

3.3: School Specific Addendum

School Name: Arlington Traditional School

Use Permit Number: U-3386-14-1

Approved	
Arlington Public Schools Superintendent or designee	Arlington County Manager or designee
Name: _____	Name: _____
Signature: _____	Signature: _____
Date: _____	Date: _____

Introduction

3.3.1 School Transportation Coordinator Contact (Condition #3.A.2) 703-228-6290 [Lisa.Payne@apsva.us](mailto:Lisa.Payne@apsva.us)

Organization/Role	Name	Telephone	Email
			_____

3.3.2 Transportation Information Display Location (Condition #3.B.2)  
A Transportation Information Display is located in the main lobby of the school, just inside the main entrance.

3.3.3 Outdoor Bike Parking Requirement (Condition #1)  
# of students in second through fifth grade (average) 319

3.3.5 Bike Parking Management Plan (Condition #3.B.)

BIKE FACILITIES MANAGEMENT PLAN

The following plan will be in place to manage the site bicycle facilities, showers, and lockers:

*Management responsibility:*

Operation of bicycle facilities will be managed by the School Transportation Coordinator.

*Access and hours of operation:*

All school staff will have access to the showers, and the storage lockers Monday, 6am-10:30pm using their school