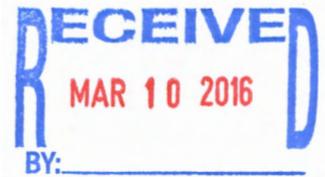


## Raze Applications Applied for February 29, 2016 through March 18, 2016

ISSUED DATE	ID	Address	TYPE	STATUS	DCRA Notice	ANC Review Expiration	SSL	ANC	Zoning	Applicant	Owner Name	Description of Work
3/10/2016	R1600102	2638 DOUGLAS PL SE	Raze	New Application	March 21, 2016	May 2, 2016	5872 0122	8C		DAY	JOSHALYN LAWRENCE	RAZE A SFD
3/8/2016	R1600097	600 L ST NW	Raze	New Application	March 21, 2016	May 2, 2016	0450 0825	6E		CAPITOL PERMITS	JEMALS ERITREAN LLC	one story brick commercial building
3/8/2016	R1600098	1026 6TH ST NW	Raze	New Application	March 21, 2016	May 2, 2016	0450 0830	6E	DD/C-2-C	CAPITOL PERMITS	ER-NINE INC	THREE STORY COMMERCIAL BRICK AND CONCRETE BUILDING
3/4/2016	R1600095	5018 V ST NW	Raze	New Application	March 21, 2016	May 2, 2016	1388 0091	3D	R-1-B	WING	PETER F SKERIJ	SINGLE CAR GARAGE - NO UTILITES
3/8/2016	R1600099	4619 49TH ST NW	Raze	New Application	March 21, 2016	May 2, 2016	1495 0008	3E	R-1-B	COLLINS	CHRISTOFER M COLLINS	ONE STORY BRICK ONE CAR GARAGE
3/14/2016	R1600104	4831 ALTON PL NW	Raze	New Application	March 21, 2016	May 2, 2016	1498 0821	3E	R-1-B	CRUICKSHANK	FRANCISCO J MIRKOW	RAZE A GARAGE
3/15/2016	R1600105	1403 CRITTENDEN ST NW	Raze	New Application	March 21, 2016	May 2, 2016	2706 0803	4C	R-4	HAROLD HOFFMAN-LOGSDON	JOSEPH E MALONEY	To Raze Garage
3/15/2016	R1600106	1300 H ST NE	Raze	New Application	March 21, 2016	May 2, 2016	1026 0099	6A	HS/C-2-A	MELISSA DIAZ	DISTRICT OF COLUMBIA	Raze one story wood framed building
3/15/2016	R1500194	315 K ST NW	Raze	New Application	March 21, 2016	May 2, 2016	0526 0804	6E	DD/C-2-C	SEQUAR	WELCH FAMILY LP 9	ONE STORY BRICK BUILDING
3/15/2016	R1500195	317 K ST NW	Raze	New Application	March 21, 2016	May 2, 2016	0526 0805	6E	DD/C-2-C	SEQUAR	WELCH FAMILY LP 9	TWO STORY BRICK BUILDING
2/29/2016	R1600093	5309 B ST SE	Raze	New Application	March 21, 2016	May 2, 2016	5304 0003	7E	R-2	STEWART	MARCELLA A CREEK	one story building w/ basement
3/8/2016	R1600101	1226 PLEASANT ST SE	Raze	New Application	March 21, 2016	May 2, 2016	5791 0024	8A	R-4	BUELL	CATHERINE V BEULL	RAZE A WOOD GARAGE
3/8/2016	R1600100	1621 W ST SE	Raze	New Application	March 21, 2016	May 2, 2016	5755 0009	8A	R-3	BYRD	OSMAN MEJIA	TWO STORY SINGLE FAMILY DWELLING
3/16/2016	R1600109	2495 ALABAMA AVE SE	Raze	New Application	March 21, 2016	May 2, 2016	5730 0913	8B	R-5-A	WILL CLEVELAND	ALABAMA AVENUE LLC	TWO STORY BRICK MULTI-FAMILY UNOCCUPIED
3/10/2016	R1600103	2421 SHANNON PL SE	Raze	New Application	March 21, 2016	May 2, 2016	5788 0821	8A		MOORE CONSTRUCTION	CECIL HOWZE	TWO STORY BRICK SINGLE FAMIILY HOME



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: March 10, 2016

Cap Id: R1600102

**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:  
2638 DOUGLAS PL SE

LOT: 0122 SQUARE: 5872 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/16 00 102

Application Date:

MARCH 2016

## 1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
2638 DOUGLASS PLACE S.E.	<del>NE</del> S.E.	<del>ONE</del> 8	5872		0122

## 2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
JOSHALYN LAWRENCE	211 S STREET N.W. <sup>20001</sup> WDC	202 387-0746	Joshelen@Junc.com
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
William R. Day	2258 HUNTER PLACE S.E. <sup>20020</sup>	202 302-5231	wordepdc@aol.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:	
SINGLE FAMILY HOME		ONE	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
VACANT RESIDENTIAL		WOOD, SHINGLES	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
30'	20'	25'	15,000

## OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

**SECTION A. RAZE PERMIT**

23. Raze Contractor's Name <b>JAMES L. TAYLOR TRASH REMOVAL CONTRACTOR, INC.</b>		24. Contractor's Address (including zip code) <b>1430 A STREET N.E. WASHINGTON, D.C. 20002</b>	25. Contractor's Phone <b>202 547-5905</b>
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 <i>Josh Lawrence</i>	
29. Building Condemned?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
30a. Party Wall?	<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.	
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 <b>JACKSON'S PLUMBING RALPH E. JACKSON</b>	34. Plumber's License Number <b>DM 1116</b>	35. Raze Method (ball, bulldozer, by hand, etc.) <b>HAND, MACHINERY</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.

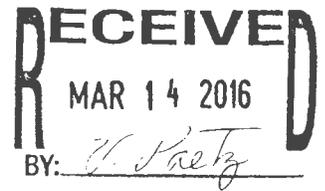
2. The Certificate should:

- 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)

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

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





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: March 08, 2016

Cap Id R1600097

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:
600 L ST NW

LOT: 825 SQUARE: 0450 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: 3-16-16 Signature: [Handwritten Signature]

Name of releasing HPO Official. (print) [Handwritten Name]



# 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/16 000 97*

Application Date:

### 1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
600 L Street NW	NW	One	0450		0825

### 2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Jemal's Eritrean LLC	702 H Street NW Ste 400 Wash, DC 20004	202-638-6300	dturner@douglasdev.com
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
Capitol Permits	490 M St SW W103 Washington DC 20004	202-387-6669	phil@capitolpermits.com

### 3. TYPE OF PERMIT

14. Check all that apply:  Raze Permit

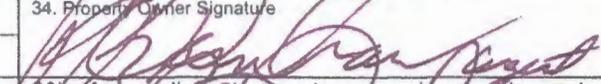
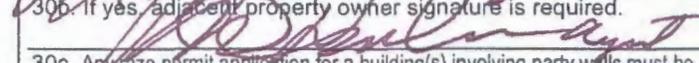
### 4. DESCRIPTION OF BUILDING

15. Description of Building to be Razed (e.g., two story brick single family dwelling)		16. Existing Number of Stories of Bldg:	
One story commercial brick building		1	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
commercial		brick, wood, glass	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
20	60	15	<del>19,800</del> 18,000

### OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

**SECTION A. RAZE PERMIT**

23. Raze Contractor's Name James G. Davis		24. Contractor's Address (including zip code) 12530 Parklawn Dr. Rockville, MD 20852		25. Contractor's Phone 301-881-2990	
26. Historic District?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	33. Raze Contractor Signature  34. Property Owner Signature  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.			
27. CFA?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
28. Raze Entire Building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
29. Building Condemned?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
30a. Party Wall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
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 Kalos Construction Co.	34. Plumber's License Number PC 1000634	35. Raze Method (ball, bulldozer, by hand, etc.) Bulldozer
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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 Howard Eales, Inc.	37. Policy or Certificate No. 4T-CO2706R65A	38. Expiration Date 06/23/2016
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39. Asbestos in Building? If yes, indicate location:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Official Use Only</b>		
		Fee	By	Date



## HB20, Lot 831– 610-612 L Street NW

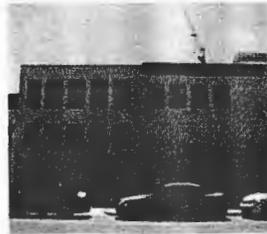
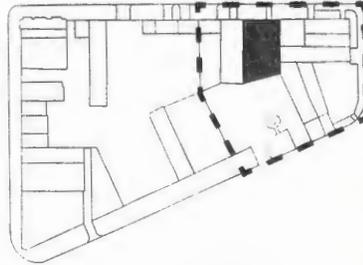
Year of Construction: 1916, 1924, and later additions

Owner: Joseph M. Peake  
Designer: B. Stanley Simmons  
Builder: C.E. Bunch

**Building Description:** The western portion of the building was originally constructed as a single story stable and garage in 1916. Substantially altered and enlarged with the construction of the first two stories of the eastern portion in 1924, the building served its next owners as a garage and auto accessories store. The Lanman Engraving Company further expanded and altered the building in the 1950's, including adding two stories atop the 1916 structure on the west half of the lot. The 1928 Sanborn Fire Insurance map corrected to 1960 depicts the 1916 one story garage and the 1924 addition as three-story buildings at the L Street frontage and two stories at the rear. It appears there have been a number of alterations and additions to the structures for which permits cannot be located.

**Preservation Status:** The building is a contributing element to the Mount Vernon Square Historic District (DC designation 9/7/199, NR listing 9/3/1999). The building has been substantially altered over the years, including the addition of two stories.

**Proposed Preservation Plan:** As per the previous concept proposal presented in July of 2005 (HPA 05-401), the structures will be demolished in their entirety.



## DB03, Lots 823, 824, 826, 830 - 1026 Sixth & 606 L Street NW

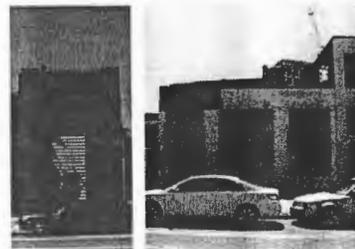
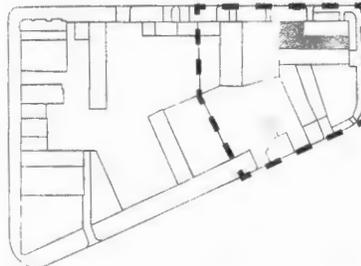
Year of Construction: 1931

Owner: Potomac Iron Works Company  
Architect: Joseph Baumer  
Builder: Samuel Alpher

**Building Description:** Three stories on 6th Street, and two stories on L Street, the brick and concrete structure has been altered extensively over the years.

**Preservation Status:** The building is not a contributing element to the Mount Vernon Square Historic District.

**Proposed Preservation Plan:** The structure will be demolished in its entirety.



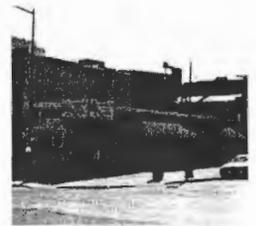
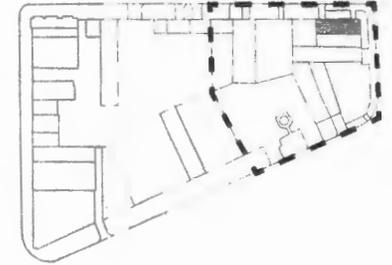
## DB02, Lot 825 – 1028 Sixth Street NW

Year of Construction: 1960

**Building Description:** The one story building is faced with red brick and features a large projecting bay window on 6th Street NW, and another projecting bay window on L Street NW.

**Preservation Status:** The building is not a contributing element to the Mount Vernon Square Historic District.

**Proposed Preservation Plan:** The structure will be demolished in its entirety.



## HB21, Lot 827 – 1024 Sixth Street NW

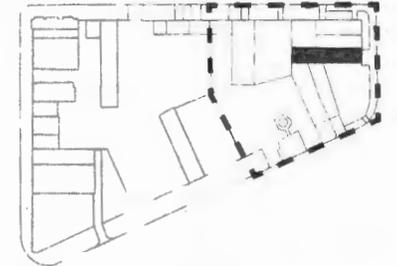
Year of Construction: 1905

Owner: D.S. Williamson  
Architect: T.F. Schneider  
Builder: J.R. Haislip

**Building Description:** Originally constructed as a junk store, in the 1950's building was heavily altered and became A. V. Ristorante Deli.

**Preservation Status:** The building is a contributing element to the Mount Vernon Square Historic District (DC designation 9/7/199, NR listing 9/3/1999). The building retains little resemblance to its original appearance and it appears there have been a number of alterations to the façade that were not documented by building permits.

**Proposed Preservation Plan:** As per the previous concept proposal presented in July of 2005 (HPA 05-401), the structures will be demolished in their entirety.





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

**RECEIVED**  
 MAR 14 2016  
 BY: V. Paetz

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 March 08, 2016

Cap Id R1600098

**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.

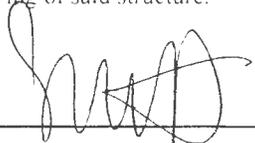
Address:  
 1026 6TH ST NW

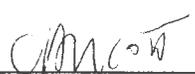
LOT: **0830** SQUARE: **0450** TYPE: **VACANT Yes**

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: 3/16/16 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 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 000 98*

Application Date:

### 1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
1026 6th Street NW	NW	One	0450		0830

### 2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Jemal's Eritrean LLC	702 H Street NW Ste 400 Wash, DC 20001	202-638-6300	dturner@douglasdev.com
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
Capitol Permits	490 M St SW W103 Washington DC 20001	202-387-6669	phil@capitolpermits.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:	
Three story commercial brick and concrete building		3	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
commercial		brick, concrete	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
20	100	35	70,000

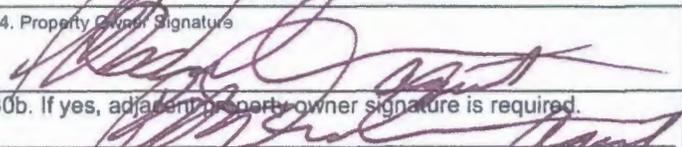
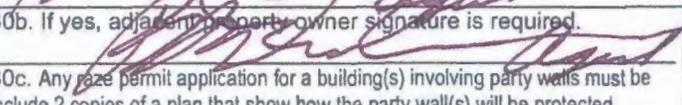
### OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

**SECTION A. RAZE PERMIT**

23. Raze Contractor's Name <b>James G. Davis</b>	24. Contractor's Address (including zip code) <b>12530 Parklawn Dr. Rockville, MD 20852</b>	25. Contractor's Phone <b>301-881-2990</b>
---	--	---

26. Historic District? <input checked="" type="checkbox"/> Yes <input 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	
29. Building Condemned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

30a. Party Wall? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	34. Property Owner Signature 
31. Building Vacant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	30b. If yes, adjacent property owner signature is required. 
32. Public Space Vault? <input type="checkbox"/> Yes <input checked="" 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.
Building must be vacant before Raze Permit issuance.	

33. Plumber's Name <b>Kalos Construction Co.</b>	34. Plumber's License Number <b>PC 1000634</b>	35. Raze Method (ball, bulldozer, by hand, etc.) <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)

36. Insurance Company <b>Howard Eales, Inc.</b>	37. Policy or Certificate No. <b>4T-CO2706R65A</b>	38. Expiration Date <b>06/23/2016</b>
--	---	--

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



## HB20, Lot 831– 610-612 L Street NW

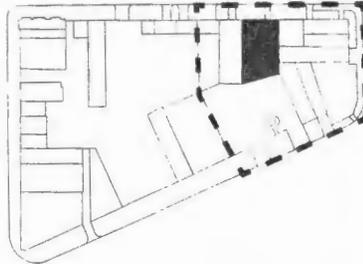
Year of Construction: 1916, 1924, and later additions

Owner: Joseph M. Peake  
Designer: B. Stanley Simmons  
Builder: C.E. Bunch

**Building Description:** The western portion of the building was originally constructed as a single story stable and garage in 1916. Substantially altered and enlarged with the construction of the first two stories of the eastern portion in 1924, the building served its next owners as a garage and auto accessories store. The Lanman Engraving Company further expanded and altered the building in the 1950's, including adding two stories atop the 1916 structure on the west half of the lot. The 1928 Sanborn Fire Insurance map corrected to 1960 depicts the 1916 one story garage and the 1924 addition as three-story buildings at the L Street frontage and two stories at the rear. It appears there have been a number of alterations and additions to the structures for which permits cannot be located.

**Preservation Status:** The building is a contributing element to the Mount Vernon Square Historic District (DC designation 9/7/199, NR listing 9/3/1999). The building has been substantially altered over the years, including the addition of two stories.

**Proposed Preservation Plan:** As per the previous concept proposal presented in July of 2005 (HPA 05-401), the structures will be demolished in their entirety.



## DB03, Lots 823, 824, 826, 830 - 1026 Sixth & 606 L Street NW

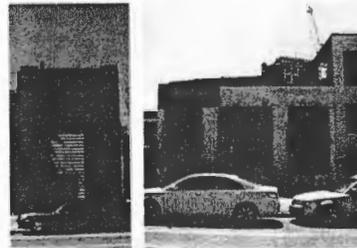
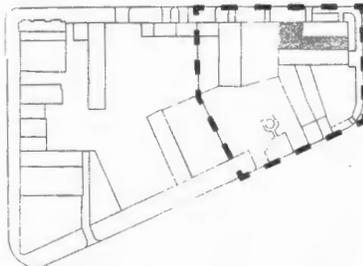
Year of Construction: 1931

Owner: Potomac Iron Works Company  
Architect: Joseph Baumer  
Builder: Samuel Alpher

**Building Description:** Three stories on 6th Street, and two stories on L Street, the brick and concrete structure has been altered extensively over the years.

**Preservation Status:** The building is not a contributing element to the Mount Vernon Square Historic District.

**Proposed Preservation Plan:** The structure will be demolished in its entirety.



## DB02, Lot 825 – 1028 Sixth Street NW

Year of Construction: 1960

**Building Description:** The one story building is faced with red brick and features a large projecting bay window on 6th Street NW, and another projecting bay window on L Street NW.

**Preservation Status:** The building is not a contributing element to the Mount Vernon Square Historic District.

**Proposed Preservation Plan:** The structure will be demolished in its entirety.



## HB21, Lot 827 – 1024 Sixth Street NW

Year of Construction: 1905

Owner: D.S. Williamson  
Architect: T.F. Schneider  
Builder: J.R. Haislip

**Building Description:** Originally constructed as a junk store, in the 1950's building was heavily altered and became A. V. Ristorante Deli.

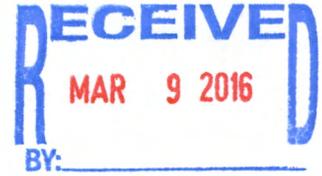
**Preservation Status:** The building is a contributing element to the Mount Vernon Square Historic District (DC designation 9/7/199, NR listing 9/3/1999). The building retains little resemblance to its original appearance and it appears there have been a number of alterations to the façade that were not documented by building permits.

**Proposed Preservation Plan:** As per the previous concept proposal presented in July of 2005 (HPA 05-401), the structures will be demolished in their entirety.





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: March 04, 2016

Cap Id: R1600095

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:
5018 V ST NW

LOT: 0091 SQUARE: 1388 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 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.

R/G 000 95

Application Date: 3/4/16

## 1. INFORMATION ON PROPERTY

1. Address of Proposed Work <b>5018 V ST. NW</b>	2. Quad <b>NW</b>	3. Ward <b>.</b>	4a. Square <b>1388</b>	4b. Suffix	5. Lot <b>0091</b>
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## 2. APPLICANT INFORMATION

6. Property Owner <b>Peter Skerij</b>	7. Complete mailing address (include zip) <b>5018 V ST. NW Wash. DC 20007</b>	8. Phone Number(s) <b>202-561-1485</b>	9. Email
10. Agent/Contractor for Owner (if applicable) <b>Chris Wing</b>	11. Complete mailing address (include zip) <b>6502 Carriage Dr. Alexandria, VA 22310</b>	12. Phone Number(s) <b>202-746-0006</b>	13. Email <b>nexttingamits@yahoo.com</b>

## 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) <b>Single Car Garage - No Utilities effected</b>		16. Existing Number of Stories of Bldg: <b>1</b>	
17. Use(s) of Property (specifically indicate if any use is residential.) <b>residential Garage</b>		18. Materials of Building (brick, wood, etc.) <b>Brick + wood</b>	
19. Bldg Length (ft) <b>17'</b>	20. Bldg Width (ft) <b>10'</b>	21. Bldg Height (ft) <b>15'</b>	22. Bldg Volume (cu ft) (L x W x H) <b>2,550</b>

## OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

**SECTION A. RAZE PERMIT**

23. Raze Contractor's Name	24. Contractor's Address (including zip code)	25. Contractor's Phone
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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 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.

31. Building Vacant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Building must be vacant before Raze Permit issuance.
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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 <i>MA</i>	34. Plumber's License Number	35. Raze Method (ball, bulldozer, by hand, etc.)
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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
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39. Asbestos in Building? If yes, indicate location:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Official Use Only</b>		
		Fee	By	Date

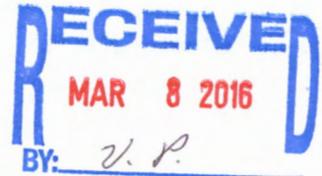
garage pics from James Londot (VPL&D)

Case Single  
Car garage  
only





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: March 08, 2016

Cap Id: R1600099

①

**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:  
4619 49TH ST NW

LOT: 0008 SQUARE: 1495 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) \_\_\_\_\_

*okay to raze KPW*



# 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.

R16000 99

Application Date: \_\_\_\_\_

## 1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
4619 4 <sup>TH</sup> STREET NW DC	NW	3	1495		8

## 2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
MR & MRS. COLLINS	4619 4 <sup>TH</sup> STREET NW DC 22201	703-9755594	COLLINSMCC@HOTMAIL.COM
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
BEYOND DESIGN STUDIOS	11890 SUNRISE VALLEY DR. RESTON VA 20191	7036350334	LUIS@BEYONDDSIGNSTUDIOS.COM

## 3. TYPE OF PERMIT

14. Check all that apply:
<input checked="" type="checkbox"/> Raze Permit

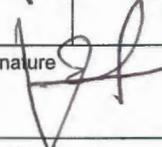
## 4. DESCRIPTION OF BUILDING

15. Description of Building to be Razed (e.g., two story brick single family dwelling)	16. Existing Number of Stories of Bldg:		
ONE STORY SINGLE CAR GARAGE	DNE		
17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)		
GARAGE ACCESSORY	BRICK / WOOD JOIST		
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
16' FT	8' FT	8' FT	1,024 CU.FT.

## OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

**SECTION A. RAZE PERMIT**

23. Raze Contractor's Name <b>BEYOND DESIGN STUDIOS</b>		24. Contractor's Address (including zip code) <b>11890 SUNRISE VALLEY DR. RESTON VA 20191</b>		25. Contractor's Phone <b>703 635-0334</b>	
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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	34. Property Owner Signature <b>CHRISTOPHER COLLINS</b>			
29. Building Condemned?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	30b. If yes, adjacent property owner signature is required.			
30a. Party Wall?	<input type="checkbox"/> Yes <input checked="" 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.			
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 <b>N/A</b>	34. Plumber's License Number <b>N/A</b>	35. Raze Method (ball, bulldozer, by hand, etc.) <b>BY BULLDOZER / BY HAND</b>
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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
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39. Asbestos in Building? If yes, indicate location:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Official Use Only</b>		
		Fee	By	Date

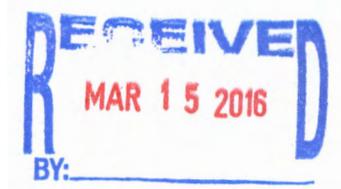


4619





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: March 15, 2016

Cap Id: R1600105

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:  
1403 CRITTENDEN ST NW

LOT: 0803 SQUARE: 2706 TYPE: VACANT:

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., Washinton 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: 3/15/2016 Signature: [Handwritten Signature]

Name of releasing HPO Official. (print) Maloney



# APPLICATION FOR RAZE PERMIT

R 1600105

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.

Application Date:

## 1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
1403 Crittenden St NW	NW	One	2706	0803	

## 2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
HAROLD HOFFMAN-LOGSDON	1403 Crittenden St NW 20011	804-787-0905	hhh31978@yahoo.com
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email

## 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:		
One story detached garage	1		
17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)		
Storage	Brick		
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
20	14	9	2520

## OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

No utilities connected

*[Handwritten signature]*

**SECTION A. RAZE PERMIT**

23. Raze Contractor's Name		24. Contractor's Address (including zip code)		25. Contractor's Phone	
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 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.					
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		34. Plumber's License Number		35. Raze Method (ball, bulldozer, by hand, etc.)	
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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	
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39. Asbestos in Building? If yes, indicate location:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Official Use Only</b>			
		Fee	By	Date	

Case No	Type	Opened Date
CRM1600297	Enforce/Compliance/Housing/Routine Maintenance	11/04/2015

**Complaint Description**

(Alley Garages: Dilapidated, BRICKS ARE FALLING FROM GARAGE ONTO ADJACENT GARAGE CAUSING IT TO COLLAPSE 1403 CRITTENDEN ( REAR OF BUILDING) HAROLD HOFFMAN 804-787-0905

Status	Total Amt Invoiced	Total Paid	Balance
Inspection Scheduled	0.00	0.00	0.00







1026 0099 08/16/2004

1300 H ST NE



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: March 15, 2016

Cap Id: R1500193

**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:  
311 K ST NW

LOT: **0829** SQUARE: **0526** 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.

R15 00 193

Application Date: 08/21/2015

## 1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
311 K St	NW	Six	526		829

## 2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Welch Family LP 9	930 M St NW APT 1130 Wash DC 200	2023451264	
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
Habte Sequar	907 N St NW #C2, Wash DC 20001	2023520381	sequarh@yahoo.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:		
1 story brick building	1		
17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)		
commercial	brick and wood		
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
65	22	15	21,450 cuft

## OFFICIAL USE ONLY

REMARKS:

**SECTION A. RAZE PERMIT**

<b>23. Raze Contractor's Name</b>	<b>24. Contractor's Address (including zip code)</b>	<b>25. Contractor's Phone</b>
TBD		

<b>26. Historic District?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>33. Raze Contractor Signature</b>						
<b>27. CFA?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
<b>28. Raze Entire Building?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>34. Property Owner Signature</b>						
<b>29. Building Condemned?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
<b>30a. Party Wall?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>30b. If yes, adjacent property owner signature is required.</b>						
<b>31. Building Vacant?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>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.</b>						
<b>32. Public Space Vault?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Building must be vacant before Raze Permit issuance.</b>						
<b>Official Use Only</b>								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">By</td> <td style="width:33%;">By</td> <td style="width:33%;">Date</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>			By	By	Date			
By	By	Date						

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

**You must obtain a City of Columbia Raze Permit before you can begin to demolish a building. The Raze Permit is required for all buildings, regardless of size, that are to be demolished. The Raze Permit is required for all buildings, regardless of size, that are to be demolished.**

**The Raze Permit is required for all buildings, regardless of size, that are to be demolished. The Raze Permit is required for all buildings, regardless of size, that are to be demolished.**

- Raze Permit fee is \$100.00 per building. Payment is due at the time of permit issuance.
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- Raze Permit fee is \$100.00 per building. Payment is due at the time of permit issuance.

<b>36. Insurance Company</b>	<b>37. Policy or Certificate No.</b>	<b>38. Expiration Date</b>

<b>39. Asbestos in Building?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Official Use Only</b>							
<b>If yes, indicate location:</b>		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">By</td> <td style="width:33%;">By</td> <td style="width:33%;">Date</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>		By	By	Date			
By	By	Date							

GOVERNMENT OF THE DISTRICT OF COLUMBIA  
**CERTIFICATION FOR  
 RAZE PERMIT APPLICATION**

This certifies that Welch Family LP 9 (referred to as Owner) owns the property at  
(Legal Name of Property Owner)  
311 K St NW and that the person signing below has the legal authority to execute this Certification  
(Property Address)

and to make the representations and certifications below, on behalf of the Owner:

I am applying for a Raze Permit for the subject property.

I understand that the Raze Permit must be issued prior to any raze activity or operations.

If I do not have a Raze Permit before I start any activity or operations to raze the structure, I will be subject to criminal or civil penalties under District of Columbia laws.

KW (Initial here to certify that you have read and understand this paragraph)

**A. Use of Property as Housing Accommodation**

I hereby certify that the structure to be razed IS NOT a housing accommodation.  
(IS/IS NOT)

If the structure is a housing accommodation, complete Section B. If the structure is not a housing accommodation, skip to Section C and the signature block.

**B. Additional Provisions Applicable to Razing of "Housing Accommodations"**

I agree, in accordance with DC Official Code (DCOC) §§ 42-3506.02(a)-(b) and 14 DCMR § 4400.2, not to use the permits to:

Demolish any housing accommodation or rental unit for the purpose of constructing or expanding a hotel, motel, inn, or other transient residential accommodation.

Construct or expand a hotel, motel, inn, or other transient residential occupancy on the site of a housing accommodation or rental unit demolished after July 17, 1985.

\_\_\_\_\_ (Initial here to certify that you have read and understand this paragraph)

I acknowledge that I must comply with the requirements in the "Tenants Opportunity to Purchase Act," codified in DCOC § 42-3404.02, *et seq.*, and in subchapter VII of the "Rental Housing Act," codified in DCOC §§ 42-3507.01 to 42-3507.03 with implementing regulations in 14 DCMR § 4401. These requirements include, but are not limited to:

Providing tenants with an opportunity to purchase the housing accommodation, via a written copy of an offer for sale, **before** issuing a Notice to Vacate for purposes of demolition or discontinuance of housing use.

Providing tenants with a 180-day Notice to Vacate that complies with and notifies each tenant of his/her potential right to relocation assistance.

\_\_\_\_\_ (Initial here to certify that you have read and understand this paragraph)

**C. Execution and Certification Applicable to All Applicants**

I certify that I have read and understand the requirements in this certification and that any representations I made here are true and accurate to the best of my knowledge. If I fail to follow the above requirements, I acknowledge that this application, and any permits issued as a result of it, may be revoked under DCRA's authority and discretion. I acknowledge that I have been advised that failure to get a Raze Permit before I start operations to raze the structure may subject me to criminal and/or civil penalties.

Name of Owner: Kenneth Welch  
(Print Name of Owner)

Signature: *Kenneth Welch*

Name of Agent: Habte Seguar  
(Print Name of Authorized Agent)

Signature: *Habte Seguar*



County/City of MONTGOMERY  
 Commonwealth/State of MARYLAND  
 The foregoing instrument was subscribed and sworn before me this 26th day of AUGUST, 2015 by KENNETH WELCH  
(Name of person seeking acknowledgement)  
*Habte Seguar*  
 Notary Public  
 My Commission Expires: January 20, 2019

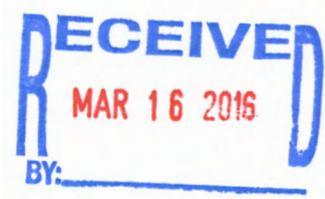
Montgomery County, Maryland  
 Notary Public  
 Yvonne L. Mullins  
 My Commission Expires 1/20/2019

311 K St 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: March 15, 2016

Cap Id: R1500194

**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:  
315 K ST NW

LOT: **0804** SQUARE: **0526** TYPE: VACANT:

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 2006 DC Building Code Supplement Chapter 19 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

R 15 000 194

Application Date: 08/21/2015

### 1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
315 K St	NW	Six	526		804

### 2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Welch Family LP 9	930 M St NW APT 1130 Wash DC 200	2023451264	
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
Habte Sequar	907 N St NW #C2, Wash DC 20001	2023520381	sequarh@yahoo.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:		
1 story brick building	1		
17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)		
commercial	brick and wood		
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
65	22	20	28,600 cuft

CONTRACTOR COMMENTS

**SECTION A. RAZE PERMIT**

<b>23. Raze Contractor's Name</b>	<b>24. Contractor's Address (including zip code)</b>	<b>25. Contractor's Phone</b>
TBD		

<b>26. Historic District?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>33. Raze Contractor Signature</b>
<b>27. CFA?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>28. Raze Entire Building?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>29. Building Condemned?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>30a. Party Wall?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>34. Property Owner Signature</b>
		<b>30b. If yes, adjacent property owner signature is required.</b>
		<b>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.</b>
<b>31. Building Vacant?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Building must be vacant before Raze Permit issuance.</b>
<b>32. Public Space Vault?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Official Use Only</b>
		Fee      By      Date

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



<b>36. Insurance Company</b>	<b>37. Policy or Certificate No.</b>	<b>38. Expiration Date</b>

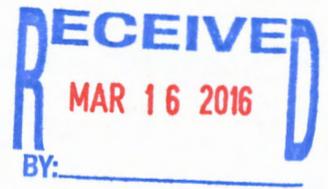
<b>39. Asbestos in Building?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Official Use Only</b>
<b>If yes, indicate location:</b>		
		Fee      By      Date

315 K Street 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: March 15, 2016

Cap Id: R1500195

**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:  
317 K ST NW

LOT: **0805** SQUARE: **0526** 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



Applicant must be a U.S. citizen and 18 years of age or older. If you are filing out of compliance, please type in print legibly in ink. Please provide detailed information. We will not be responsible for items that do not comply. Drawing, including cut, shall be one of each with supporting information will accompany application. The details attached must size the application with an original drawing.

Applicable code sections are: DC Code, Building Code, Department Chapter 18, 2051.2, 2051.7.1, 2051.7.3.1, 2051.7.1.2, 2051.7.2, and Section 1504.

R15 00 195

Application Date: 08/21/2015

### 1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
317 K St	NW	Six	526		805

### 2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Welch Family LP 9	930 M St NW APT 1130 Wash DC 200	2023451264	
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
Habte Sequar	907 N St NW #C2, Wash DC 20001	2023520381	sequarh@yahoo.com

### 3. TYPE OF PERMIT

14. Check all that apply:
<input checked="" type="checkbox"/> 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:		
2 story brick building	2		
17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)		
commercial	brick and wood		
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
65	22	25	35,750 cuft

3

**SECTION A. RAZE PERMIT**

<b>23. Raze Contractor's Name</b>	<b>24. Contractor's Address (Including zip code)</b>	<b>25. Contractor's Phone</b>
TBD		

<b>26. Historic District?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>33. Raze Contractor Signature</b>
<b>27. CFA?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>28. Raze Entire Building?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>34. Property Owner Signature</b>
<b>29. Building Condemned?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>30a. Party Wall?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>30b. If yes, adjacent property owner signature is required.</b>
		<b>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.</b>
<b>31. Building Vacant?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Building must be vacant before Raze Permit issuance.</b>
<b>32. Public Space Vault?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

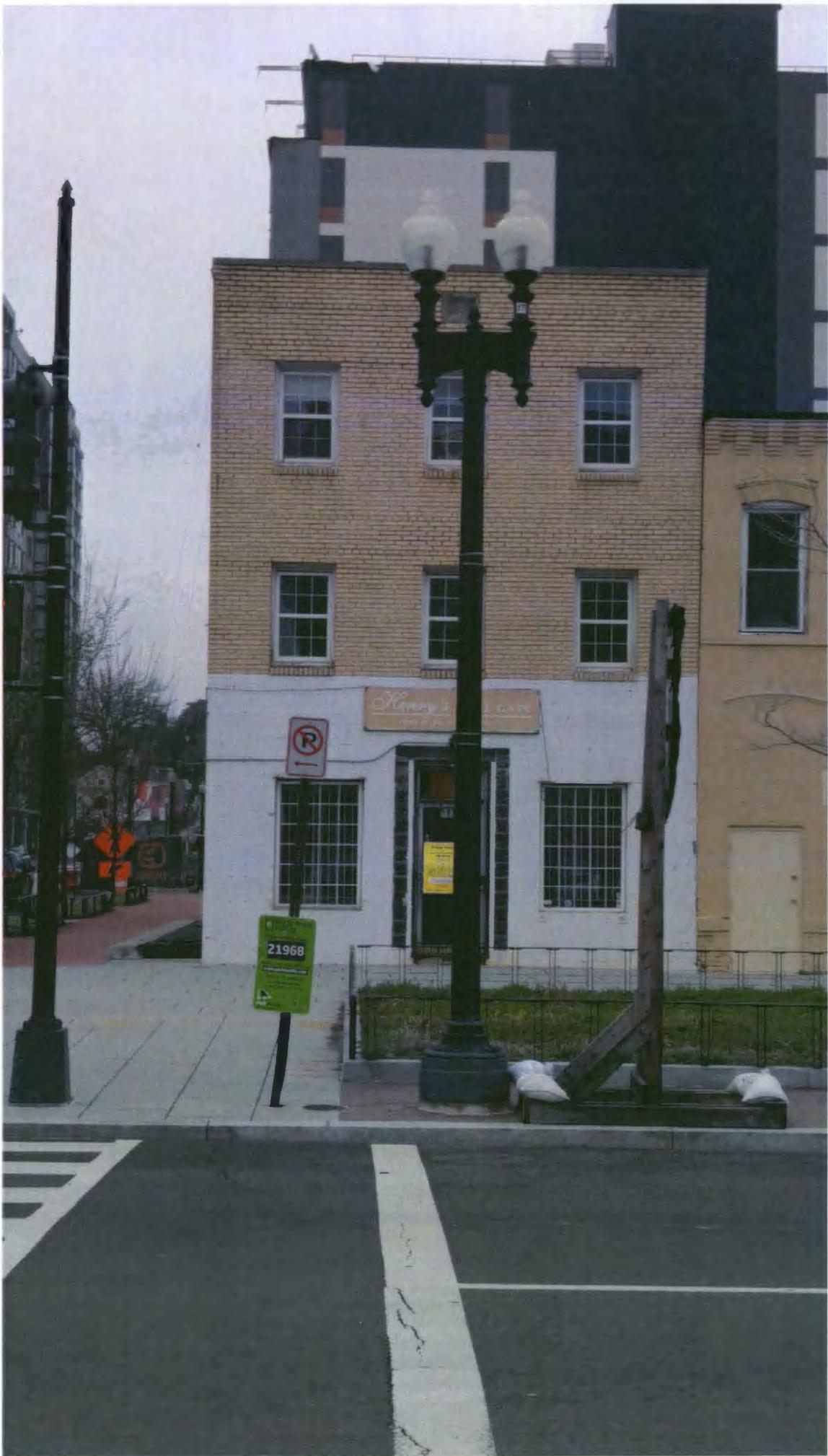
<b>33. Plumber's Name</b>	<b>34. Plumber's License Number</b>	<b>35. Raze Method (ball, bulldozer, by hand, etc.)</b>
TBD		



<b>36. Insurance Company</b>	<b>37. Policy or Certificate No.</b>	<b>38. Expiration Date</b>

<b>39. Asbestos in Building?</b> If yes, indicate location:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

317 K ST N.W.





5304 0003 10/04/2004

5309 B Street SE



5755 0009 08/24/2004

1621 W. Street SE

2495 ALABAMA AVE SE



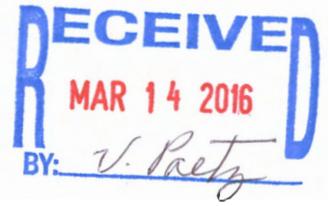


5860 0821 10/10/2004

2421 Shannon Plce SE



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: March 14, 2016

Cap Id: R1600104

**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:  
4831 ALTON PL NW

LOT: 0821 SQUARE: 1498 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 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.

*RI6 00104*

Application Date: \_\_\_\_\_

### 1. INFORMATION ON PROPERTY

1. Address of Proposed Work <i>4831 ALTON PLACE</i>	2. Quad <i>NW</i>	3. Ward	4a. Square <i>1498</i>	4b. Suffix	5. Lot <i>821</i>
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### 2. APPLICANT INFORMATION

6. Property Owner <i>FRANCISCO MIRKOVY</i>	7. Complete mailing address (include zip) <i>4831 ALTON PL NW WASHINGTON DC 20016</i>	8. Phone Number(s) <i>1240 304 7519</i>	9. Email
10. Agent/Contractor for Owner (if applicable) <i>NEIL P. CRICKERSTANK</i>	11. Complete mailing address (include zip) <i>13023 FRENCH LN. SILVER SPRING MD 20910</i>	12. Phone Number(s) <i>301 562 8577</i>	13. Email <i>NPC@ARCH-SOL.BIC</i>

### 3. TYPE OF PERMIT

14. Check all that apply: <input checked="" type="checkbox"/> Raze Permit
--

### 4. DESCRIPTION OF BUILDING

15. Description of Building to be Razed (e.g., two story brick single family dwelling) <i>EXISTING GARAGE.</i>		16. Existing Number of Stories of Bldg: <i>1</i>	
17. Use(s) of Property (specifically indicate if any use is residential.) <i>SINGLE FAMILY</i>		18. Materials of Building (brick, wood, etc.) <i>WOOD.</i>	
19. Bldg Length (ft) <i>20.1'</i>	20. Bldg Width (ft) <i>12.1'</i>	21. Bldg Height (ft) <i>10'</i>	22. Bldg Volume (cu ft) (L x W x H) <i>2,432.1</i>

### OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

**SECTION A. RAZE PERMIT**

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

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 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.		

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 <i>No plumbing in garage</i>	34. Plumber's License Number	35. Raze Method (ball, bulldozer, by hand, etc.)
--	------------------------------	--

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? If yes, indicate location:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Official Use Only</b>		
		Fee	By	Date



7851

147 1/2"



242"