



**Large Tract Review Certification Form
Part A: Developer's Application**

1. Project Name

Developer

Address

City State Zip

Phone Fax

E-mail

If Developer does not own subject property, please provide the following information regarding the property owner:

Owner(s)

Address

City State Zip

Phone Fax

E-mail

2. Property Address

City State Zip

Ward ANC(s) Square(s) Parcel/Lot No. (s)

3. Current Use(s): (place X where applicable)

Residential Retail/Office Industrial Open Space/Undeveloped

Public/Institutional Other

*Maximum Height of Existing Improvement (ft.)

* Total Gross Floor Area (GFA) of Existing Improvements (sq. ft.):

* If Property is Undeveloped or Cleared, Enter "N/A".

4.

Note: Refer to definition of GFA in Section 199 of the D.C. Zoning Regulations

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Current Zoning:

	Zoning	Land Area (sq. ft.)	M.O.R. Far*	Permitted Height (ft.)
1.	PDR-1	232,900	3.5 MAX	50'
2.				
3.				
4.				
5.				

*Matter-Of-Right Floor Area Ratio

5. Proposed Zoning:

	Zoning	Land Area (sq. ft.)	M.O.R. Far*	Permitted Height (ft.)
1.	PDR-1	245,780	3.5 MAX	50'
2.				
3.				
4.				
5.				

*Matter-Of-Right Floor Area Ratio

6. Estimated Project Completion Date (mo./yr.)

Type of Development (place X where applicable)

New Rehab/Historic Preservation Addition

Existing Jobs Retained and/or New Jobs Created by Project:

Temporary/Construction Permanent

7. Gross Floor Area (GFA) by Use:

	GFA (sq. ft.)
* Residential	0
Retail	27,559 SF
Office	46,213 SF
Hotel	0
Industrial	0
Other	648,253 SF
Total GFA	722,025 SF

For Residential Space Only:

No. of Single-Family Units	<input type="text"/>
No. of Multi-Family Units:	<input type="text"/>
Estimated Development Cost:	<input type="text"/>
Land Cost	<input type="text"/>
Construction Cost	<input type="text"/>
Other Cost	<input type="text"/>
Total Project Cost	<input type="text"/>

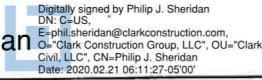
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8. Public Contribution:

UDAG	<input type="text"/>
EDA	<input type="text"/>
D.C. Revenue Bonds	<input type="text"/>
CDBG	<input type="text"/>
Urban Renewal	<input type="text"/>
HODAG	<input type="text"/>
Other	<input type="text"/>

9. Residential/Business Displacement Due to Project: *If not applicable or no displacement expected, enter "0"*

Number of Households Displaced	<input type="text" value="0"/>
Number of Businesses Displaced	<input type="text" value="0"/>

Authorized Signatures		Date	<u>2/21/2020</u>
	_____	Date	_____
	_____	Date	_____

FOR OP USE ONLY – DO NOT WRITE BELOW LINE

Project No.

Date Received by OP / /

OP Recommendation
For (check one):

Approval Disapproval

Date of Final Action / /