



SPECIAL USE APPLICATION
(Please type or print)

Date: 1/22/19 Case: SUP 19-0001 07/01/2017

110-0000-316-16-08 (395)	Mailing	\$ 8.00
260-0000-318-99-14	Intake	\$ 62.50
	Process. Fee	
110-0000-316-16-08 (395)	Planning	\$ 4035.00
110-0000-316-16-10 (334)	GIS	\$ 207.25
260-0000-313-03-45	Zoning	\$ 464.50
Total Filing Fee:		4777.25

Mazari Motors
Applicant's Name
4611 Ewell Road
Applicant's Address
Fredericksburg, VA 22408
City, State, Zip Code

Applicant's E-mail Address

Applicant's Telephone No.

Samer E. Shalaby
Agent's Name (Point of Contact for Application)
159 Lichfield Blvd, Suite 101
Agent's Address
Fredericksburg VA 22406
City, State, Zip Code
sshalaby@dev-consulting.com
Agent's E-mail Address
540-368-1327
Agent's Telephone No.

Property Owner Information:

Shirley Ann Ali & Bashar Itraish
Name

If Applicant is not the owner, attach
documentation of owner's consent

4116 17th Street Arlington, VA 22207
Address City, State, Zip Code Telephone No.
Parcel Location: 10900 Courthouse Road
Tax Map Parcel Number: 23-A-140 Acreage: 1.18
Zoning District: C-3 Overlay District: NA
Proposed Use: auto sales

To: The Board of Supervisors of Spotsylvania County, Virginia. The above named applicant(s) hereby petition(s) for the approval indicated above for the described property and as shown on the attached materials made a part of this Application.

I hereby certify by my signature below that I am the owner of record of the named property or that I am authorized to act on behalf of all the owners of record of the named property to execute this application. I further certify that all information I have provided thereon is complete and accurate. I agree on behalf of myself and all owners to conform to the Zoning Ordinance, Subdivision Ordinance, Virginia Uniform Statewide Building Code, Erosion Ordinance, Chesapeake Bay Preservation Ordinance, the Water and Sewer Construction Specifications of Spotsylvania County, and all other applicable laws and regulations of this jurisdiction.

Shirley Ann Ali
Signature of Owner or Agent with POA* Date 5-1-19 Print Name Bashar Itraish

Samer E. Shalaby
Signature of Owner or Agent with POA* Date 5-1-19 Print Name Samer E. Shalaby

I have read this Application, understand its intent and freely consent to its filing. Furthermore, I have the power to authorize and hereby grant permission for Spotsylvania County Officials and other authorized government agents on official business to enter the property to process this Application.

Voting District: _____ Census Tract: _____ Traffic Analysis Zone: _____
(To be completed by the Planning Department after submission)

Shirley Ann Ali
Commission No. 7697898
My Commission Expires 01/01/2020

