

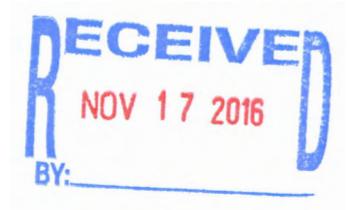
## Raze Applications Applied for: November 10 - December 5, 2016

| STATUS DATE | ID       | Address                                   | Description of Work                            | PER SUB TYPE | DCRA Notice Date | ANC Expiration Date | SSL       | ANC | Zoning | Applicant | Owner Name           |
|-------------|----------|---|--|--------------|------------------|---------------------|-----------|-----|--------|-----------|----------------------|
| 11/30/2016  | R1700033 | 1313 IRVING ST NW, WASHINGTON, DC 20010   | RAZE BRICK GARAGE                              | Raze         | December 6, 2016 | January 19, 2017    | 2848 0804 | 1A  | RF-1   | SHEBA     | LAURA M PETAWAY      |
| 11/14/2016  | R1700028 | 5708 SHERIER PL NW, WASHINGTON, DC 20016  | RAZE A 1.5 STORY SFD                           | Raze         | December 6, 2016 | January 19, 2017    | 1452 0830 | 3D  | R-1-B  | PRICE     | PETER J LYDON        |
| 11/15/2016  | R1700029 | 3702 HARRISON ST NW, WASHINGTON, DC 20015 | TWO STORY BRICK BUILDING SINGLE FAMILY DWELING | Raze         | December 6, 2016 | January 19, 2017    | 1877 0041 | 3G  | R-1-B  | JAN MARUT | RAM K CHOPRA         |
| 12/5/2016   | R1700034 | 3701 NEW HAMPSHIRE AVE NW                 | TWO STORY MIXED USE BUILDING STORE RESTAURANT  | Raze         | December 6, 2016 | January 19, 2017    | 3030 0805 | 4C  |        | FONTANA   |                      |
| 11/28/2016  | R170031  | 2812 Georgia AVE NW                       | Two story semi-detached brick dwelling         | Raze         | December 6, 2016 | January 19, 2017    | 2886 0330 | 1B  | MU-4   | BROWN     | Farideh Anaraki      |
| 11/28/2016  | R170030  | 2814 Georgia AVE NW                       | Two story semi-detached brick dwelling         | Raze         | Decemer 6, 2016  | January 19, 2017    | 2775 0330 | 1B  | MU-R   | BROWN     | 2814 Georgia Ave LLC |
| 11/28/2016  | R1700032 | 331 N ST NE, WASHINGTON, DC 20002         | RAZE A TWO STORY BRICK BUILDING                | Raze         | December 6, 2016 | January 19, 2017    | 0772 0023 | 6C  | PDR-1  | CASSIE    | 331 N JUST LLC       |



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: November 15, 2016

Cap Id: R1700029

**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:  
3702 HARRISON ST NW

LOT: **0041** SQUARE: **1877** 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, whitening 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 1 § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

RIF 000 29

Application Date: **NOVEMBER 15, 2016**

### 1. INFORMATION ON PROPERTY

|  |         |         |            |            |        |
|--|---------|---------|------------|------------|--------|
| 1. Address of Proposed Work                | 2. Quad | 3. Ward | 4a. Square | 4b. Suffix | 5. Lot |
| 3702 HARRISON ST. NW, WASHINGTON DC, 20015 | NW      | Three   | 1877       |            | 0041   |

### 2. APPLICANT INFORMATION

|  |   |                     |                         |
|--|---|---------------------|-------------------------|
| 6. Property Owner                              | 7. Complete mailing address (include zip)     | 8. Phone Number(s)  | 9. Email                |
| RAM KUMAR CHEPRA                               | 2860 ALBEMARLE ST, NW<br>WASHINGTON DC, 20008 | 202-537-6921        | RCHOPRA2@yahoo.com      |
| 10. Agent/Contractor for Owner (if applicable) | 11. Complete mailing address (include zip)    | 12. Phone Number(s) | 13. Email               |
| JANICE MARUT                                   | 3540 N. VALLEY ST<br>ARLINGTON, VA 22207      | 703-429-7497        | permitpushers@gmail.com |

### 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:       |                      |                                     |
| TWO STORY BRICK BUILDING SINGLE FAMILY DWELLING  | TWO STORIES                                   |                      |                                     |
| 17. Use(s) of Property (specifically indicate if any use is residential.)              | 18. Materials of Building (brick, wood, etc.) |                      |                                     |
| RESIDENTIAL  | BRICK   |                      |                                     |
| 19. Bldg Length (ft)   | 20. Bldg Width (ft)                           | 21. Bldg Height (ft) | 22. Bldg Volume (cu ft) (L x W x H) |
| 32ft-8 inches (MAX)  | 40 ft.  | 31 ft-3 inches       | 36,180 cu ft.                       |

### OFFICIAL USE ONLY

CONDITIONS/COMMENTS

Large shaded area for official use only, containing conditions and comments.

**SECTION A. RAZE PERMIT**

|                                    |   |                                |
|------------------------------------|---|--------------------------------|
| 23. Raze Contractor's Name<br><br> | 24. Contractor's Address (including zip code)<br><br> | 25. Contractor's Phone<br><br> |
|------------------------------------|---|--------------------------------|

|                           |   |  |
|---------------------------|---|--|
| 26. Historic District?    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 33. Raze Contractor Signature<br><br>  |
| 27. CFA?                  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| 28. Raze Entire Building? | <input type="checkbox"/> Yes <input type="checkbox"/> No            | 34. Property Owner Signature<br><br><i>[Signature]</i>   |
| 29. Building Condemned?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| 30a. Party Wall?          | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 30b. If yes, adjacent property owner signature is required.  |
| 31. Building Vacant?      | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected. |
| 32. Public Space Vault?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Building must be vacant before Raze Permit issuance.   |
| <b>Official Use Only</b>  |   |  |
|                           | Fee   | By   |
|                           |   | Date   |

|                            |                                      |  |
|----------------------------|--------------------------------------|--|
| 33. Plumber's Name<br><br> | 34. Plumber's License Number<br><br> | 35. Raze Method (ball, bulldozer, by hand, etc.)<br><br> |
|----------------------------|--------------------------------------|--|

1. You must submit a Certificate of Insurance covering the raze operation/contractor, unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story, wholly detached from any other building on the same or adjoining premises.

2. The Certificate should:

- Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024
- Include a 30-day advance notice cancellation clause.
- Include these amounts of insurance coverage: Bodily Injury: \$100,000; Aggregate: \$300,000; and Property Damage: \$100,000.
- State that the insurance covers "Razing Operations in the District of Columbia." If the scope of the insurance is for blanket coverage.
- If the insurance is for one specific address only, state that: "Razing Operations at \_\_\_\_\_ (address of raze operation)"

|                               |                                       |                             |
|-------------------------------|---------------------------------------|-----------------------------|
| 36. Insurance Company<br><br> | 37. Policy or Certificate No.<br><br> | 38. Expiration Date<br><br> |
|-------------------------------|---------------------------------------|-----------------------------|

|   |   |                          |    |      |
|---|---|--------------------------|----|------|
| 39. Asbestos in Building?<br>If yes, indicate location: | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <b>Official Use Only</b> |    |      |
|   |   | Fee                      | By | Date |
|   |   |                          |    |      |



1877 0041 08/08/2004



3030 0805 08/19/2004

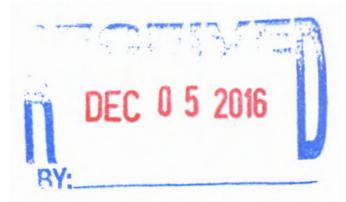
3701 New Hampshire Avenue NW



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: November 28, 2016

Cap Id: R1700030

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:
2812 GEORGIA AVE NW

LOT: 0331 SQUARE: 2886 TYPE: Single Family 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 1 § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

Application Date:

## 1. INFORMATION ON PROPERTY

| 1. Address of Proposed Work | 2. Quad | 3. Ward | 4a. Square | 4b. Suffix | 5. Lot |
|-----------------------------|---------|---------|------------|------------|--------|
| 2812 Georgia Ave            | NW      | One     | 2886       |            | 0331   |

## 2. APPLICANT INFORMATION

|  |  |                                     |                                    |
|--|--|-------------------------------------|------------------------------------|
| 6. Property Owner<br>Farideh Anaraki                           | 7. Complete mailing address (include zip)<br>1144 Halesworth Dr, Potmacm MD      | 8. Phone Number(s)                  | 9. Email                           |
| 10. Agent/Contractor for Owner (if applicable)<br>Ashley Brown | 11. Complete mailing address (include zip)<br>4802 Fort Totten Drive NE, Wash DC | 12. Phone Number(s)<br>202.415.1424 | 13. Email<br>anbconsults@gmail.com |

## 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)<br>Two story common brick |                             | 16. Existing Number of Stories of Bldg:<br>Two         |   |
| 17. Use(s) of Property (specifically indicate if any use is residential.)<br>Residential                         |                             | 18. Materials of Building (brick, wood, etc.)<br>Brick |   |
| 19. Bldg Length (ft)<br>41   | 20. Bldg Width (ft)<br>20.5 | 21. Bldg Height (ft)<br>28                             | 22. Bldg Volume (cu ft) (L x W x H)<br>23,534 |

## OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

**SECTION A. RAZE PERMIT**

|                                   |  |                               |
|-----------------------------------|--|-------------------------------|
| 23. Raze Contractor's Name<br>TBD | 24. Contractor's Address (including zip code)<br>TBD | 25. Contractor's Phone<br>TBD |
|-----------------------------------|--|-------------------------------|

|                           |   |  |
|---------------------------|---|--|
| 26. Historic District?    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 33. Raze Contractor Signature  |
| 27. CFA?                  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| 28. Raze Entire Building? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 34. Property Owner Signature   |
| 29. Building Condemned?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| 30a. Party Wall?          | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 30b. If yes, adjacent property owner signature is required.  |
|                           |   | 30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected. |
| 31. Building Vacant?      | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Building must be vacant before Raze Permit issuance.   |
| 32. Public Space Vault?   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <b>Official Use Only</b>   |
|                           |   | Fee By Date  |

|                           |                                     |   |
|---------------------------|-------------------------------------|---|
| 33. Plumber's Name<br>TBD | 34. Plumber's License Number<br>TBD | 35. Raze Method (ball, bulldozer, by hand, etc.)<br>Bulldozer |
|---------------------------|-------------------------------------|---|

1. You must submit a Certificate of Insurance covering the raze operation/contractor- unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story, wholly detached from any other building on the same or adjoining premises.

2. The Certificate should:

- Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024
- Include a 30-day advance notice cancellation clause.
- Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.
- State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.
- If the insurance is for one specific address only, state that, "Razing Operations at \_\_\_\_\_"  
(address of raze operation)

|                       |                               |                     |
|-----------------------|-------------------------------|---------------------|
| 36. Insurance Company | 37. Policy or Certificate No. | 38. Expiration Date |
|                       |                               |                     |

|   |  |                          |
|---|--|--------------------------|
| 39. Asbestos in Building?<br>If yes, indicate location: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <b>Official Use Only</b> |
|   |  | Fee By Date              |



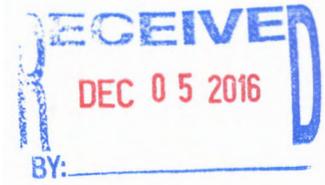
2886 0331 08/30/2004



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: November 28, 2016

Cap Id: R1700031

**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:  
2814 GEORGIA AVE NW

LOT: 0330 SQUARE: 2886 TYPE: **Single Family** 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 1 § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

Application Date:

## 1. INFORMATION ON PROPERTY

| 1. Address of Proposed Work | 2. Quad | 3. Ward | 4a. Square | 4b. Suffix | 5. Lot |
|-----------------------------|---------|---------|------------|------------|--------|
| 2814 Georgia Ave            | NW      | One     | 2886       |            | 0330   |

## 2. APPLICANT INFORMATION

| 6. Property Owner                              | 7. Complete mailing address (include zip)  | 8. Phone Number(s)  | 9. Email              |
|--|--|---------------------|-----------------------|
| 2814 Georgia Ave LLC                           | 709 Oak Knoll Ter, Rockville, MD           |                     |                       |
| 10. Agent/Contractor for Owner (if applicable) | 11. Complete mailing address (include zip) | 12. Phone Number(s) | 13. Email             |
| Ashley Brown                                   | 4802 Fort Totten Drive NE, Wash DC         | 202.415.1424        | anbconsults@gmail.com |

## 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:       |                      |                                     |
|--|---|----------------------|-------------------------------------|
| Two story vinyl siding   | Two   |                      |                                     |
| 17. Use(s) of Property (specifically indicate if any use is residential.)              | 18. Materials of Building (brick, wood, etc.) |                      |                                     |
| Residential  | Vinyl siding                                  |                      |                                     |
| 19. Bldg Length (ft)   | 20. Bldg Width (ft)                           | 21. Bldg Height (ft) | 22. Bldg Volume (cu ft) (L x W x H) |
| 41   | 20.5  | 28                   | 23,534                              |

## OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

**SECTION A. RAZE PERMIT**

|                                   |  |                               |
|-----------------------------------|--|-------------------------------|
| 23. Raze Contractor's Name<br>TBD | 24. Contractor's Address (including zip code)<br>TBD | 25. Contractor's Phone<br>TBD |
|-----------------------------------|--|-------------------------------|

|  |  |
|--|--|
| 26. Historic District?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    | 33. Raze Contractor Signature  |
| 27. CFA?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  |  |
| 28. Raze Entire Building?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |
| 29. Building Condemned?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |
| 30a. Party Wall?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No          |  |
| 31. Building Vacant?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No      | 34. Property Owner Signature   |
| 32. Public Space Vault?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | 30b. If yes, adjacent property owner signature is required.  |
|  | 30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected. |
|  | Building must be vacant before Raze Permit issuance.   |

|                          |    |      |
|--------------------------|----|------|
| <b>Official Use Only</b> |    |      |
| Fee                      | By | Date |
|                          |    |      |

|                           |                                     |   |
|---------------------------|-------------------------------------|---|
| 33. Plumber's Name<br>TBD | 34. Plumber's License Number<br>TBD | 35. Raze Method (ball, bulldozer, by hand, etc.)<br>TBD |
|---------------------------|-------------------------------------|---|

1. You must submit a Certificate of Insurance covering the raze operation/contractor— unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story, wholly detached from any other building on the same or adjoining premises.

2. The Certificate should:

- Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024
- Include a 30-day advance notice cancellation clause.
- Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.
- State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.
- If the insurance is for one specific address only, state that, "Razing Operations at \_\_\_\_\_"  

(address of raze operation)

|                       |                               |                     |
|-----------------------|-------------------------------|---------------------|
| 36. Insurance Company | 37. Policy or Certificate No. | 38. Expiration Date |
|                       |                               |                     |

|   |  |                          |    |      |
|---|--|--------------------------|----|------|
| 39. Asbestos in Building?<br>If yes, indicate location: | <input type="checkbox"/> Yes <input type="checkbox"/> No | <b>Official Use Only</b> |    |      |
|   |  | Fee                      | By | Date |
|   |  |                          |    |      |



2886 0330 08/30/2004



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: November 28, 2016

Cap Id: R1700032

**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:  
331 N ST NE

LOT: 0023 SQUARE: 0772 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, whitening 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 1 § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

**R17 000 32**

Application Date: **11.28.16**

## 1. INFORMATION ON PROPERTY

|                             |         |         |            |            |        |
|-----------------------------|---------|---------|------------|------------|--------|
| 1. Address of Proposed Work | 2. Quad | 3. Ward | 4a. Square | 4b. Suffix | 5. Lot |
| 331 N Street                | NE      | Six     | 772        |            | 23     |

## 2. APPLICANT INFORMATION

|  |  |                     |                          |
|--|--|---------------------|--------------------------|
| 6. Property Owner                              | 7. Complete mailing address (include zip)  | 8. Phone Number(s)  | 9. Email                 |
| 331 N Just, LLC                                | 12435 Park Potomac Ave, Potomac, MD 20854  | 240-876-5463        | Dbelnap@foulgerpratt.com |
| 10. Agent/Contractor for Owner (if applicable) | 11. Complete mailing address (include zip) | 12. Phone Number(s) | 13. Email                |
| Devin Belnap                                   | 12435 Park Potomac Ave, Potomac, MD 20854  | 240-876-5463        | Dbelnap@foulgerpratt.com |

## 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:       |                                     |
| Two story brick commercial/retail building   |                     | 2   |                                     |
| 17. Use(s) of Property (specifically indicate if any use is residential.)              |                     | 18. Materials of Building (brick, wood, etc.) |                                     |
| Commercial/Retail  |                     | Brick   |                                     |
| 19. Bldg Length (ft)   | 20. Bldg Width (ft) | 21. Bldg Height (ft)                          | 22. Bldg Volume (cu ft) (L x W x H) |
| 164'   | 129                 | 37'   | <del>716,209</del>                  |

## OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

**782,772 cu.ft.**

**SECTION A. RAZE PERMIT**

|  |   |   |
|--|---|---|
| 23. Raze Contractor's Name<br><b>Foulger-Pratt Contracting</b> | 24. Contractor's Address (including zip code)<br><b>12435 Park Potomac Ave, Potomac, MD</b> | 25. Contractor's Phone<br><b>240-499-9600</b> |
|--|---|---|

|  |  |
|--|--|
| 26. Historic District?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No    | 33. Raze Contractor Signature<br>   |
| 27. CFA?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  |  |
| 28. Raze Entire Building?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 34. Property Owner Signature<br><b>By: 331 N JUST, LLC</b><br>              |
| 29. Building Condemned?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |  |
| 30a. Party Wall?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No          | 30b. If yes, adjacent property owner signature is required.  |
| 31. Building Vacant?<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No      | 30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected. |
| 32. Public Space Vault?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | Building must be vacant before Raze Permit issuance.   |
| <b>Official Use Only</b>   |  |
| Fee  | By   |
|  | Date   |

|  |   |  |
|--|---|--|
| 33. Plumber's Name<br><b>Foulger-Pratt Contracting</b> | 34. Plumber's License Number<br><b>15026844</b> | 35. Raze Method (ball, bulldozer, by hand, etc.)<br><b>Bulldozer</b> |
|--|---|--|

1. You must submit a Certificate of Insurance covering the raze operation/contractor- unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story, wholly detached from any other building on the same or adjoining premises.

2. The Certificate should:

- Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024
- Include a 30-day advance notice cancellation clause.
- Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.
- State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.
- If the insurance is for one specific address only, state that, "Razing Operations at \_\_\_\_\_"  
(address of raze operation)

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|--|---|--|
| 36. Insurance Company<br><b>Liberty Mutual Insurance Company</b> | 37. Policy or Certificate No.<br><b>TB2-251-29123-086</b> | 38. Expiration Date<br><b>10/01/2017</b> |
|--|---|--|

|   |   |                          |      |
|---|---|--------------------------|------|
| 39. Asbestos in Building?<br>If yes, indicate location: | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <b>Official Use Only</b> |      |
|   |   | Fee                      | By   |
|   |   |                          | Date |

