VPH)
- 12,596 VPD on state controlled highways (highest)
- 544 VPH Peak AM
- 1,162 VPH Peak PM
- 1,425 VPH Peak Saturday
- 12,596 VPD highest intensity\*

\*\*\*Attach a page showing the calculations and the ITE trip generation codes to this form.\*\*\*

**Minimum Thresholds to submit a TIA**

County: Any proposals generating 1,000 or more VPD.  
VDOT: See "VDOT Traffic Impact Analysis Requirements" table on next page.

**Trip Generation Calculation Guidelines**

- Traffic volumes shall be based on the rates or equations published in the latest edition of the Institute of Transportation Engineers Trip Generation.
- If a site has multiple entrances to highways, volumes on all entrances shall be combined for the purposes of this determination.
- If the site does not have direct access to a state maintained road, the site's connection is where the site connects to the state highway system.
- Traffic volumes shall NOT be reduced through internal capture rates, pass by rates, or any other reduction methods.
- For redevelopment sites only: when the existing use is to be redeveloped as a higher intensity use, trips currently generated by the existing development that will be removed may be deducted from the total trips that will be generated by the proposed land use.
- When rezoning, use the highest possible traffic generating use unless development is limited by proffer to less than the possible highest traffic generation.

For development proposals that generate 1,000 or more vehicle trips per peak hour the applicant shall request a scope of work meeting with VDOT and Stafford County Office of Transportation to discuss the required elements of a traffic impact analysis.

## VDOT Traffic Impact Analysis Requirements

Process		Threshold	Review Process*	Fee**
Comprehensive Plan and Plan Amendments (including small area plans)		5,000 VPD on state-controlled highways, or  Major change to infrastructure / transportation facilities	Application submitted to VDOT for review and comment  VDOT may request a meeting with the locality within 30 days  Review to be completed in 90 days or later if mutually agreed	\$1000 covers first and second review.  No fee if initiated by locality or public agency.  No fee for citizens' organization or neighborhood association proposing plan amendments.
Rezoning	Residential Low Volume Road Submission	400 VPD AND exceeds the current traffic volume on a state controlled highway	VDOT or local TIA (certified by VDOT) and Application submitted to VDOT for review and comment  VDOT may request a meeting with the locality & applicant within 45 days  Review to be completed in 120 days if VDOT requests a meeting  Otherwise review to be completed in 45 days	For first and second review:  \$250 - Low Volume Rd  \$1000 – All other submissions
	All Other Land Uses including residential	5,000 VPD on state controlled highways, or  5,000 VPD on locality maintained streets AND within 3000 feet of a state controlled highway	NOTE: When a related comprehensive plan revision and rezoning proposal are being considered concurrently for the same geographical area, then only a rezoning TIA package is required.	No fee if initiated by locality or public agency  No fee if using a VDOT TIA prepared for a small area plan

\* For proposals generating less than 1000VPH the locality and/or applicant may request a Scope of Work Meeting with VDOT. For proposals generating 1000 VPH or more the locality and/or applicant shall hold a Scope of Work Meeting with VDOT.

\*\* Third or subsequent submissions require additional fee as though they were an initial submission.