

Government of the District of Columbia
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
Office of the Zoning Administrator

EATING ESTABLISHMENT QUESTIONNAIRE

As per 11 DCMR Section 3202.2(b)(3), please complete the following information regarding the Eating Establishment use, whether existing or proposed, in order to verify the correct zoning category, as set forth in 11 DCMR Section 199.1 for Restaurant, Fast Food Establishment or Prepared Food Shop use definitions. Please print legibly in ink or type and complete the following questions; add explanation if needed to clarify proposal. Please note that cross outs or the use of white out VOIDS this form:

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D.C. OFFICE OF ZONING
2014 NOV -7 PM 3:09

Address: 5427 5th Street, NW, Washington DC 20011

Name of Business: Kenny's

Applicant Name: Song Quan Liu Inc
Print Name **Date**

Does the proposed or existing Eating Establishment include

- 1 A drive through service window? Yes ☐ No ☒
- 2 Carry-out or "to go" food? Yes ☒ No ☐ Some or partial ☐
If the answer is 'some', state the expected percentage of carry out sales %
- 3 Having customers to pay before products are consumed? Yes ☒ No ☐
- 4 Any delivery service? Yes ☐ No ☐ Some or partial ☒
If the answer is 'some', state the expected percentage of delivery sales 40 %
- 5 Food served in or on disposable tableware (such as paper or plastic plates, cups, or plastic utensils)? Yes ☒ No ☐
- 6 In cases where the answer to question #5 is no, is there an automatic dishwasher for cleaning customers' tableware present or proposed in the kitchen's floor plan?
Yes ☐ No ☐ If No, explain N/A
- 7 For establishments principally devoted to the sales of prepared food, non-alcoholic beverages, or cold refreshments (such as sandwich or coffee shops, or ice cream parlors)
Describe any cooking or heating equipment involved in food preparation:
Stove and Oven
- 8 Will your business offer catering? Yes ☐ No ☐ Some or partial ☒
If the answer is 'some', state the expected percentage of catering sales: 5 %
- 9 If on-premises dining is provided for, state the number of customer seats: None
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If checked by staff, please provide the following:

- ☐ - A complete floor plan Show all floors, label kitchen, storage, seating and assembly areas
- ☐ - Photographs of the interior including the kitchen, dining area, assembly areas, queuing area, dishwasher, food-prep area, seating area & dumpsters.
- ☐ - A copy of the menu, carryout menu & catering menu, if applicable
- ☐ - An equipment schedule and clearly label/identify each piece of equipment on the corresponding floor plans.

Signature of Applicant:

Song Guan Lin

Name

Nov-06-14

Date

Please check: Agent _____ or Owner X

For Staff Use ONLY:

Zone: _____

Subject to Overlay District? If so, List _____

Neighborhood Overlay District compliance with 25% limitation under 1302.5(a):

(Complies or NA)

I have reviewed the completed Eating Establishment Questionnaire, and supporting information if supplied, and have determined, under the applicable zoning definitions, that this Establishment is defined as:

_____ Restaurant

_____ Fast Food Establishment

_____ Prepared Food Shop [Note: Limit of 18 seats in C-1 and C-2-A]

_____ Food Delivery Service

_____ Catering Establishment

_____ Other: _____

Zoning Administrator/Deputy/ Engineer Name

Date