

Complete this application in its entirety and submit pages 4 and 5 along with the required materials (including any required supplements) as listed on page 2 to the address below:

City of Hampton Community Development Department, Planning Division 22 Lincoln Street, 5th Floor Hampton, Virginia 23669

OFFICE USE ONLY  Date Received:
RECEIVED
FEB 1 2019
CDD 5 <sup>TH</sup> FLOOR
Case Number: UP

1. PROPERTY INFORMATION			
Address or Location <u>24<i>93</i> </u>	cmenamir	1 St. Hampton	1 VA
Address or Location <u> </u>	and the second second	Zoning District	2/0-CC
Current Land Use			
Proposed Land Use restours	1	and the second s	Control of the Contro
The proposed use will be in:		☐ a new addition	☐ a new building
2. PROPERTY OWNER INFORMATION			ted as owner)
Owner's Name <u>T Pemins</u>	ula LMT	VALLL	
Address 16 600 Morth Dallas Par	KNAY City D	AllasSta	te <u>TX</u> zip <u>75748</u>
Phone 757-838-1505	Email Zaf	@tabanigroup.	cm
3. APPLICANT INFORMATION (if dif	ferent from owner)		
Applicant's Name <u>JMan ca</u>	rrillo		
		illiamsburg_Sta	ite <u>VA_</u> Zip_ <i>930_98</i>
Address <u> </u>	Email	endc 1981 Ogn	ail. Com
4. APPLICANT AGENT INFORMATIO	ON (if different from	applicant)	
Agent's Name			
Address	City	Sta	te Zip
Phone	Email	and the second s	

## 5. CERTIFICATION FOR LEGAL ENTITY PROPERTY OWNERS

Name of Legal Entity

Complete this section only if the property owner is **not** an individual but rather a legal entity such as a corporation, trust, LLC, partnership, diocese, etc. as specified in Step 2 above.

"I hereby submit that I am legally authorized to execute this application on behalf of the fee-simple owner of this property. I have read this application and it is submitted with my full knowledge and consent. I authorize city staff and representatives to have access to this property for inspection. The information contained in this application is accurate and correct to the best of my knowledge."

Name(s), title(s), signature(s), and date(s) of authorized representative(s) of the legal entity (attach additional page if necessary):

T Penincula umt va LLC

Signe	od by:				
	Name (printed)	ts (title)			
	Signature		Date		
	Name (printed) Signature 7	3. Tubeni	, its (title) Hesident of Managing Member		
			, its (title)		
	Signature Date		Date		
my full inspect Name(	knowledge and consent. I tion. The information conta s), signature(s), and date(	authorize citv staff and represen			
	Date				
Name (	(printed)				
Signature			Date		
	and the contract of the contra	OFFICE USE ONLY	de la grandina de la grandina de la compansión de la foresta la franción de la compansión de la compa		
	☐ Application Form	☐ Narrative Statement	☐ Supplemental Form (if required)		
	☐ Application Fee	☐ Survey Plat	☐ Additional materials (If required)		



Complete this supplement in its entirety and submit with the completed Use Permit application form to the address below:

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1. LOT INFORMATION
Current Number of On-site Parking Spaces Areal Proposed Number of On-site Parking Spaces Show
2. BUILDING INFORMATION
Total Square Footage Square Footage of Performance Area 688
Square Footage of Dance Floor 688 Square Footage Served by Live Entertainment
Please attach a floor plan of the facility with all rooms labeled as to their use and square footage and showing the location of the areas designated above.
3. OPERATIONAL INFORMATION
Existing Use Restaurant Proposed Use Restaurant like en forte ment
Proposed Type(s) of Entertainment to be Offered BO / Karadice   Time Sound
Equipment Required for Type(s) of Entertainment to be Offered Specialist and instances.
Seating Capacity 220 Length of Ownership of this Business
Existing Hours of Operation: Mon II-10 Tue II-10 Wed II-10
Thu 11-10 Fri 11-11 Sat 11-11 Sun 11-9
Proposed Hours of Operation: Mon 11-10 Tue 11-10 Wed 11-10
Thu 11-17 Fri 11- 2am Sat 11- 7am Sun 11-9



1/21/2019

## To Whom It May Concern:

This is a written statement on our proposal for a live entertainment permit for the following address 2423 Mcmenamin St, Hampton Virginia 23666 doing business as Iuan's Mexican Café & Cantina.

Our hours of operations are as follow Monday-Thursday 11-10pm Friday and Saturday 11-2am and Sunday 11-9:30pm. We have 23 employees that work full time.

The number of seats our 220 that is our capacity. We want to do live music and karaoke dj on some nights with a family type atmosphere. The restaurant is owner operated by Juan D Carrillo from Williamsburg Virginia. The restaurant is located in peninsula towne center so parking is shared. We have 24 hour security from HPD and mall security. Parking is shared between all tenants at PTC . if you have any further questions please feel free and contact me at (757)592-1168 or email at <a href="mailto:luan@juanscafeandcantina.com">luan@juanscafeandcantina.com</a> thank you very much.

Juan D Carrillo / President

