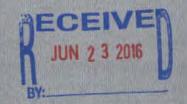
Raze Applications Applied for June 8 through June 27, 2016

STATUS	Raze	Address	Description of Work	DCRA Notice	ANC Expiration	PER SUB	SSL	Ward	ANC	Zoning	Applicant	Owner Name
DATE	Number			Date	Date	TYPE						
6/27/2016	R1500131	222 MASSACHUSETTS AVE NW, WASHINGTON, DC 20001	To Raze a one story concrete structure.	June 28, 2016	August 12, 2016	Raze	0564 0858	2	2C		INTERAGENCY CONSULTANTS	CAPITOL CROSSING II LLC
6/22/2016	R1600181	1405 CRITTENDEN ST NW, WASHINGTON, DC 20011	RAZE A GARAGE GARAGE IS LOCATED BEHIND 14TH ST AND CRITTENDEN ON LOT 832	June 28, 2016	August 12, 2016	Raze	2706 0029	4	4C	R-4	CLARK	RUSELL CLARK
	,	1015 Evarts Street NE Washington, DC	Raze SF Dwelliing and a one story masonry garage	June 28, 2016	August 12, 2016	Raze	3872 0062	5	5B	R-2	ARIMSE ARCHITECTS	Sakib Kahn
6/15/2016	R1600176	2911 RHODE ISLAND AVE NE, WASHINGTON, DC 20018	RAZE A SINGLE STORY CMU COMMERCIAL BUILDING	June 28, 2016	August 12, 2016	Raze	4310 0807	5	5C	C-2-A	BAZZAZIEH	SHAFI & SULTANA INC
6/27/2016	R1600187		Raze one story metal commercial building	June 28, 2016	August 12, 2016	Raze	4131 0044	5	5C	MU-4	OUSMANE	2951 Mills Ave., Inc.
6/20/2016	R1600182	3724 30TH PL NE, WASHINGTON, DC 20018	RAZE A TWO STORY SFD BUILDING WITH SIDING	June 18, 2016	August 12, 2016	Raze	4304 0004	5	5C	R-1-B	KADY GROUP INC.	MAE F WILSON
6/22/2016	R1600184	1	RAZEATWO STORY BRICK BUIDLING 1109 - 1115 CONGRESS ST NE	June 28, 2016	August 12, 2016	Raze	0748 0819	6	6C	C-M-1	J STREET DEVELOPMENT	CONGRESS LLC
6/9/2016	R1500125	1625 OLIVE ST NE, WASHINGTON, DC 20019	RAZE A SINGLE STORY BRICK BLDG.	June 28, 2016	August 12, 2016	Raze	5168 0019	7	7D	R-2	KADY GROUP INC.	THE REDEEMED CHRISTIAN CHURCH O
6/14/2016	R1600175	3344 5TH ST SE, WASHINGTON, DC	RAZE A TWO STORY SINGLE FAMILY DWELLING	June 28, 2016	August 12, 2016	Raze	5972 0032	8	8C	R-2	ROBERT HYMAN	JOHN W CALDWELL



June 23, 2016

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



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

Cap Id:

D.C. Historic Preservat		
1100 4th Street S.W., Rm	E650	
Washington, DC 20024		
Re: Request for clearance of	premises subject to razing operations	
this date with the Permi	t Operations Division. Our records	do not reveal any kind of conservation holds om your office, in order to release the subject
Address:		
1015 EVARTS ST NE		
LOT: 0062 SQUARE: 38	772 TYPE:	VACANT: No
	low and returning this form to th	your inspection of the premises, by filling out the D.C.R.A. Permit Operations Division, 1100
	CLEARANCE	
	we researched our records concerning eeding with the proposed razing of sai	
Date:	Signature:	
Name of releasing HPO O	official (print)	
Marine of releasing the O C	(Britis)	AT THE STATE OF TH



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 Ruilding Code Supplement Chapter I & 105.1.7, 105.1.7.1.105.1.7.1.2

105.1.7.2, and Section 155A.			13 100.117, 100.1			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
R1600/80)		Application Date:	6	· 17.	2016		
	1. INFORMATIO	N ON PROP	ERTY					
1. Address of Proposed Work		2. Quad 3. \	Ward 4a. Square	4b.	Suffix	5. Lot		
1015 EVARTS ST		NW Fo	our 3872	N/	Α	0062		
	2. APPLICANT	INFORMAT	ION					
6. Property Owner	7. Complete mailing address	(include zip)	8. Phone Number((s) 9	9. Email			
SAKIB KHAN	1015 EVARTS ST, NE WASHINGTON	I DC 20018	202-770-8180		sakibkhan	@hotmail.com		
10. Agent/Contractor for Owner (if appl	icable) 11. Complete mailing addres	s (include zip)	12. Phone Number	r(s) 1	3. Email			
TBD	TBD		TBD		TBD			
	3. TYPE 0	F PERMIT						
14. Check all that apply:	ze Permit							
	4. DESCRIPTIO	N OF BUILD	ING		777			
15. Description of Building to be Razed		The state of the s		16. Exist	ing Number	of Stories of Bldg:		
1 1/2 STOREY WOOD SIDING	SINGLE DWELLING W/ ACC	APT UNIT		1 1/2				
17. Use(s) of Property (specifically indicated in the second seco	cate if any use is residential.)	18. Ma	aterials of Building (b	orick, wood	l, etc.)			
RESIDENTIAL SINGLE DWELI	LING W ACCESSORY APT	woo	DD SIDING					
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Heigh	ht (ft)	22. E	22. Bldg Volume (cu ft) (L x W x H)			
53'-6"	26'-6"	27'-0"		38,2	38,250 CU FT			
	OFFICIAL	USE ONLY		38	3 495	75		
CONDITIONS/ COMMENTS:								

23. Raze Contractor's Name	D		TION A. RAZE PER		25. Contract	or's Phone				
TBD.	ТВО			ТВО						
26. Historic District?	26. Historic District?				33. Raze Contractor Signature					
27. CFA?										
28. Raze Entire Building?	☑ Yes	No	34. Property Owner	Signature						
29. Building Condemned?	Yes	☑ No								
30a. Party Wall?	Yes	☑ No	30b. If yes, adja	cent prop	erty owner	signature is required.				
				30c. Any raze permit application for a building(s) involving party walls rinclude 2 copies of a plan that show how the party wall(s) will be protect						
31. Building Vacant?	Yes	☑ No	Building must be va	Building must be vacant before Raze Permit issuance.						
32. Public Space Vault?	□Yes	☑ No			Official Use Only Date					
			Fee	Ву						
33. Plumber's Name		34. Plumbe	r's License Number		35. Raze Met	hod (ball, bulldozer, by hand, etc.)				
TBD		TBD			TBD					
 Include a 30-day advance 	more than one nsurance as: De e notice cancel f insurance cov	story, wholly eputy Director lation clause.	detached from any other , Permit Division, 1100 4t	building on	the same or ac	djoining premises.				
State that the insurance		Operations in		" if the scop		ty Damage, \$100,000. nce is for blanket coverage.				
 State that the insurance If the insurance is for one 		Operations in ss only, state	n the District of Columbia, that, "Razing Operations	" if the scop	(address	nce is for blanket coverage.				
State that the insurance		Operations in ss only, state	n the District of Columbia,	" if the scop		nce is for blanket coverage.				
State that the insurance If the insurance is for one 86. Insurance Company		Operations in ss only, state 37. Policy TBD	n the District of Columbia, that, "Razing Operations	" if the scop at	(address	of raze operation) on Date				



03 - House View Left Side



04 - House View Front Close-up



05 - House View Right Side



06 - House Back View from Backyard



07 - House Back Close-up View from Backyard



01- House View from across Evarts St



02- House View from across Evarts St



June 23, 2016

Government of the District of Columbia

Department of Consumer and Regulatory Affairs Permit Operations Division



1100 4th Street SW

Washington DC 20024

Tel. (202) 442 - 4589 Fax (202) 442 - 4862

TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

Cap Id:

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 this date with the Permit Operations Division. Our records do not reveal any kind of conservation this property. We are hereby requesting confirmation from your office, in order to release the permit.	ion holds
Address: 1015 EVARTS ST NE	
LOT: 0062 SQUARE: 3872 TYPE: VACANT: Yes	
Please notify our office of the satisfactory completion of your inspection of the premises, by the clearance section below and returning this form to the D.C.R.A. Permit Operations Divisi 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 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.

105.1.7.2, and Section 155A.										
R16 00 182	5			Applio	cation Date: Jul	ne	23/16			
	1. INFORMATIO	_	-	- 1		100				
Address of Proposed Work		2. Quad			4a. Square		4b. Suffix	5. Lot		
1015 EVARTS ST		NW	Fo	ur	3872		N/A	0062		
	2. APPLICANT	INFORM	TAN	ION						
6. Property Owner	7. Complete mailing address	(include zi	ip)	8. Pho	one Number(s)		9. Email		-	
SAKIB KHAN	1015 EVARTS ST, NE WASHINGTON	N DC 20018		202-	770-8180		sakibkhan	@hotmail.cor	n	
10. Agent/Contractor for Owner (if applicable)	e) 11. Complete mailing addres	s (include :	zip)	12. Ph	none Number(s)		13. Email			
TBD	TBD			TBD			TBD			
	3. TYPE (F PERM	IT							
14. Check all that apply: Raze F	ermit									
Carried Contraction (Carried Service)	4. DESCRIPTIO	N OF RI	III D	ING			RW DISONS I	GEOMOTE IN	TATE OF	
15. Description of Building to be Razed (e.g			JILU		16	6. E	xisting Number	of Stories of Bldg	g:	
1 STOREY CMU FLAT ROOF 1 C	AR GARAGE				1					
17. Use(s) of Property (specifically indicate	if any use is residential.)	1	8. Ma	iterials	of Building (brick	(, W	ood, etc.)			
RESIDENTIAL SINGLE DWELLIN	G W ACCESSORY APT	C	ONO	CRET	E MASONRY	′ U	NIT			
19. Bldg Length (ft) 20.	Bldg Width (ft)	21. Bldg Height (ft)					22. Bldg Volume (cu ft) (L x W x H)			
22'		10'				3,080 CU FT				
	OFFICIAL	USE ON	LY							
CONDITIONS/ COMMENTS:	**									

SECTION A. RAZE PERMIT									
23. Raze Contractor's Name		24. Contracto	r's Address (including zip co	de)	25. Contractor's Phone				
TBD		TBD	TBD						
26. Historic District?	☐Yes	⊿ No	33. Raze Contractor Signature	33. Raze Contractor Signature					
27. CFA?	Yes	☑ No							
28. Raze Entire Building?	☑ Yes	No	34. Property Owner Sig	nature					
29. Building Condemned?	Yes	☑ No							
30a. Party Wall?	Yes	☑ No	30b. If yes, adjace	nt prop	erty owner signa	ture is required.			
						nvolving party walls must be wall(s) will be protected.			
31. Building Vacant?	Yes	☑ No	Building must be vacan	t before	Raze Permit issuance	e.			
32. Public Space Vault?	Yes	☑ No	Fee	By	Official Use Only	Date			
			1 66	l by		Date			
33. Plumber's Name		34. Plumber's	License Number 35. Raze Method (ball, bulldozer, by han			oall, bulldozer, by hand, etc.)			
TBD		TBD			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									
36. Insurance Company			or Certificate No.		38. Expiration D	ate			
TBD		TBD			TBD				
39. Asbestos in Building? If yes, indicate location:	☐ Yes	☑No		Of	fficial Use Only				
	Fee By					Date			



01- Garage View from Alley



02- Garage View from Alley



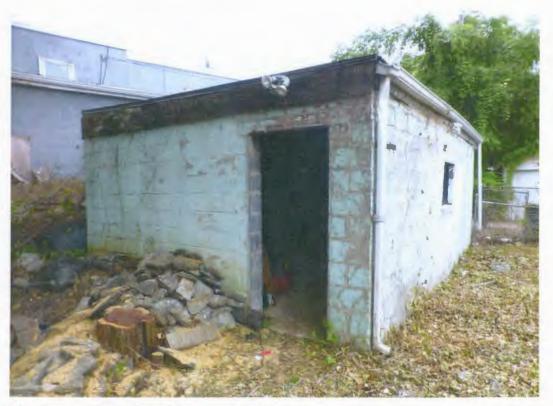
03 - Garage Side View from Backyard



04 - Garage Side and Back View from Backyard



05 - Garage Back View from Backyard



06 - Garage Back View Close-up from Backyard



June 15, 2016

Government of the District of Columbia

Department of Consumer and Regulatory Affairs Permit Operations Division



1100 4th Street SW

Washington DC 20024

Tel. (202) 442 - 4589 Fax (202) 442 - 4862

TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

Cap Id:

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 his 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:
2911 RHODE ISLAND AVE NE
OT: 0807 SQUARE: 4310 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 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.

105.1.7.2, and Section 15					r			
K16 001	176			App	olication Date:	6.15	.2016	
		1. INFORMAT	TION ON	PROPERT				
1. Address of Proposed Wor	k		2. Qu	ad 3. Ward	4a. Square	4b. Suff	īx 5. Lot	
2911 Rhode Island av			NE .	Five,	4310		0808	
		2. APPLICA		Charles of the case of				-
6. Property Owner		7. Complete mailing add	ress (include	e zip) 8. P	hone Number(s)	9. Em	ail	
2911 Rhode island av Ilc		4836 Bradley Blvd che	evy chase	md 20 571	-285-6834	zelya	asi@gmail.com	
10. Agent/Contractor for Own	ner (if applicable)	11. Complete mailing add	dress (inclu	de zip) 12. l	Phone Number(s) 13. E	mail	
Nader Bazzazieh		5258 Pine Bark Ct Col	umbia mo	2104! 301	-509-3803	nade	er@civil-environr	nental.
		3. TYP	E OF PER	MIT				
14. Check all that apply:		mit						
		4. DESCRIP	TION OF	BUILDING	W. Sto			
15. Description of Building to	be Razed (e.g., t					16. Existing f	Number of Stories o	f Bldg:
single story cmu comme	rical building					1		
17. Use(s) of Property (spec	ifically indicate if a	iny use is residential.)		18. Material	s of Building (br	ick, wood, etc	:.)	
Church				сми				
19. Bldg Length (ft)	20. Bld	lg Width (ft)	21. BI	dg Height (ft)		22. Bldg Volume (cu ft) (L x W x H)		
112	30		15			18750- 50.400		
		OFFICE	AL USE	NLY				
CONDITIONS/ COMMENTS	:							
				•				
		, V						
		* 1 -0 de	,	- 4	· · · · · · · · · · · · · · · · · · ·	, ,		la .
			3	- M		* 4	, !	
		.d	,					

GOVERNMENT OF THE DISTRICT OF COLUMBIA

CERIFICATION FOR RAZE PERMIT APPLICATION

This certifies that 2911 Rhode Island LLC (referred to as Owner) owns the property at (Legal Name of Property Owner)
2911 Rhode Island av ne 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.
(Initial here to certify that you have read and understand this paragrap
A. Use of Property as Housing Accommodation
I hereby certify that the structure to be razed IS NOT a housing accommodation.
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"
l 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 paragrap]
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 paragrap
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: Zak Elyasi Managing Member Signature:
(Print Name of Owner)
Name of Agent: Nagar Bazzazieh Signature: Signature:
8



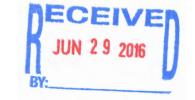
2911 Rhode Island Ane, NG



June 28, 2016

Government of the District of Columbia

Department of Consumer and Regulatory Affairs



Permit Operations Division 1100 4th Street SW Washington DC 20024 02) 442 - 4589 Fax (202) 442

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

Cap Id:

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 this date with the Permit Operations Division. Our records do not reveal any keep on this property. We are hereby requesting confirmation from your office, in or permit.	kind of conservation holds
Address:	
1617 RHODE ISLAND AVE NE	
LOT: 0044 SQUARE : 4131 TYPE:	VACANT: Yes
Please notify our office of the satisfactory completion of your inspection of the clearance section below and returning this form to the D.C.R.A. Permit (4th Street S.W. Washington D.C. 20024).	
CLEARANCE	
This is to inform you that we researched our records concerning the structure identified have no objections to proceeding with the proposed razing of said structure.	above and we
Date: Signature:	
Name of releasing HPO Official. (print)	

Government of the District of Columbia



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.

105.1.7.2, and Section 155A.								
R16 00 18	7		Applic	cation Date: 06	5/14/2	016		
	1. INFORMATIO				4	0.65	614	
1. Address of Proposed Work			Ward	4a. Square	40.	Suffix	5. Lot	
1617 RHODE ISLAND AVE		NE 🔻 Fiv	/e	4131			44 & 45	
	2. APPLICANT	INFORMAT	-					
6. Property Owner	7. Complete mailing address	(include zip)	8. Pho	one Number(s)	9. Email			
2951 MILLS AVE, INC	3203 SHORTRIDGE LANE	, MITCHELLV	2408	324315		DEMUREN®	COMCAST.NET	
10. Agent/Contractor for Owner (if applicable	e) 11. Complete mailing addres	ss (include zip)	12. Ph	none Number(s)		13. Email		
OUSMANE BA	1928 1ST ST NW, WASHII	NGTON, DC 2	2025	380025		OUSMANE3	39@YAHOO.COM	
	3. TYPE (FPERMIT				Medical		
14. Check all that apply:	ermit							
	4. DESCRIPTIO	N OF BUILD	DING					
15. Description of Building to be Razed (e.g	., two story brick single family dw	elling)		1	6. Exis	ting Number	of Stories of Bldg:	
RAZE ONE STORY COMMERCIAL BUIL	DING				1			
17. Use(s) of Property (specifically indicate	if any use is residential.)	18. M	aterials	of Building (bric	k, woo	d, etc.)		
COMMERCIAL		woo	DD, BRIG	CK				
19. Bldg Length (ft) 20.	Bldg Width (ft)	21. Bldg Heig	jht (ft)		22. Bldg Volume (cu ft) (L x W x H)			
41 14	1	8			4592			
	OFFICIAL	USE ONLY						
CONDITIONS/ COMMENTS:								
							*	
	*							
					z 1	. 3		

		SEC	CTION A. RAZE PE	ERMIT				
23. Raze Contractor's Name	24. Contractor's Address (including zip code)			25. Contractor's	25. Contractor's Phone			
OWNER (2951 MILLS AVE, INC)	3203 SHOF	RTRIDGE LN, MITCHE	ELLVILLE, MD	2408324315				
26. Historic District?	33. Raze Contra	33. Raze Contractor Signature						
27. CFA? ☐ Yes⊠ No								
28. Raze Entire Building?			34. Property Ow	34. Property Owner Signature				
29. Building Condemned?	☐ Yes	s × No						
30a. Party Wall?	S⊠ No	30b. If yes, a	30b. If yes, adjacent property owner signature is required.					
						s) involving party walls must be ty wall(s) will be protected.		
31. Building Vacant?	X Yes	Building must be vacant before Raz						
32. Public Space Vault?	☐Yes	SINO		(Official Use Only			
			Fee	Ву		Date		
33. Plumber's Name		34. Plumbe	er's License Number	1	35. Raze Method	d (ball, bulldozer, by hand, etc.)		
ROBERT MAJOR		1182			BY HAND			
1. You must submit a Certificate of Insequare feet or less in area and not 2. The Certificate should: Show the holder of the insequal and advance of the insequal and an another state that the insurance of the insurance of the insurance of the insurance is for one	surance as: De notice cance insurance concovers "Razing	e story, wholly eputy Director llation clause. verage: Bodily g Operations in	r, Permit Division, 1100 r Injury, \$100,000; Agg n the District of Columb	her building on 0 4th St SW, W pregate, \$300,0 bia," if the scop	the same or adjoi ashington, DC 20 00; and Property lee of the insurance	Damage, \$100,000.		
26 Incurance Company		27 Delia	Carlifordo Na		(address of raze operation)			
36. Insurance Company COLONY INSURANCE COMPANY	,	AP133333		or Certificate No. 38. Expiration Date		Date		
39. Asbestos in Building? If yes, indicate location:	Yes	× No		OI	fficial Use Onl	У		
			Fee	Ву		Date		



4131 0044 09/09/2004

1617 Rhode Island AU, NE



Date: June 20, 2016

Government of the District of Columbia Department of Consumer and Regulatory Affairs Permit Operations Division



1100 4th Street SW

Washington DC 20024

Tel. (202) 442 - 4589 Fax (202) 442 - 4862

TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

Cap ld:

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 this date with the Permit Operations Division. Our records do not reveal any kind of conserve on this property. We are hereby requesting confirmation from your office, in order to release permit.	ation holds
Address:	
3724 30TH PL NE	
LOT: 0004 SQUARE: 4304 TYPE: VACANT. Yes	S
Please notify our office of the satisfactory completion of your inspection of the premises, by the clearance section below and returning this form to the D.C.R.A. Pennit Operations Divis 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)	



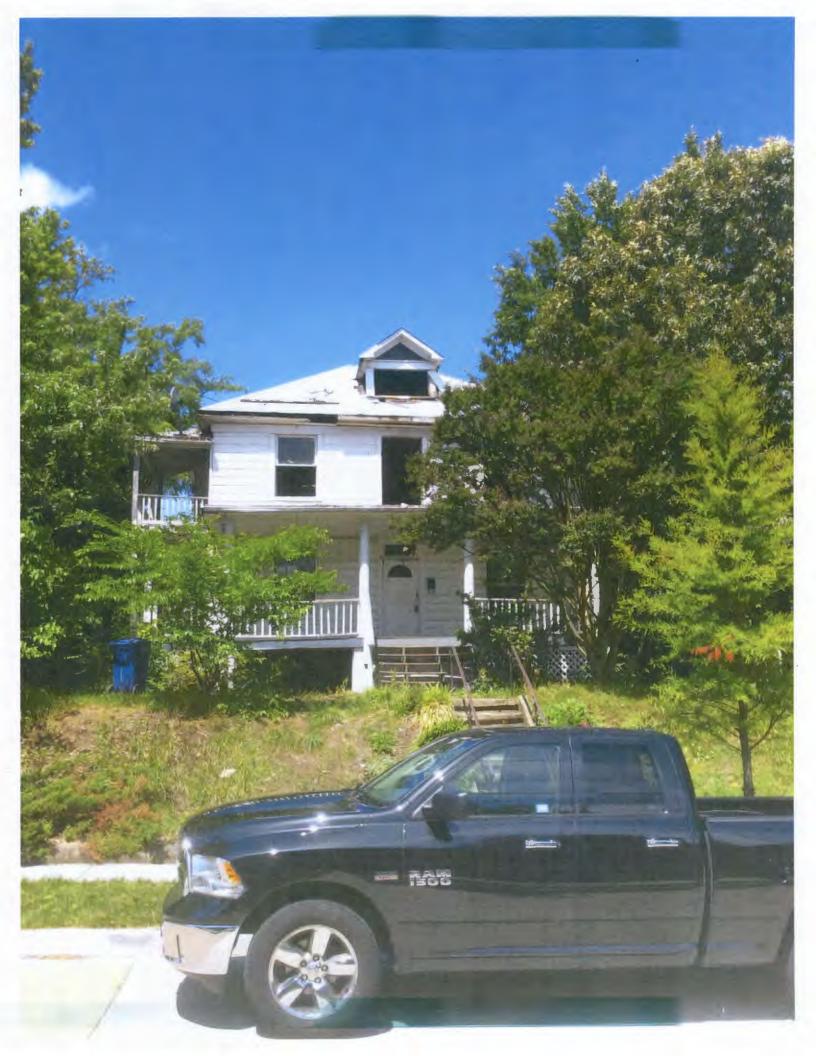


Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide detailed information. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered 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

3724 30th Place Property Owner Eckington Station LLC O. Agent/Contractor for Owner (if applicable) Kady Group Inc.	7. Complete mailing address P.O.Box 790 Lanham, Mil. 11. Complete mailing address	IMEORIMA (include zip)	8. Ph	4304 one Number(s) 429 5970	9. Email	0004	
Eckington Station LLC O. Agent/Contractor for Owner (if applicable)	P.O.Box 790 Lanham, MI 11, Complete mailing address	(include zip) 0 20703	8. Pho 301				
ckington Station LLC D. Agent/Contractor for Owner (if applicable)	P.O.Box 790 Lanham, Mil 11, Complete mailing address	20703	301				
Agent/Contractor for Owner (if applicable)	11, Complete mailing addres			429 5970	niyit@kad		
		s (include zip			niyit@kadygroup.com		
Kady Group Inc.	DOD- 700 LL 44) 12. Pl	none Number(s)	13. Email		
	P.O.Box 790, Lanham, M	AD 20703 301 429 5970			níyit@kadygroup.com		
and the second s		i sermo					
4. Check all that apply:		****					
The state of the s							
5. Description of Building to be Razed (e.g.,	two story brick single family dw	- Legal And Carlotte Balletin	ABINE A	16.	Existing Number	of Stories of Bld	
Two Story Building with siding				2			
7. Use(s) of Property (specifically indicate if	any use is residential.)	18.	Materials	of Building (brick,	wood, etc.)		
Single Family Residence		W	ood				
19. Bldg Length (ft) 20. Bl	9. Bldg Length (ft) 20. Bldg Width (ft)				22. Bldg Volume (cu ft) (L x W x H)		
24.60 30.60)	24			18066.24		
	OFFICIAL	USE ONL'	Y				

Contract of the second		SEC	TION A. RAZE PE	RMIT				
23. Raze Contractor's Name 24. Con			4. Contractor's Address (including zip code)			25. Contractor's Phone		
Kady Group Inc	9324 Annapolis Road, Lanham, MD 20706			301 429 5970				
26. Historic District?	Yes	X No	33. Raze Contractor Signature					
77. CFA? ☐ Yes⊠ No								
28. Raze Entire Building?	₹Yes	No	34, Property Owner Signature					
29. Building Condemned?	□Yes	X No						
30a. Party Wall?	⊠No	30b. If yes, a	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?	⊠ Yes	S No Building must be vacant be		a vacant before	fore Raze Permit issuance.			
32. Public Space Vault?	ПYes	⊠ No	Official Use Only					
			Fee	By	1	Date		
33. Plumber's Name 34. Plumber			r's License Number	License Number 35. Raze Method (ball, bulldozer, by hand				
Vernon Montague		954			Bulldozer			
I. You must submit a Certificate of Insquare feet or less in area and not a continuous feet or less in area and not a continuous feet or less in area and not a continuous feet or less in area and not a continuous feet or less include a 30-day advance or less include these amounts or state that the insurance or less for one and include these amounts or less include the second or less included the second or less in area and not a continuous feet or less in area and not a continuous	more than one surance as: Do e notice cance f insurance con covers "Razing	estory, wholly eputy Director llation clause verage, Bodily Operations in	detached from any of , Permit Division, 1100 fnjury. \$100,000; Agg n the District of Colum	her building on 0 4th St SW, W gregate, \$300,0 bia," if the scop	the same or adjournment of the same or adjournment of the insurance of the	oining premises. 0024 Damage, \$100,000, te is for blanket coverage.		
36. Insurance Company		37 Police	or Certificate No.		(address of raze operation) 38. Expiration Date			
Erie insurance Company		Q4501543						
39. Asbestos in Building? If yes, indicate location:	Yes	1			Official Use Only			
			Fee	Ву		Date		







0748 0819 08/22/2004

1109-1115 Congress Street 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: June 14, 2016	Cap Id:	R1600175						
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:								
3344 5TH ST SE								
LOT: 0032 SQUARE: 5972 TYPE:	VA	CANT: Yes						
Please notify our office of the satisfactory completion of your inspection the clearance section below and returning this form to the D.C.R.A. Pe 4th Street S.W., Washington D.C. 20024.	-							
CLEARANCE								
This is to inform you that we researched our records concerning the structure idea have no objections to proceeding with the proposed razing of said structure.	ntified above	and we						
Date: 6/70/2016 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 1554.

		Appli	cation Date: 05	/18/16		
1. Address of Proposed Work				4b. Suffix	5. Lot	
	SE E	ight	5972	0032		
2. APPLICANT	INFORMA	The state of the s				
7. Complete mailing address	(include zip)	8. Pho	one Number(s)	9. Email		
2130 Brooks Drive #512, District Heights, MD 20747		202-	257-0515	mrcaldwell2@msn.com		
11. Complete mailing address	s (include zip)	12. Ph	ione Number(s)	13. Email		
10000 Business Parkway Lanham, MD 20706	240-764-1818			bob@rahyman.com		
3. TYPE 0	F PERMIT					
mit						
4. DESCRIPTIO	N OF BUIL	DING				
wo story brick single family dwe	:lling)		16.	Existing Number	of Stories of Bldg:	
				2		
any use is residential.)	· 18. N	Aaterials (of Building (brick,	wood, etc.)		
	Sidi	ng and \	Nood			
lg Width (ft)	21. Bldg Height (ft)			22. Bldg Volume (cu ft) (L x W x H)		
39	21			52416		
OFFICIAL	USE DNLY		1			
			u ·			
	2. APPLICANT 7. Complete mailing address 2130 Brooks Drive #512, District Heights, MD 20747 11. Complete mailing address 10000 Business Parkway Lanham, MD 20706 3. TYPE 0 mit 4. DESCRIPTION two story brick single family dwe any use is residential.) 19 Width (ft) 39 0FFICIAL 1	1. INFORMATION ON PROFES. 2. Quad 3. SE 2. APPLICANT INFORMA 7. Complete mailing address (include zip) 2130 Brooks Drive #512, District Heights, MD 20747 11. Complete mailing address (include zip) 10000 Business Parkway Lanham, MD 20706 3. TYPE OF PERMIT mit 4. DESCRIPTION OF BUILtwo story brick single family dwelling) any use is residential.) 18. M Siding Width (ft) 21. Bldg Heights and Siding Width (ft) OFFICIAL USE ONLY	2. APPLICANT INFORMATION 7. Complete mailing address (include zip) 2. APPLICANT INFORMATION 7. Complete mailing address (include zip) 2. APPLICANT INFORMATION 7. Complete mailing address (include zip) 2. APPLICANT INFORMATION 7. Complete mailing address (include zip) 2. APPLICANT INFORMATION 7. Complete mailing address (include zip) 2. APPLICANT INFORMATION 7. Complete mailing address (include zip) 2. APPLICANT INFORMATION 2. APPLICANT INFORM	1. INFORMATION ON PROPERTY 2. Quad 3. Ward 4a. Square SE Eight 5972 2. APPLICANT INFORMATION 7. Complete mailing address (include zip) 8. Phone Number(s) 2130 Brooks Drive #512, District Heights, MD 20747 11. Complete mailing address (include zip) 12. Phone Number(s) 10000 Business Parkway Lanham, MD 20706 3. TYPE OF PERMIT mit 4. DESCRIPTION OF BUILDING two story brick single family dwelling) 16. any use is residential.) 18. Materials of Building (brick, with the story brick single family dwelling) 21. Bldg Height (ft) 21 OFFICIAL USE ONLY	1. INFORMATION ON PROPERTY 2. Quad 3. Ward 4a. Square 4b. Suffix SE Eight 5972 0032 2. APPLICANT INFORMATION 7. Complete mailing address (include zip) 8. Phone Number(s) 9. Email 2130 Brooks Drive #512, District Heights, MD 20747 11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email 10000 Business Parkway Lanharn, MD 20706 240-764-1818 bob@rahyr 3. TYPE OF PERMIT mit 4. DESCRIPTION OF BUILDING wo story brick single family dwelling) 16. Existing Number (2) 2 18. Materials of Building (brick, wood, etc.) Siding and Wood 21. Bldg Height (ft) 22. Bldg Volume (3) 39 21 52416	

Company to the second second	X5 14.7.2**	,	CTION A. RAZE PERN				
			24. Contractor's Address (including zip code)		25. Contractor's Phone		
Robert Hyman	10000 Business Parkway Lanham, MD 20706		240-764-1818				
26. Historic District?	☐ Ye	s × No	33. Raze Contractor	Signature	1 2/	·	
27. CFA? ☐ Yes⊠ No			Tobe	1	1. 11		
28. Raze Entire Building?	☐ Yes 🗷 No		34. Property Owner Signature				
29. Building Condemned?	Condemned?		1 (the laide the				
30a. Party Wall?	☐ Yes	No No	No 30b. If yes, adjac		s, adjacent property owner signature is required.		
		,			ion for a building(s) involving party walls must be show how the party wall(s) will be protected.		
31. Building Vacant?	× Yes	No	Building must be vacant before Raze Permit issu			ance.	
32. Public Space Vault?	TYes	× No		Official Use Only			
			Fee	В	y	Date	
33. Plumber's Name 34. Plumber's			er's License Number	s License Number 35. Raze Method (ball, bulldoz		(ball, bulldozer, by hand, etc.)	
Haynes Plumbing		1211		Hydraulic Excavator			
 Include a 30-day advance Include these amounts of State that the insurance of 	surance as: D a notice cance insurance cov covers "Razing	e story, wholly eputy Directo llation clause verage: Bodil Operations	y detached from any other to or, Permit Division, 1100 4th	building or a St SW, V ate, \$300,0 if the sco	washington, DC 200 000; and Property Doe of the insurance th Street, SE	Damage, \$100,000. Is for blanket coverage.	
36. Insurance Company		37. Polic	. Policy or Certificate No.		' (address of raze operation) 38. Expiration Date		
Erie	1000	Q46-0153	985				
39. Asbestos in Building? If yes, indicate location:	X Yes	_		Official Use Only			
			Fee	Ву		Date	



