### Raze Applications Applied for May 12 through June 7, 2016

Application Date	Raze Number	Address	Description of Work	DCRA Notice Date	DCRA Expiration Date	PER SUB TYPE	SSL	Ward	ANC	Zoning	Applicant	Owner Name
6/1/2016	R1600167	1460 Belmont ST NW, WASHINGTON, DC 20009	raze 3 STORY TWO FAMILY FLAT - 2 UNITS	June 8, 2016	July 25, 2016	Raze	2660 0195	1	1B	R-5-B	ERWIN	HIG 1460 Belmont Street LLC
6/1/2016	R1600166	1458 BELMONT ST NW, WASHINGTON, DC 20009	raze 3 STORY TWO FAMILY FLAT - 2 UNITS	June 8, 2016	July 25, 2016	Raze	2660 0196	1	1B	R-5-B	ERWIN	STEVEN C GANTNER
6/3/2016	R1600170	1522 FOXHALL RD NW, WASHINGTON, DC 20007	Raze Entire Structure TWO STORY DETACHED Single Family Dwelling	June 8, 2016	July 25, 2016	Raze	1363 0978	3	3D	R-1-B	JOHN DISTRICT PROPERTIES LLC; ASHLEY AB CONSULTING; ASHLEY	John District Properties LLC
6/3/2016	R1600171	1516 FOXHALL RD NW, WASHINGTON, DC 20007	Raze Entire Structure TWO STORY DETACHED WOOD Single Family Dwelling	June 8, 2016	July 25, 2016	Raze	1363 0938	3	3D	R-1-B	JOHN DISTRICT PROPERTIES LLC; ASHLEY	John District Properties LLC
5/19/2016	R1600162	6517 BARNABY ST NW, WASHINGTON, DC 20015	Raze TWO STORY BRICK Single Family Dwelling	June 8, 2016	July 25, 2016	Raze	2350 0088	4	3G	R-1-B	HOLMAN	JAMES H PORTER
5/24/2016	R1600165	3831 GEORGIA AVE NW, WASHINGTON, DC 20011	Raze Three Story Brick Masonry Commercial Building	June 8, 2016	July 25, 2016	Raze	3028 0809	4	4C	GA/C-3- A	MURILLO MALNATI; NONE	CAROL LATNEY-SOLOMON
6/3/2016	R1600168	3819 14TH ST NW, WASHINGTON, DC 20011	TWO STORY Single Family Dwelling	June 8, 2016	July 25, 2016	Raze	2825 0012	4	4C	C-2-A	ERWIN	THOMAS E HALLEWELL
5/23/2016	R1600164	301 FLORIDA AVE NE, WASHINGTON, DC 20002	1 STORY BRICK MASONARY COMMERCIAL BUILDING	June 8, 2016	July 25, 2016	Raze	0772N 0803	6	6C	C-M-1	KIM MITCHELL	JOHN A BOOKER JR
6/3/2016	R1600169	301 G ST SW, WASHINGTON, DC 20024	2 STORY PARKING STRUCTURE	June 8, 2016	July 25, 2016	Raze	0540 0110	6	6D	R-5-C	MCKEVER	CAPITOL PARK TOWER LLC
5/23/2016	R1600163	6201 BANKS PL NE, WASHINGTON, DC 20019	RAZE THE MARVIN GAYE RECREATION CENTER	June 8, 2016	July 25, 5026	Raze	PAR 01890022	7	7C		LEON SWAIN	UNITED STATES OF AMERICA





### **Department of Consumer and Regulatory Affairs**

Permit Operations Division 1100 4th Street SW Washington DC 20024

Tel. (202) 442 - 4589 Fax (202) 442 - 4862 TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

Date:	June 01, 2016	-		Cap Id:	R1600167
1100 41	Historic Preservation Of th Street S.W., Rm E650 ngton, DC 20024	fice			
	quest for clearance of premise	es subject to razing ope	rations		
this da	plication to raze the stru te with the Permit Opera property. We are hereby	tions Division. Our	records do not reveal	any kind	of conservation holds
Address	s: BELMONT ST NW				
LOT: 0	195 SQUARE: 2660 T	YPE:		V	ACANT: Yes
the cle	notify our office of the arance section below and eet S.W Washington D.C.	d returning this form			
		CLEA	RANCE		
	to inform you that we resea o objections to proceeding w		•	tified above	e and we
Date: _		Signature:			
Name o	of releasing HPO Official. (	print)			



### APPLICATION FOR RAZE PERMIT

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

R1600167		Application Date: 6.1.2016						
	1. INFORMATIO		<u> </u>					
1. Address of Proposed Work	and the state of t	2. Quad	3. Ward	4a. Square	4b. Suffix 5. Lot			
1460 Belmont Street		NW	One	2660	0195			
	2. APPLICANT							
6. Property Owner	7. Complete mailing address	(include zi	p) 8. Pho	one Number(s)	9. Email			
HIG 1460 Belmont Street LLC	1010 Wisconsin Avenue	e NW, Sı	uite (202	506-5595	adam@casriegler.com			
10. Agent/Contractor for Owner (if applicable	11. Complete mailing address	s (include z	zip) 12. Pł	none Number(s)	13. Email			
Stephanie Erwin	9413 Gamba Ct Vienna V	A 22182	202.	815.4002	stephanie@primepermits.cu +			
3. TYPE OF PERMIT  14. Check all that apply:  Raze Permit								
4. DESCRIPTION OF BUILDING  15. Description of Building to be Razed (e.g., two story brick single family dwelling)  16. Existing Number of Stories of Bldg:								
3 story single family residential dwelling	W/3-08-16-16-16-16-16-16-16-16-16-16-16-16-16-	a salam na manda di	ts)	3	The state of the s			
17. Use(s) of Property (specifically indicate if	any use is residential.)	1	8. Materials	of Building (brick	, wood, etc.)			
residential		b	rick	Account of A statement in the state of the s				
19. Bldg Length (ft) 20. B	dg Width (ft)	21. Bldg	Height (ft)		22. Bldg Volume (cu ft) (L x W x H)			
55 17		32	1966 - 644 - 444 - 550 - 550 - 550 - 550 - 550 - 550 - 550 - 550 - 550 - 550 - 550 - 550 - 550 - 550 - 550 - 5		29,920			
	OFFICIAL	USE ON	LY					
CONDITIONS/ COMMENTS:								

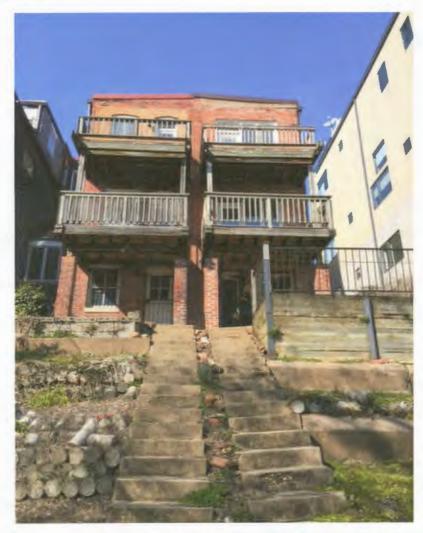
SECTION A. RAZE PERMIT								
23. Raze Contractor's Name		24. Contractor	's Address (including zip cod	25. Contractor's Ph	one			
RS Snead Construction		1010 Wisco	nsin Avenue NW, Suite	e 600.	202-506-2721			
26. Historic District?	Yes	No	33. Raze Contractor Sig	nature				
27. CFA?	Yes	× No			_			
28. Raze Entire Building?	XYes	□No	34. Property Owner 210	ature				
29. Building Condemned?	Yes	<b>⊠</b> No	Call	2				
30a. Party Wall?	×Yes	□No	30b. If yes, adjacer	nt prop	erty owner signat	ure is required.		
			30c. Any raze permit application for a building(s) invoiving party walls mus include 2 copies of a plan that show how the party wall(s) will be protected.					
31. Building Vacant?	×Yes	No	Building must be vacant	before	Raze Permit issuance	).		
32. Public Space Vault?	Yes	⊠No		Official Use Only				
			Fee	Ву		Date		
00 50 1 1 1 1		04 04	12		05 D - 14-4-46	-ti bullalaran bu basal ata \		
33. Plumber's Name		34. Plumbers	r's License Number 35. Raze Method (ball, bulldozer, by hand, etc.)					
1. You must submit a Certificate of Insura								
square feet or less in area and not more	e than one	story, wholly de	etached from any other buil	ding on	the same or adjoining	g premises.		
<ul><li>2. The Certificate should:</li><li>Show the holder of the insura</li></ul>	noo no: Do	nuty Disastas (	Parmit Division 1100 4th Ch	CIAL IAL	Jachiagton FTC 20024			
<ul> <li>Include a 30-day advance not</li> </ul>	ice as. De	lation clause.	rennit Division, 1100 4th St	. SVV, VV	ashington, DC 20024	,		
<ul> <li>Include these amounts of inst</li> </ul>			njury, \$100,000; Aggregate,	\$300,0	00; and Property Dan	nage, \$100,000.		
<ul> <li>State that the insurance cove</li> </ul>	-				e of the insurance is	for blanket coverage.		
<ul> <li>If the insurance is for one spe</li> </ul>	cific addre	ss only, state th	nat, "Razing Operations at_		(address of raze	p operation)		
36. Insurance Company		37 Policy o	or Certificate No.		38. Expiration D			
20. Ashartas in Building?	FlVes	TNo.			Eisial Has Oak			
39. Asbestos in Building?  If yes, indicate location:	Yes	7140		O	fficial Use Only			
ii yes, indicate location.			Fee By Date			Date		

### 1460 Belmont





### 1460 Belmont







Date:

June 01, 2016



### Government of the District of Columbia

### **Department of Consumer and Regulatory Affairs**

Permit Operations Division 1100 4th Street SW Washington DC 20024

Cap Id:

R1600166

Tel. (202) 442 - 4589 Fax (202) 442 - 4862 TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

D.C. Historic Preservation Office
1100 4th Street S.W., Rm E650
Washington, DC 20024
Re: Request for clearance of premises subject to razing operations
An application to raze the structure identified below, located in the District of Columbia, was filed on this date with the Permit Operations Division. Our records do not reveal any kind of conservation holds on this property. We are hereby requesting confirmation from your office, in order to release the subject permit.
Address:
1458 BELMONT ST NW
LOT: 0196 SQUARE: 2660 TYPE: VACANT: Yes
Please notify our office of the satisfactory completion of your inspection of the premises, by filling out the clearance section below and returning this form to the D.C.R.A. Permit Operations Division, 1100 4th Street S.W., Washington D.C. 20024.
CLEARANCE
This is to inform you that we researched our records concerning the structure identified above and we have no objections to proceeding with the proposed razing of said structure.
Date: Signature:
Name of releasing HPO Official. (print)



### **APPLICATION FOR RAZE PERMIT**

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

R/6 00/66			Applie	cation Date:	6.1.2016			
7 44 00744	1. INFORMATIO	N ON PR		cation Date.				
1. Address of Proposed Work	2. 111 01		3. Ward	4a. Square	4b. Suffix 5. Lot			
1458 Belmont Street			One	2660	0196			
	2. APPLICANT	INFORM	ATION					
6. Property Owner	7. Complete mailing address	(include zip	) 8. Pho	one Number(s)	9. Email			
HIG 1460 Belmont Street LLC	1010 Wisconsin Avenue	e NW, Su	te (202	506-5595	adam@casriegler.com			
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing addres	s (include zi	p) 12. Pł	none Number(s)	13. Email			
Stephanie Erwin	9413 Gamba Ct Vienna V	A 22182	202.	815,4002	stephanie@primepermits.co			
	3. TYPE 0	F PERMI	T					
14. Check all that apply:  Raze Pe	14. Check all that apply:							
	4. DESCRIPTIO		ILDING					
15. Description of Building to be Razed (e.g.,	two story brick single family dwe	elling)		16	S. Existing Number of Stories of Bldg:			
3 story single family residential dwellin	ng with cellar flat (2	units	3)	3				
17. Use(s) of Property (specifically indicate if	any use is residential.)	18	. Materials	of Building (brick	t, wood, etc.)			
residential		þ	ick					
19. Bldg Length (ft) 20. Bl	dg Width (ft)	21. Bldg H	leight (ft)		22. Bldg Volume (cu ft) (L x W x H)			
55		32			29,920			
	OFFICIAL	USE ONL	Y					
CONDITIONS/ COMMENTS:					-			
I								

SECTION A. RAZE PERMIT									
23. Raze Contractor's Name		24. Contractor's Address (including zip code)			25. Contractor's Phone				
RS Snead Construction		1010 Wiscon	1010 Wisconsin Avenue NW, Suite 600,						
26. Historic District?	Yes	X No	33. Raze Contractor Sign	ature					
27. CFA?	Yes	s⊠ No							
28. Raze Entire Building?	×Yes	No	34. Property Owner Signa	iture					
29. Building Condemned?	Yes	X No	Call		A				
30a. Party Wall?	XYes	No No	30b. If yes, adjacon	ure is required.					
30c. Any raze permit application for a building(s) include 2 copies of a plan that show how the party									
31. Building Vacant?	x Yes	No No	Building must be vacant to	pefore :	Raze Permit issuance				
32. Public Space Vault?	Yes	s <b>⊠</b> No			Official Use Only				
			Fee	Ву		Dete			
33. Plumber's Name		34. Plumber's	License Νυπιώer		35. Raze Wethod (ba	all, bulldozer, by hand, etc.)			
1. You must submit a Certificate of Insurar									
square feet or less in area and not more 2. The Certificate should:	e man on	e story, wholly de	etached from lany other build	ing on	the same or adjoining	g premises.			
Show the holder of the insura	nce as: D	eputy Director, F	Permit Division, 1100 4th St	SW, W	ashington, DC 20024				
<ul> <li>Include a 30-day advance not</li> </ul>									
<ul> <li>Include these amounts of insu</li> <li>State that the insurance cove</li> </ul>									
If the insurance is for one spe				16 300h	e of the mountaine is	s			
					(address of raze				
36. Insurance Company		37. Policy of	or Certificate No.	W	38. Expiration D	ate			
39. Asbestos in Building? If yes, indicate location:	Yes	. □ No		0	fficial Use Only				
			Fee	Ву		Date			

# E S FI S FI S FI S S FI S S S FI S S S FI S FI S FI S S F

#### GOVERNMENT OF THE DISTRICT OF COLUMBIA

### APPLICATION FOR RAZE PERMIT INSTRUCTIONS

#### **GENERAL INFORMATION**

- In order to raze a building, the Property Owner or Contractor must first get a Raze Permit, which starts the process of utility disconnections and further regulatory approvals.
- The Owner or Contractor must get a Raze Permit, which approves the razing method and certifies that the utilities have been
  properly disconnected.
- Razing a building before you get a Raze Permit is a violation of the Construction Code (DCMR 12) -- and can result in significant
  fines and penalties.
- Raze Permit fees are assessed based on information you provide; any fee adjustment necessary after field inspection will be assessed on issuance of the Raze Permit.
- Sidewalk deposits and/or tap bills may be required before Raze Permit issuance. Contact DDOT's Public Space Management Administration at 202 442 4670 to get more information.
- Get the soil erosion package for Raze Contractors from DDOE's Soil Erosion Unit, located in the Permit Center, to prepare your raze
  operation plan.
- A plumbing supplemental permit, obtained by a plumber Registered and Licensed in the District of Columbia, is required for any water/sewer line cap.
- Fees are required for abandonment of the water/sewer services in the public easement (paved road).
- You must pay any outstanding water bills before a Raze Permit can be issued.
- You are required to obtain a sign-off by any adjacent property owners when the raze involves party walls.

#### RAZE PERMIT APPLICATION PROCESS

#### Raze Permit

- 1. Complete Areas 1-4 and Section A of the application and submit:
  - a. Certification for Raze Permit Application
  - b. Current Certificate of Insurance General Liability
  - c. Environmental Intake Form (EIF)
  - d. Photo(s) accurately depicting premises
- 2. For residential property, DCRA staff will prepare and forward clearance letters to the Rent Administrator for review and approval.
- DCRA staff will prepare and give letters to the applicant for the Historic Preservation Review Board and/or the US Commission of Fine Arts, if applicable. The applicant must get the necessary approvals and submit them to the Permit Division.
- 4. Payment of the Raze Permit fee is required. Fee calculation is based upon the volume of the structure in cubic feet times .02.
- DCRA staff will prepare and issue clearance letters to the applicant for these agency approvals/sign-offs:

DCRA Construction Inspection

DCRA Plumbing Inspection

DDOT Public Space

DDOE Asbestos Abatement

DOH Vector Control

Washington Gas - Utility cut off

WASA - Sewer/water line cut

DCRA Zoning Administrator - Overlay impacts

DDOE Soil Erosion Control Verizon Telephone Co - Utility cut off on site

 The applicant is responsible for submitting clearance letters to required agencies, paying any required fees to the agencies, getting written approvals, and returning the originals to DCRA.

- 7. Before DCRA will issue a Raze Permit, the building(s) must be unoccupied. If the building is still occupied, DCRA will accept and process the Permit Application, but will not issue the Permit until the applicant notifies the Permit Division that the building is vacant.
- 8. After the applicant has provided all required approved clearance letters, vacated the property, and paid any additional fees as determined by the field inspection, DCRA will issue a Raze Permit granting the applicant the authority to raze the structure by the razing method specified in the Application.

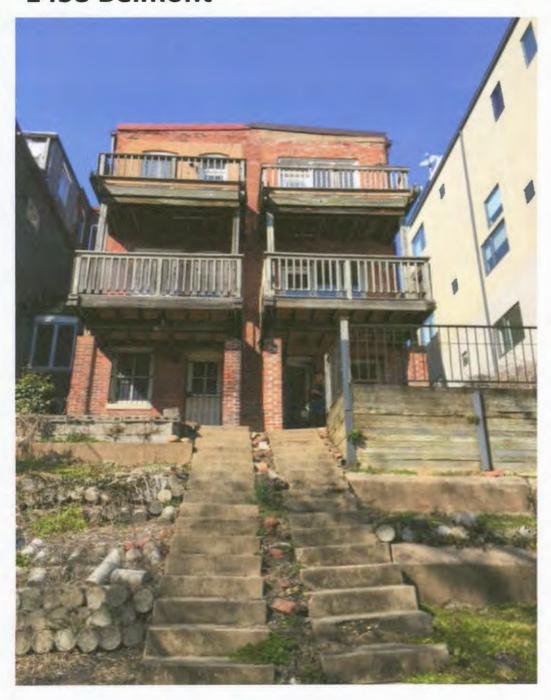
NOTE: DCRA will not issue any Raze Permits before the end of the applicable 30-day Advisory Neighborhood Commission (ANC) notification period.

### 1458 Belmont





### 1458 Belmont







### **Department of Consumer and Regulatory Affairs**

Permit Operations Division
1100 4th Street SW
Washington DC 20024
Tel. (202) 442 - 4589 Fax (202) 442 - 4862
ΤΟ SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

Date:	June 03, 2016		Cap Id:	R1600170
	Historic Preservation Office			
Washi	ngton, DC 20024			
Re: Re	quest for clearance of premises subject to	razing operations		
this da	olication to raze the structure iden te with the Permit Operations Divi property. We are hereby requestin	sion. Our records do	not reveal any kin-	d of conservation holds
Addres	s: FOXHALL RD NW			
LOT: 0	978 SQUARE: 1363 TYPE: Sing	gle Family		VACANT: Yes
the cle	notify our office of the satisfactor arance section below and returning tet S.W. Washington D.C. 20024			
		CLEARANCE		
	to inform you that we researched our repositions to proceeding with the pro	-		ove and we
Date: _	Signatur	e:		
Name o	f releasing HPO Official. (print)			<del></del>

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# APPLICATION FOR RAZE PERMIT

FJ-264 3H

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print ligibly in ink. Please provide detailed information. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2,

105.1.7.2, and Section 155	A.		<u> </u>						
R16001	70				Applic	ation Date:	6.3	.2014	
1. Address of Proposed Work	,	1. INFOR	MATIO	ON'PROP	<b>ERTY</b> Ward	4a. Square	4b. Suffix	5. Lot	
1522 Foxhall Rd					ree -	1363	40. Odnik	0978	
		2. APPL	ICANT	INFORMAT	TON				
6. Property Owner		7. Complete mailing		The state of the state of		ne Number(s)	9. Email	A Sa	
District Properties LLC	strict Properties LLC 11614 Ivystone Ct Apt 20			0, 20191					
10. Agent/Contractor for Own	D. Agent/Contractor for Owner (if applicable) 11. Complete mailing address			s (include zip)	12. Ph	one Number(s)	13. Ema	ait	
AB Consulting, A. Brown		4802 Fort Totten	Drive N	E, 20011	202.4	15.1424	anbco	nsults@gm/ilmi	
CAR TO LITERATE		3.1	TYPE 0	F PERMIT					
14. Check all that apply:		mit							
	- 1/4   1/4	4 DESC	PIPTIO	N OF BUILI	DING		- 03		
15. Description of Building to	be Razed (e.g., t	The state of the s	. 14 11.44.44	Comment of the last	DING	1	6. Existing Nu	mber of Stories of B	
Two story detached shing	gle single famil	y dwelling				2	2		
17. Use(s) of Property (specif	fically indicate if a	ny use is residential.)		18. M	faterials o	of Building (brid	k, wood, etc.)	Market Control (Control (Contr	
Residential				Woo	d, shing	le			
19. Bldg Length (ft)	20. Bld	g Width (ft)		21. Bldg Hei	ght (ft)		22. Bldg Volume Lu		
20	45			25			22,500		
		OFF	ICIAL	USE ONLY	No. of the				
CONDITIONS/ COMMENTS					0-				
			5						
A STATE OF THE STA									
				5					

		SEC	TION A. RAZE PERM	IT				
23. Raze Contractor's Name		24. Contrac	tor's Address (including zip	code)	25. Contractor's Phone			
(g ^A								
26. Historic District?	☐ Yes	i ⊠ No	33. Raze Contractor	Signature				
27. CFA?	Yes	ĭ No						
28. Raze Entire Building?	×Yes	No	34. Property Owner S	Signature	( /	<i>f</i>		
29. Building Condemned?	☐ Yes	× No		1	X			
30a. Party Wall?	Yes	×No	30b. If yes, adjacent property owner sign		signature is required.			
			30c. Any raze permit application for a building(s) involving party vinclude 2 copies of a plan that show how the party wall(s) will be p					
31. Building Vacant?	ling Vacant?			ant before	Raze Permit	issuance.		
32. Public Space Vault?		×No			Official Use Only			
			Fee	Ву		Date		
33. Plumber's Name		34. Plumbe	r's License Number		35. Raze M	Method (ball, bulldozer, by hand, etc.)		
					Bulldozer	dozer		
1. You must submit a Certificate of Insu square feet or less in area and not m 2. The Certificate should:  Show the holder of the insu Include a 30-day advance r Include these amounts of ir State that the insurance co	rance as: De notice cancel isurance cov vers "Razing	eputy Director lation clause. Perage: Bodily Operations in	detached from any other bi , Permit Division, 1100 4th Injury, \$100,000; Aggregat n the District of Columbia," i	St SW, Wee, \$300,00 f the scop	the same or a ashington, Do 00; and Propo e of the insur	adjoining premises. C 20024	500	
36. Insurance Company		37. Policy	or Certificate No.	y, 64 1 y		ation Date		
American Zurich Insuran	Cl		1225063		5/19	12017		
39. Asbestos in Building? If yes, indicate location:	Yes			Of	Official Use Only			
			Fee	Ву	2	Date		



1363 0978 09/26/2004





### **Department of Consumer and Regulatory Affairs**

Permit Operations Division 1100 4th Street SW Washington DC 20024

Tel. (202) 442 - 4589 Fax (202) 442 - 4862 TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

Date:	June 03, 2016	Cap Id:	R1600171
D.C. F	Historic Preservation Office		
1100 4	th Street S.W. , Rm E650		
Washi	ngton, DC 20024		
Re: Re	quest for clearance of premises subject to razing operations		
this da	plication to raze the structure identified below, locate the with the Permit Operations Division. Our records of property. We are hereby requesting confirmation from	do not reveal any kind o	of conservation holds
Addres	ss:		
1516	FOXHALL RD NW		
LOT: 0	938 SQUARE: 1363 TYPE: Single Family	VA	CANT: Yes
the cle	notify our office of the satisfactory completion of your earance section below and returning this form to the eet S.W. Washington D.C. 20024		
	CLEARANCE		
	to inform you that we researched our records concerning the objections to proceeding with the proposed razing of said s		and we
Date:	Signature:		
Name o	of releasing HPO Official. (print)		



# APPLICATION FOR RAZE PERMIT

FJ-707865

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide detailed information. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 105.1.7.2, and Section 155A.	2008 [	DC Building Code Supplem	ent Cha <sub>l</sub>	pter I	§ 105.	.1.7, 105.1.7.	1, 105.1	.7.1.1, 105	5.1.7.1.2,	
R160017	/				Applic	cation Date:	G:	3.2	016	
	7	1. INFORMATION	N ON P	ROPE	RTY		U - V - 4-			
1. Address of Proposed Work			2. Quad	3. V	Vard	4a. Square	4b.	Suffix	5. Lot	
1516 Foxhall Rd			NW	Thr	ee 🕶	1363			0938	
		2. APPLICANT	INFOR	MAT	ON	****				
6. Property Owner		7. Complete mailing address	(include z	ude zip) 8. Phone Number(s)			9.	9. Email		
District Properties LLC		11614 Ivystone Ct Apt 20	0, 20191							
10. Agent/Contractor for Owner (if appl	ntractor for Owner (if applicable) 11. Complete mailing address (in			(include zip) 12. Phone Number(s)			) 1:	3. Email		
AB Consulting, A. Brown		4802 Fort Totten Drive NE	, 20011		202.4	15.1424	a	nbconsult	s@gmail.com	
	5-V 1	3. TYPE 0	F PERM	ΛΙΤ						
14. Check all that apply:	ze Pem	nit								
		4. DESCRIPTION		UILD	ING	4-4	40.5.4		10 in this	
15. Description of Building to be Razed			illing)				16. Exist	ng Number	of Stories of Bldg:	
Two story detached wood single	family o	dwelling					2			
17. Use(s) of Property (specifically indi	cate if an	ny use is residential.)		18. Ma	terials	of Building (brid	ck, wood	, etc.)		
Residential			1	Wood						
19. Bldg Length (ft)	20. Bldg	) Width (ft)	21. Bldg	21. Bldg Height (ft)			22. Bldg Volume (cu ft) (L x W x H)			
20	45		25				22,50	00		
ANNE SEE SEE SEE	or letter	OFFICIAL	USE ON	ILY						
CONDITIONS/ COMMENTS:										
							# 50L4			
									NAME OF	
			A Marin I						Ca a D	
							3		70	

		SE	CTION A. RAZE PE	ERMIT						
23. Raze Contractor's Name	24. Contractor's Address (including zip code)			25. Contractor's Phone						
26. Historic District?	☐Ye:	s × No	33. Raze Contra	actor Signature						
27. CFA?	☐ Ye	s⊠ No								
28. Raze Entire Building?	ĭ Ye:	s No	34. Property Ow	34. Property Owner Signature						
29. Building Condemned?	☐ Yes	s ⋉ No								
30a. Party Wall?	□Yes	No .	30b. If yes, a	idjacent prop	perty owner signati	ure is required.				
				volving party walls must be all(s) will be protected.						
31. Building Vacant?	XYes	No	Building must be	Raze Permit issuance	,					
32. Public Space Vault?	ПYes	× No			Official Use Only	Only				
од адмо ор асо таам.			Fee	Ву		Date				
				100						
33. Plumber's Name		34. Plumb	er's License Number		35. Raze Method (ba	all, bulldozer, by hand, etc.)				
				Bulldozer						
1. You must submit a Certificate of Ins square feet or less in area and not	urance as: Do notice cance insurance cov overs "Razing	e story, wholly eputy Directo llation clause verage: Bodil Operations	y detached from any other, Permit Division, 1100 c. y Injury, \$100,000; Agg in the District of Columi	her building on 0 4th St SW, W pregate, \$300,0 bia," if the scop	the same or adjoining /ashington, DC 20024 100; and Property Dam	premises, lage, \$100,000. or blanket coverage.				
36. Insurance Company 37. Policy of			y or Certificate No.	or Certificate No. 38. Expiration Date						
American Zurich Insurance ER092			7225063	1225043 5/19/2017						
39. Asbestos in Building? If yes, indicate location:	Yes	No		Official Use Only						
			Fee	Ву		Date				



1363 0938 09/26/2004



May 19, 2016

### Government of the District of Columbia

### **Department of Consumer and Regulatory Affairs**

**Permit Operations Division** 1100 4th Street SW Washington DC 20024





Date: May 19, 2016	Cap Id:	R1600162
D.C. Historic Preservation Office		
1100 4th Street S.W., Rm E650		
Washington, DC 20024		
Re: Request for clearance of premises subject to razing operations		
An application to raze the structure identified below, located in the this date with the Permit Operations Division. Our records do not on this property. We are hereby requesting confirmation from your permit.	reveal any kind	of conservation holds
Address:		
6517 BARNABY ST NW		
LOT: 0088 SQUARE: 2350 TYPE:	V	ACANT: Yes
Please notify our office of the satisfactory completion of your instance clearance section below and returning this form to the D.C.R 4th Street S.W Washington D.C. 20024.		
CLEARANCE		
This is to inform you that we researched our records concerning the structure have no objections to proceeding with the proposed razing of said structure		e and we
Date: Signature:		
Name of releasing HPO Official. (print)		



### **APPLICATION FOR RAZE PERMIT**

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

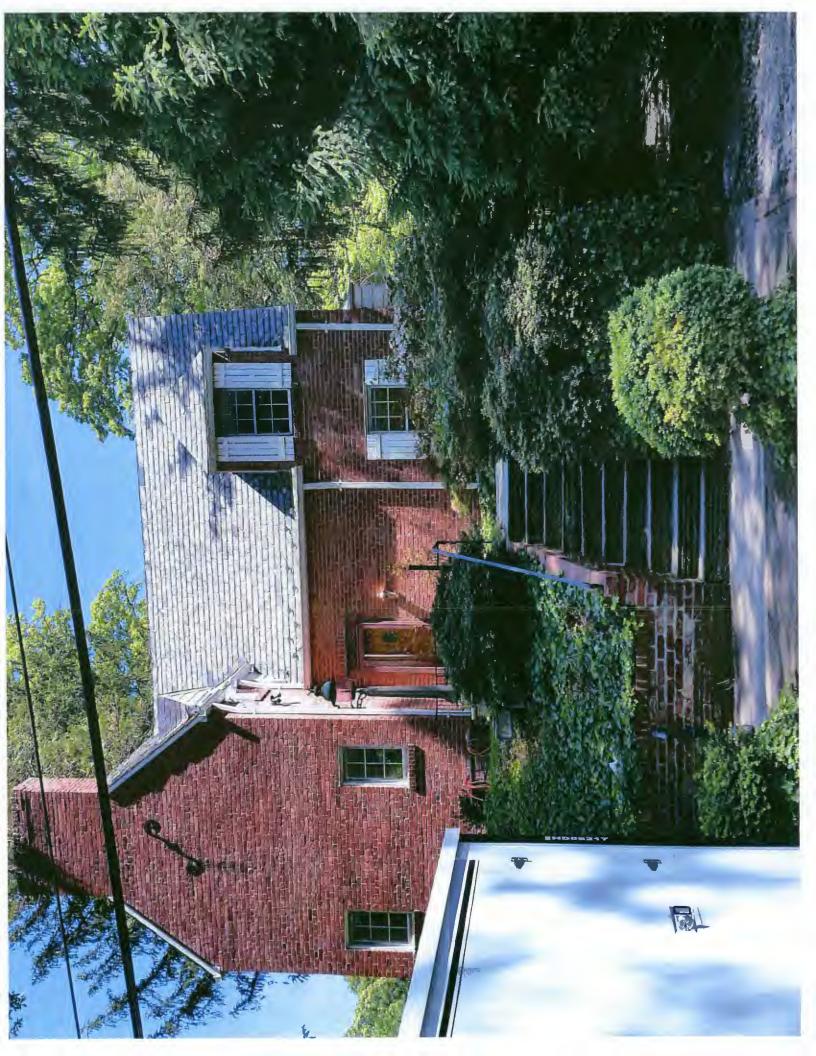
Applicable code sections are in the 2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

R16 00 162		A	oplication Date:			
	1. INFORMATIO	N ON PROPER				
1. Address of Proposed Work		2. Quad 3. Ward	4a. Square	4b. Suffix	5. Lot	
6517 BARNABY S	7	NW One				
	2. APPLICANT					
6. Property Owner	7. Complete mailing address		Phone Number(	s) 9. Email		
ROSSET & HOLMON	6104 29TH ST WASH DC ZO		202-669-0	343 ZHOLES	58218REGM	
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing addres		. Phone Number	(s) 13. Email		
OWNER						
	3. TYPE 0	FPERMIT				
14. Check all that apply:	mit					
	4. DESCRIPTIO	N OF BUILDIN	G			
15. Description of Building to be Razed (e.g.,	two story brick single family dw	elling)		16. Existing Number	of Stories of Bldg:	
TWO STORY BRICK SI	NEW FAMILY	1 DWEL	LING	2		
17. Use(s) of Property (specifically indicate if	any use is residential.)	18. Mater	ials of Building (I	brick, wood, etc.)		
RESIDENTIAL		BR	CK 4	WOOD		
19. Bldg Length (ft) 20. Bld	dg Width (ft)	21. Bldg Height (	ft)	22. Bldg Volume	(cu ft) (L x W x H)	
34'	32'	35'		38,080		
		USE ONLY				
CONDITIONS/ COMMENTS:						

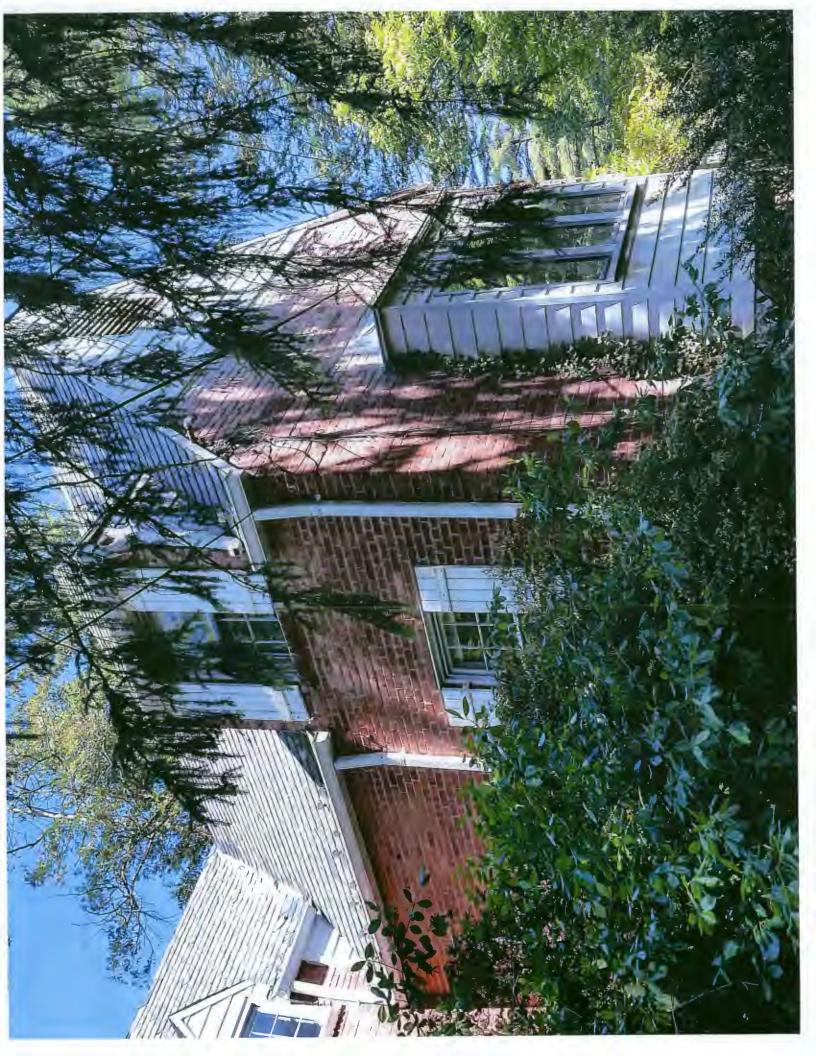
		SECTI	ON A. RAZE PER	RMIT						
			s Address (including z	zip code)	25. Contractor's Ph	one				
HOLMAN & CO WAS			N, DC 20015 202-669-0343							
26. Historic District? ☐Yes ☑No			39. Raze Contract	33: Raze Contractor Signature						
27. CFA?	? Yes No			White De						
28. Raze Entire Building?	Yes	No	34. Broperty, Owner Signature							
29. Building Condemned?	Yes	No	White to							
30a. Party Wall?	Yes	No	30b. If yes, ad	jacent prop	erty owner signat	ure is required.				
						volving party walls must be vall(s) will be protected.				
31. Building Vacant?	Yes	No	Building must be	acant before	Raze Permit issuance	<b>).</b>				
32. Public Space Vault?	Yes	No			Official Use Only					
			Fee	Ву		Date				
33. Plumber's Name		34. Plumber's	License Number		35. Raze Method (b	all, buildozer, by hand, etc.)				
CRESCENT PEUMSI	ve-	10	15 BULDOZER			R				
You must submit a Certificate of Insural square feet or less in area and not more.										
2. The Certificate should:		own, miony o	out of the state o	or solitaring off	are called or diagonille	3 61-21-11-22-1				
Show the holder of the insura			Permit Division, 1100	4th St SW, W	ashington, DC 20024					
Include a 30-day advance no					100 - 1 D 1 D	6400 000				
<ul> <li>Include these amounts of inst</li> <li>State that the insurance cove</li> </ul>										
If the insurance is for one special control in the insurance	-									
					(address of raze operation)					
			or Certificate No.		38. Expiration Date					
BUILDERS MUTUAL CDP			0055482 9/5/16			116				
39. Asbestos in Building? If yes, indicate location:				Official Use Only						
			Fee	Ву		Date				



2350 0088 06/29/2004









3028 0809 07/26/2004

38 31 Georgia Ame. NW

3819 14th STNW



3819 14 th ST NW 2016



## Government of the District of Columbia Department of Consumer and Regulatory Affairs

Permit Operations Division



1100 4th Street SW
Washington DC 20024
Tel. (202) 442 - 4589 Fax (202) 442 - 4862
TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

Date:	May 23, 2016		Cap Id:	R1600164
1100 4t	listoric Preservation Office h Street S.W. , Rm E650 agton, DC 20024			
Re: Req	uest for clearance of premises subject to	razing operations		
this da	plication to raze the structure idente with the Permit Operations Diving property. We are hereby requesting	sion. Our records do not reveal	any kind	of conservation holds
Address	S:			
301 F	LORIDA AVE NE			
LOT: 08	303 SQUARE: 0772 TYPE:		V	ACANT: Yes
the cle	notify our office of the satisfactor arance section below and returning set S.W Washington D.C. 20024.	· · · · · · · · · · · · · · · · · · ·		-
		CLEARANCE		
	to inform you that we researched our r objections to proceeding with the pro	_	ntified above	e and we
Date: _	Signatur	e:		
Name o	f releasing HPO Official. (print)			



# GOVERNMENT OF THE DISTRICT OF COLUMBIA APPLICATION FOR RAZE PERMIT AND/OR SUPPLEMENTAL RAZING OPERATIONS PERMIT

Please type or print legibly in ink. Provide *detailed information*. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will **void this application**.

The owner of record must sign the application with an original signature.

Applicable code sections are in the 2003 DC Building Code Supplement Chapter I § 107.2.4 107.2.10 (5), and 110.1.

K1600164	1600/64 Application Date: May 23, 2016							
		1. INFORMATIO	N ON PE	ROP				
Address of Proposed Work			2. Quad	2		4a. Square	4b. Suffix	5. Lot
204 Florido Avo NE			NE	6		07721		0803
301 Florida Ave NE			NE	6		0772N		0803
		2. APPLICANT						
6. Property Owner	7. Complete mailing addres	g address (include zip) 8. Phone Nu			one Number(s)	Number(s) 9. Email		
301 FL Manager LLC		2217 14th Street NW	NW, 3rd Floor (202) 4			) 417-3937 dan@d		odc.com
10. Agent/Contractor for Owner (if applicable)  Kim Mitchell, CDKM Consulting LLC  11. Complete mailing address 1615 New Hampshire Washington, DC 2000			Ave, 4th Flr (202) 332-00 (202) 420-00			332-0090 420-0091 796-1197	13. Email kim@cdkmconsulting.com	
		3. TYPE (	OF PERM	ит	()			
14. Check all that apply:	Raze Peri	**************************************			perati	ons Permit		
		4. DESCRIPTIO	N OF BU	JILD	ING			
1-story brick/masonry of 17. Use(s) of Property (specifical 041 Store-Small 1-Sto 19. Bldg Length (ft)	ally indicate if a			rick	/masc		wood, etc.)	cu fi) (L x W x H)
44' - 6"	28' -	10"	12' - 6"			1	16,039	
		OFFICIAL	USE ONLY	1		L		

		SE	CTION A. RAZE PERMIT							
23. Raze Contractor's Name		24. Contractor's Address (including zip code)			25. Contractor's Phone					
TBD										
26. Historic District? ☐ Yes 🔀			33. Raze Contractor Signa	ature						
27. Fine Arts District?	☐ Yes	s ⊠ No								
28. Raze Entire Building?			34. Property Owner Signature							
29. Building Condemned?	☐ Yes	s 🔯 No	-042-							
30a. Party Wall? ☐ Yes ☒ No			30b. If yes, adjacent property owner signature is required.							
31. Building Vacant?	Ø Yes	s 🗆 No	Building must be vacant before Supplemental Raze Operations Permit issuance.							
32. Public Space Vault?	☐ Yes	s ⊠ No	***************************************	Off	icial Use Only					
			Fee	Ву		Date				
	SECTION	B. SLIPPI	EMENTAL RAZE OPERAT	TIONS	PERMIT					
35. Raze Contractor's Name TBD	1	actor's Address (including zip code	-	37. Contractor's Phone						
38. Plumber's Name		39. Plumb	er's License Number	40	0. Raze Method (ball,	, bulldozer, by hand, etc.)				
TBD										
<ul> <li>Include a 30-day advance</li> <li>Include these amounts of</li> <li>State that the insurance of</li> </ul>	notice cance insurance cov overs "Razing	llation clause verage: Bodi Operations	or, Permit Division, 941 North Cape. by Injury, \$100,000; Aggregate, \$3 in the District of Columbia," if the te that, "Razing Operations at	300,000;	and Property Damag	ge, \$100,000.				
in the insurance is for one	specific addre	ass only, sta		ddress (	of raze operation)					
41. Insurance Company		42. Policy	or Certificate No.	43	3. Expiration Date					
44. Historic District?	☐ Yes	□No	52. Raze Contractor Signature	e						
45. Fine Arts District?	☐ Yes	□No								
46. Raze Entire Building?	☐ Yes	□ No	53. Property Owner Signature							
47. Building Condemned?	☐ Yes	□No								
48a. Party Wall? ☐ Yes ☐ No			47b. If you answer yes, adjacent property owner must sign here.							
			47c. Any raze permit application for a building(s) involving party walls must in 2 copies of a plan that shows how the party wall(s) will be protected.							
49. Building Vacant?	☐ Yes	□ No	Building must be vacant before	e Supple	emental Raze Operat	ions Permit issuance.				
50. Public Space Vault?	☐ Yes	□No		Offic	ial Use Only					
51. Asbestos in Building? If yes, indicate location:	☐ Yes	□ No	Fee B	by	Da	ate				



0772N 0803 08/22/2004





### PAR 01890022 08/01/2004

MARVIN GAYE RECREATION CFR. 6201 Banks Place NQ.