STATUS DATE	ID	Address	Description of Work	Report Date	Exp. Date	PER SUB TYPE	SSL	ANC	Zoning	Owner Name
3/3/2020	R2000127	3545 Yuma Street NW	raze two story brick single family dwelling	March 9, 2020	April 17, 2020	Raze	1970 0894	3F	R-1-B	Abram J. Boni, Trustee, etal.
1/17/2020	R2000065	817 18th Street NE	raze two story brick end unit, row house	March 9, 2020	March 20, 2020	Raze	4494 0078	5D	RA-2	817 18th St. LLC
1/16/2020	R2000080	1804 Half Street SW	raze brick warehouse	March 9, 2020	March 20, 2020	Raze	0664 0012	6D	CG-4	Buzzard 1800 Half Street Property Owner LLC
1/16/2020	R2000081	1808 Half Street SW	raze brick warehouse	March 9, 2020	March 20, 2020	Raze	0664 0011	6D	CG-4	Buzzard K LLC
1/16/2020	R2000082	1812 Half Street SW	raze brick warehouse	March 9, 2020	March 20, 2020	Raze	0664 0800	6D	CG-4	Buzzard K LLC
1/16/2020	R2000083	1816 Half Street SW	raze brick warehouse	March 9, 2020	March 20, 2020	Raze	0664 0803	6D	CG-4	Buzzard K LLC
1/16/2020	R2000084	1820 Half Street SW	raze brick warehouse	March 9, 2020	March 20, 2020	Raze	0664 0003	6D	CG-4	Buzzard K LLC
1/16/2020	R2000085	1824 Half Street SW	raze brick warehouse	March 9, 2020	March 20, 2020	Raze	0664 0001	6D	CG-4	Buzzard K LLC
2/28/2020	R2000121	1530 1st Street SW	two story brick/block office building	March 9, 2020	April 10, 2020	Raze	0656 0053	6D	CG-4	TM Jacob LLC
3/2/2020	R2000100	2510 Pennsylvania Avenue SE	one story commercial building	March 9, 2020	April 17, 2020	Raze	5553 0026	7B	MU-4	2510 Penn Ave. Partners LLC
3/2/2020	R2000106	2518 Pennsylvania Avenue SE	two story commercial buidling	March 9, 2020	April 17, 2020	Raze	5553 0006	7B	MU-4	Hillcrest AAL Partners LLC
3/2/2020	R2000108	2520 Pennsylvania Avenue SE	two story apartment building	March 9, 2020	April 17, 2020	Raze	5553 0005	7B	MU-4	Hillcrest AAL Partners LLC
3/2/2020	R2000108	2520 Pennsylvania Avenue SE	two story apartment building	March 9, 2020	April 17, 2020	Raze	5553 2001	7B	MU-4	Hillcrest AAL Partners LLC
3/2/2020	R2000109	2524 Pennsylvania Avenue SE	two story apartment building	Marh 9, 2020	April 17, 2020	Raze	5553 2001	7B	MU-4	Hillcrest AAL Partners LLC
3/2/2020	R2000110	2526 Pennsylvania Avenue SE	two story brick/block office and apartments	March 9, 2020	April 17, 2020	Raze	5553 2008	7B	MU-4	Hillcrest AAL Partners LLC
2/6/2020	R2000102	5123 C Street SE	single story brick shed	March 9, 2020	March 20, 2020	Raze	5312 0007	7E	R-3	Yasmin Sikder

Department of Consumer and Regulatory Affairs(DCRA)
1100 4th St, SW Washington, DC 20024

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 03, 2020** dcra Cap Id: **R2000127**

RECEIVED
MAR 05 2020
BY:

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:
3545 YUMA ST NW

LOT: **0894** SQUARE: **1970** TYPE: **Single Family Dwelling - R-3** 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) _____

Print Form

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 2013 DCMR 12 Building Code Supplement Chapter 1 § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

Application Date: February 21, 2020

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
3545 Yuma Street, NW	NW	Three	1970		0894

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Abram J Bani, Trustee	3545 Yuma St, NW, WDC 20008	202-393-7200	dcpermits@casengineering
10. Agent/Contractor for Owner (if applicable)	**11. Complete mailing address (include zip)**	**12. Phone Number(s)**	**13. Email**
CAS Engineering/David Landsman	1001 Conn Ave, NW, #401, DC 20036	202-393-7200	dcpermits@casengineering

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.
2-story brick single-family detached dwelling with crawl space	2

17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)
Residential - single-family	Brick and frame

19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
37.5	39.5	20.0	29,625

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
TBD	TBD	TBD

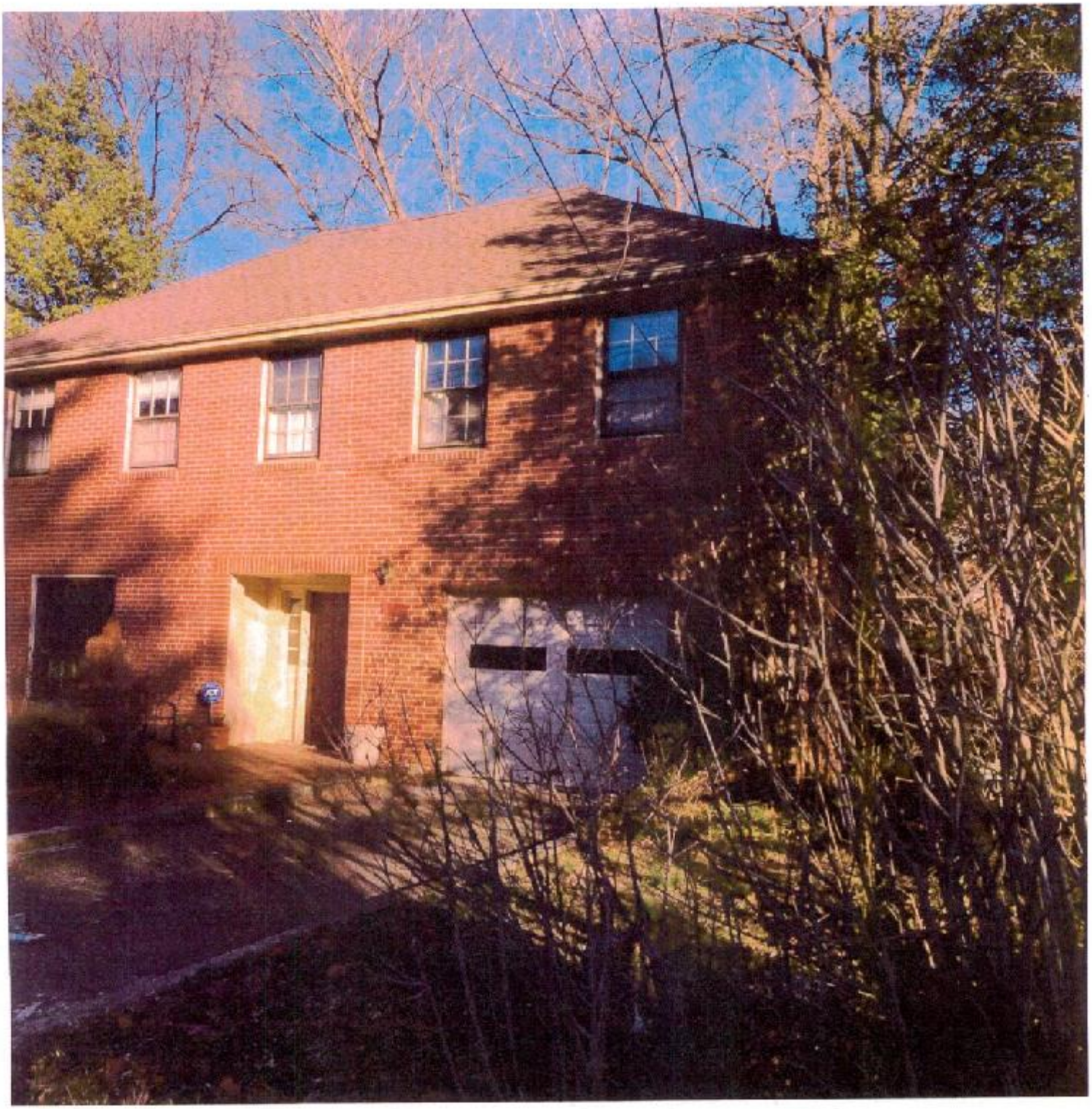
26. Historic District?	☐ Yes ☒ No	33. Raze Contractor Signature: TBD
27. CFA?	☐ Yes ☒ No	
28. Raze Entire Building?	☒ Yes ☐ No	34. Property Owner Signature: Anne Elizabeth Bonz Mason Bonz
29. Building Condemned?	☐ Yes ☒ No	
30a. Party Wall?	☐ Yes ☒ No	30b. If yes, adjacent property owner(s) will need to sign the Notification Form which safeguards during construction 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 ☐ No	Building must be vacant before Raze Permit issuance.
32. Public Space Vault?	☐ Yes ☒ No	**Official Use Only** Fee: ; By: ; Date:

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

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
TBD	TBD	TBD

39. Asbestos in Building? If yes, indicate location:	☐ Yes ☒ No TBD	**Official Use Only** 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: **January 14, 2020** Cap Id: **R2000080**

RECEIVED
MAR 0 2 2020
BY:

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:
1804 HALF ST SW

LOT: **0012** SQUARE: **0664** TYPE: **Other (Specify)** 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) _____

0664 0012 09/26/2004

1804 Half Street SW

1804

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: **January 16, 2020** Cap Id: **R2000081**

D.C. Historic Preservation Office
1100 4th Street S.W. , Rm E650
Washington, DC 20024

RECEIVED
MAR 0 2 2020
BY:

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:
1808 HALF ST SW

LOT: **0011** SQUARE: **0664** TYPE: **Other (Specify)** 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) _____

0664 0011 09/26/2004

1808 Half Street SW

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: February 04, 2020 dcra Cap Id: R2000082

D.C. Historic Preservation Office
1100 4th Street S.W. , Rm E650
Washington, DC 20024

RECEIVED
MAR 0 2 2020
BY:

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:
1812 HALF ST SW

LOT: **0800** SQUARE: **0664** TYPE: **Other (Specify)** 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 4rh 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) _____

0664 0800 09/26/2004

1812 Half Street SW

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: **January 16, 2020** Cap Id: **R2000083**

D.C. Historic Preservation Office
1100 4th Street S.W. , Rm E650
Washington, DC 20024

RECEIVED
MAR 0 2 2020
BY:

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:
1816 HALF ST SW

LOT: **0803** SQUARE: **0664** TYPE: **Other (Specify)** 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) _____

0664 0803 09/26/2004

1816 Half Street SW

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: **January 16, 2020** Cap Id: **R2000084**

RECEIVED
MAR 0 2 2020
BY:

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:
1820 HALF ST SW

LOT: **0003** SQUARE: **0664** TYPE: **Other (Specify)** 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) _____

0664 0003 09/26/2004

1820 Half Street SW

TOW AWAY ZONE

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: **February 28, 2020** Cap Id: **R2000085**

D.C. Historic Preservation Office
1100 4th Street S.W. , Rm E650
Washington, DC 20024

RECEIVED
MAR 0 2 2020
BY:

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:
1824 HALF ST SW

LOT: **0001** SQUARE: **0664** TYPE: **Other (Specify)** 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) _____

0664 0001 09/26/2004

1824 Half Street SW

ZS
ENTER

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: **February 28, 2020** dcra Cap Id: **R2000121**

RECEIVED
MAR 0 2 2020
BY:

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:
1530 1ST ST SW

LOT: **0053** SQUARE: **0656** TYPE: **Education for 6+ though 12th grade - E-**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) _____

Government of the District of Columbia

dcra

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 2013 DCMR 12 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
1530 1st Street SW, Washington, DC 20024	SW	Six	0656		0053

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
TM Jacob LLC	1375 Piccard Drive, Suite 150, Rockvi	240-428-7799x104	nmutreja@tmadevelopmer
10. Agent/Contractor for Owner (if applicable)	**11. Complete mailing address (include zip)**	**12. Phone Number(s)**	**13. Email**
Kim Mitchell/CDKM Consulting, LLC	1331 H St. NW, #975, WDC 20005	202-332-0090	kim@cdkmconsulting.com

3. TYPE OF PERMIT

14. Check all that apply:

☒ Raze Permit

4. DESCRIPTION OF BUILDING

15. Description of Building to be Razed (e.g., two story brick single family dwelling)	16. Existing Number of Stories of Bldg:
two story block light office/commercial/school	two

17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)
after-school camp (seasonal) and offices	block and concrete on concrete slab

19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
138	43	24	142,416

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
Gilbane Building Company	1100 N. Glebe Rd., Suite 1000, Arlington, VA	703-312-7267

26. Historic District?	☐ Yes ☒ No	33. Raze Contractor Signature: David Barlow (Gilbane)
27. CFA?	☐ Yes ☒ No	
28. Raze Entire Building?	☒ Yes ☐ No	34. Property Owner Signature: Robert B. Margulis, Manager
29. Building Condemned?	☐ Yes ☒ No	
30a. Party Wall?	☐ Yes ☒ No	30b. If yes, adjacent property owner(s) will need to sign the Notification Form which safeguards during construction 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 ☒ No	Building must be vacant before Raze Permit issuance.
32. Public Space Vault?	☐ Yes ☒ No	**Official Use Only** Fee / By / Date

33. Plumber's Name	34. Plumber's License Number	35. Raze Method (ball, bulldozer, by hand, etc.)
BlueRidge, Inc.	PCS12	excavator, bulldozer and hand

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
Travelers Indemnity Company	VTC2KCO-2E970978-19	June 30, 2020

39. Asbestos in Building? If yes, indicate location:	☐ Yes ☒ No	**Official Use Only** Fee / By / Date

Photographs of Subject Site and Neighborhood

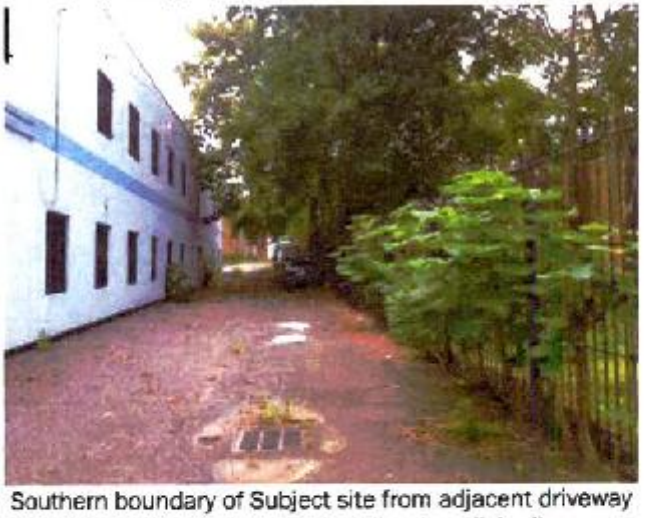
Subject site from 1st Street SW looking northeast

Subject site from 1st Street SW looking southeast

Subject site from 1st Street SW (existing improvements to be demolished)

Northern boundary of Subject site from adjacent driveway (existing improvements to be demolished)

Rear of Subject site from adjacent parking area



Southern boundary of Subject site from adjacent driveway (existing improvements to be demolished)

PHOTOGRAPHS OF SUBJECT SITE AND NEIGHBORHOOD

Subject site from 1st Street SW (existing improvements to be demolished)

Northern boundary of Subject site from adjacent driveway (existing improvements to be demolished)

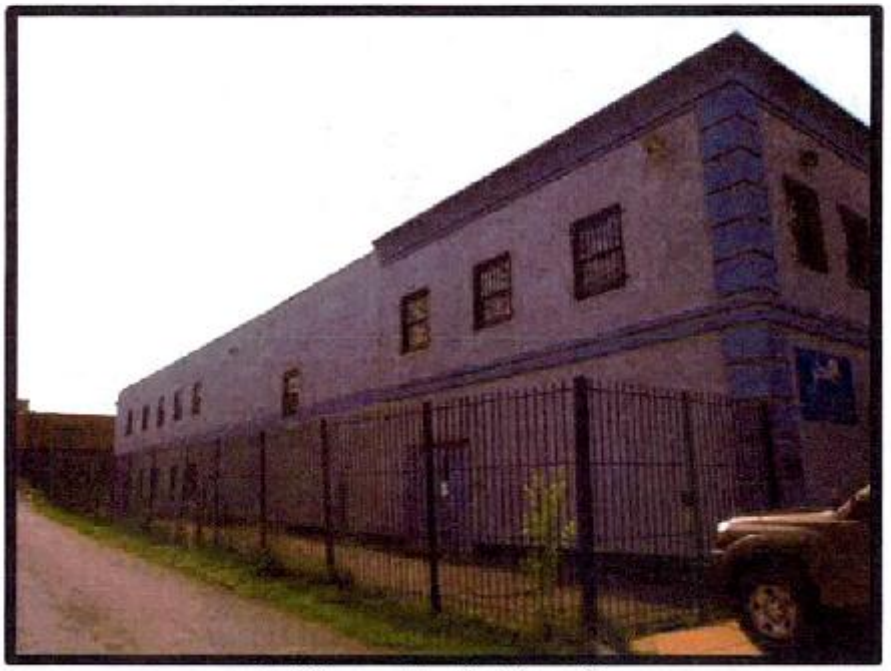
Rear of Subject site from adjacent parking area

Southern boundary of Subject site from adjacent driveway (existing improvements to be demolished)

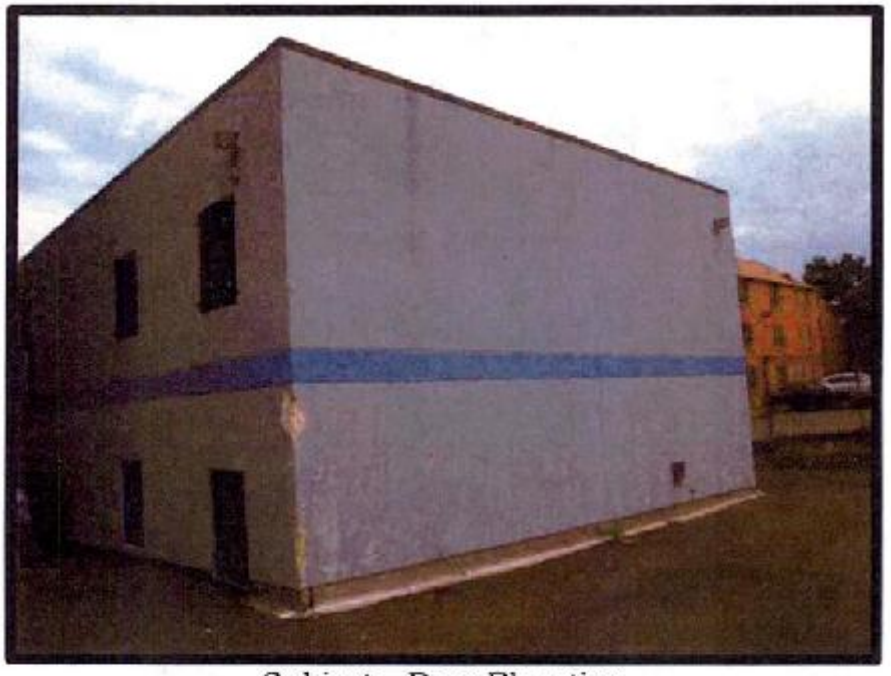
Subject from adjacent property at 1550 1st Street SW

Rear of Subject site from adjacent alley

SUBJECT PHOTOGRAPHS



Subject – North Elevation



Subject – Rear Elevation

0656 0830 09/27/2004

1530 1st Street SW

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 02, 2020** Cap Id: **R2000100**

D.C. Historic Preservation Office
1100 4th Street S.W. , Rm E650
Washington, DC 20024

RECEIVED
MAR 03 2020
BY:

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:
2510 PENNSYLVANIA AVE SE

LOT: **0026** SQUARE: **5553** TYPE: **Other (Specify)** 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) _____

Print Form

Government of the District of Columbia

dcra

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 2013 DCMR 12 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.

R2000100

Application Date: 02-13-2020

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
2510 PENNSYLVANIA AVE	SE	Seven	5553	N/A	0026

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
2510 PENN AVE PARTNERS LLC	1443 PENNSYLVANIA AVE SE, WASHINGTON DC 2003	N/A	N/A
10. Agent/Contractor for Owner (if applicable)	**11. Complete mailing address (include zip)**	**12. Phone Number(s)**	**13. Email**
MADDOX ENGINEERS & SURVEYORS INC MAGNUS G. CAYWOOD,AGENT-FR100204	3204 TOWER OAKS BLVD, SUITE 200-A ROCKVILLE MD, 20852	240-696-7792	permits@maddoxinc.com mgcaywood@maddoxinc.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:
PROPSOED RAZE/DEMOLITION OF EXISTING COMMERICIAL 1 STORY BRICK BUILDING WITH FRONT FRAME FACADE	(1) ONE

17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)
COMMERCIAL-RETAIL-MISC	BRICK

19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
25'	68'	15	28,560

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
TBD	TBD	TBD

26. Historic District?	☐ Yes ☒ No	33. Raze Contractor Signature: TBD
27. CFA?	☐ Yes ☒ No	
28. Raze Entire Building?	☒ Yes ☐ No	34. Property Owner Signature
29. Building Condemned?	☐ Yes ☒ No	
30a. Party Wall?	☐ Yes ☒ No	30b. If yes, adjacent property owner(s) will need to sign the Notification Form which safeguards during construction 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 ☐ No	Building must be vacant before Raze Permit issuance.
32. Public Space Vault?	☐ Yes ☒ No	**Official Use Only**

Fee	By	Date

33. Plumber's Name	34. Plumber's License Number	35. Raze Method (ball, bulldozer, by hand, etc.)
TBD	TBD	ANY METHOD PERMITTED

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
UNITED STATES LIABILITY INSURANCE CO	CL 2743273	02-13-2020

39. Asbestos in Building? If yes, indicate location:	☐ Yes ☒ No	**Official Use Only**

Fee	By	Date

Google

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 02, 2020** Cap Id: **R2000106**

D.C. Historic Preservation Office
1100 4th Street S.W. , Rm E650
Washington, DC 20024

RECEIVED
MAR 0 3 2020
BY:

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:
2518 PENNSYLVANIA AVE SE

LOT: **0006** SQUARE: **5553** TYPE: **Other (Specify)** 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) _____

Print Form

Government of the District of Columbia

dcra

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 2013 DCMR 12 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.

R2000106

Application Date: 02-13-2020

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
2518 PENNSYLVANIA AVE	SE	Seven	5553	N/A	0006

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
HILLCREST AAL PARTNERS LLC	1443 PENNSYLVANIA AVE SE, WASHINGTON DC 2003	N/A	N/A
10. Agent/Contractor for Owner (if applicable)	**11. Complete mailing address (include zip)**	**12. Phone Number(s)**	**13. Email**
MADDOX ENGINEERS & SURVEYORS INC MAGNUS G. CAYWOOD,AGENT-FR100204	3204 TOWER OAKS BLVD, SUITE 200-A ROCKVILLE MD, 20852	240-696-7792	permits@maddoxinc.com mgcaywood@maddoxinc.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:
PROPSOED RAZE/DEMOLITION OF EXISTING COMMERICIAL 2 STORY BRICK BUILDING WITH STONE FRONT FACADE	(2) TWO

17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)
COMMERCIAL-STORE-MISC	BRICK

19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
95'	25'	20'	47,500

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
TBD	TBD	TBD

26. Historic District?	☐ Yes ☒ No	33. Raze Contractor Signature: TBD
27. CFA?	☐ Yes ☒ No	
28. Raze Entire Building?	☒ Yes ☐ No	34. Property Owner Signature
29. Building Condemned?	☐ Yes ☒ No	
30a. Party Wall?	☐ Yes ☒ No	30b. If yes, adjacent property owner(s) will need to sign the Notification Form which safeguards during construction 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 ☐ No	Building must be vacant before Raze Permit issuance.
32. Public Space Vault?	☐ Yes ☒ No	**Official Use Only**

Fee	By	Date

33. Plumber's Name	34. Plumber's License Number	35. Raze Method (ball, bulldozer, by hand, etc.)
TBD	TBD	ANY METHOD PERMITTED

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
MILERS CAPITAL INSURACE COMPANY	7172810	09-16-2020

39. Asbestos in Building? If yes, indicate location:	☐ Yes ☒ No	**Official Use Only**

Fee	By	Date

5553 0006 10/24/2004

PropertyQuest draws information from databases assembled and provided by other agencies. Information is presented for planning purposes only. Please consult the source agencies for definitive answers.

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 02, 2020** Cap Id: **R2000108**

D.C. Historic Preservation Office
1100 4th Street S.W. , Rm E650
Washington, DC 20024

RECEIVED
MAR 03 2020
BY:

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:
2520 PENNSYLVANIA AVE SE

LOT: **0005** SQUARE: **5553** TYPE: **Other (Specify)** 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) _____

Print Form

Government of the District of Columbia

dcra

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 2013 DCMR 12 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.

R2000108

Application Date: 02-13-2020

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
2520 PENNSYLVANIA AVE	SE	Seven	5553	N/A	0005

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
HILLCREST AAL PARTNERS LLC	1443 PENNSYLVANIA AVE SE, WASHINGTON DC 2003	N/A	N/A
10. Agent/Contractor for Owner (if applicable)	**11. Complete mailing address (include zip)**	**12. Phone Number(s)**	**13. Email**
MADDOX ENGINEERS & SURVEYORS INC MAGNUS G. CAYWOOD,AGENT-FR100204	3204 TOWER OAKS BLVD. SUITE 200-A ROCKVILLE MD, 20852	240-686-7792	permits@maddoxinc.com mgcaywood@maddoxinc.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.
PROPSOED RAZE/DEMOLITION OF EXISTING COMMERICIAL 2 STORY BRICK BUILDING WITH BASEMENT	(2) TWO

17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)
COMMERCIAL-OFFICE-MISC	BRICK

19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
50'	20'	25'	25,000

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
TBD	TBD	TBD

26. Historic District?	☐ Yes ☒ No	33. Raze Contractor Signature: TBD
27. CFA?	☐ Yes ☒ No	
28. Raze Entire Building?	☒ Yes ☐ No	34. Property Owner Signature: Ex. Director
29. Building Condemned?	☐ Yes ☒ No	
30a. Party Wall?	☐ Yes ☒ No	30b. If yes, adjacent property owner(s) will need to sign the Notification Form which safeguards during construction 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 ☐ No	Building must be vacant before Raze Permit issuance.
32. Public Space Vault?	☐ Yes ☒ No	**Official Use Only**

Fee	By	Date

33. Plumber's Name	34. Plumber's License Number	35. Raze Method (ball, bulldozer, by hand, etc.)
TBD	TBD	ANY METHOD PERMITTED

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
MILLERS CAPITAL INSURACE COMPANY	7172810	09-16-2020

39. Asbestos in Building? If yes, indicate location:	☐ Yes ☒ No	**Official Use Only**

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 02, 2020** Cap Id: **R2000109**

D.C. Historic Preservation Office
1100 4th Street S.W. , Rm E650
Washington, DC 20024

RECEIVED
MAR 03 2020
BY:

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:
2524 PENNSYLVANIA AVE SE

LOT: **2001** SQUARE: **5553** TYPE: **Condo - R-2** 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) _____

Print Form

Government of the District of Columbia

dcra

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 2013 DCMR 12 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.

R2000109

Application Date: 02-13-2020

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
2524 PENNSYLVANIA AVE	SE	Seven	5553	N/A	0028

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
HILLCREST AAL PARTNERS LLC	1443 PENNSYLVANIA AVE SE, WASHINGTON DC 2003	N/A	N/A
10. Agent/Contractor for Owner (if applicable)	**11. Complete mailing address (include zip)**	**12. Phone Number(s)**	**13. Email**
MADDOX ENGINEERS & SURVEYORS INC MAGNUS G. CAYWOOD AGENT-FR100204	3204 TOWER OAKS BLVD, SUITE 200-A ROCKVILLE MD, 20852	240-696-7792	permits@maddoxinc.com mgcaywood@maddoxinc.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.
PROPOSED RAZE/DEMOLATION OF ENTIRE EXISTING 2 STORY BRICK CONDOMAIN BUILDING WITH BASMENT INCLUDING ALL CONDO UNTIS LOCATED WITHIN THIS BUILDING	(2) TWO

17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)
COMMERCIAL-RETAIL-MISC	BRICK

19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
97'	20'	25	48,500

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
TBD	TBD	TBD

26. Historic District?	☐ Yes ☒ No	33. Raze Contractor Signature: TBD
27. CFA?	☐ Yes ☒ No	
28. Raze Entire Building?	☒ Yes ☐ No	34. Property Owner Signature
29. Building Condemned?	☐ Yes ☒ No	
30a. Party Wall?	☐ Yes ☒ No	30b. If yes, adjacent property owner(s) will need to sign the Notification Form which safeguards during construction 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 ☐ No	Building must be vacant before Raze Permit issuance.
32. Public Space Vault?	☐ Yes ☒ No	**Official Use Only**

Fee	By	Date

33. Plumber's Name	34. Plumber's License Number	35. Raze Method (ball, bulldozer, by hand, etc.)
TBD	TBD	ANY METHOD PERMITTED

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
MILLERS CAPITAL INSURANCE COMPANY	7172810	09-16-2020

39. Asbestos in Building? If yes, indicate location:	☐ Yes ☒ No	**Official Use Only**		
		Fee	By	Date

5553 2002 10/24/2004

2524 Pennsylvania Avenue 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 02, 2020** Cap Id: **R2000110**

D.C. Historic Preservation Office
1100 4th Street S.W. , Rm E650
Washington, DC 20024

RECEIVED
MAR 0 3 2020
BY:

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:
2526 PENNSYLVANIA AVE SE

LOT: **2008** SQUARE: **5553** TYPE: **Other (Specify)** 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) _____

Print Form

Government of the District of Columbia

dcra

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 2013 DCMR 12 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

R2000110

Application Date: 02-13-2020

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
2526 PENNSYLVANIA AVE	SE	Seven	5553	N/A	0028

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
HILLCREST AAL PARTNERS LLC	1443 PENNSYLVANIA AVE SE, WASHINGTON DC 2003	N/A	N/A
10. Agent/Contractor for Owner (if applicable)	**11. Complete mailing address (include zip)**	**12. Phone Number(s)**	**13. Email**
MADDOX ENGINEERS & SURVEYORS INC MAGNUS G. CAYWOOD,AGENT-FR100204	3204 TOWER OAKS BLVD, SUITE 200-A ROCKVILLE MD, 20852	240-696-7792	permits@maddoxinc.com mgcaywood@maddoxinc.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:
PROPOSED RAZE/DEMOLITION OF EXISTING COMMERCIAL 2 STORY BRICK BUILDING WITH BASEMEN. ENTIRE BUILDING TO BE RAZED INCLUDING ALL CONDO UNITS	(2) TWO

17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)
COMMERCIAL-RETAIL-MISC	BRICK

19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
96'	25'	25	60,000

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
TBD	TBD	TBD

26. Historic District?	☐ Yes ☒ No	33. Raze Contractor Signature: TBD
27. CFA?	☐ Yes ☒ No	
28. Raze Entire Building?	☒ Yes ☐ No	34. Property Owner Signature
29. Building Condemned?	☐ Yes ☒ No	
30a. Party Wall?	☐ Yes ☒ No	30b. If yes, adjacent property owner(s) will need to sign the Notification Form which safeguards during construction 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 ☐ No	Building must be vacant before Raze Permit issuance.
32. Public Space Vault?	☐ Yes ☒ No	**Official Use Only**

Fee	By	Date

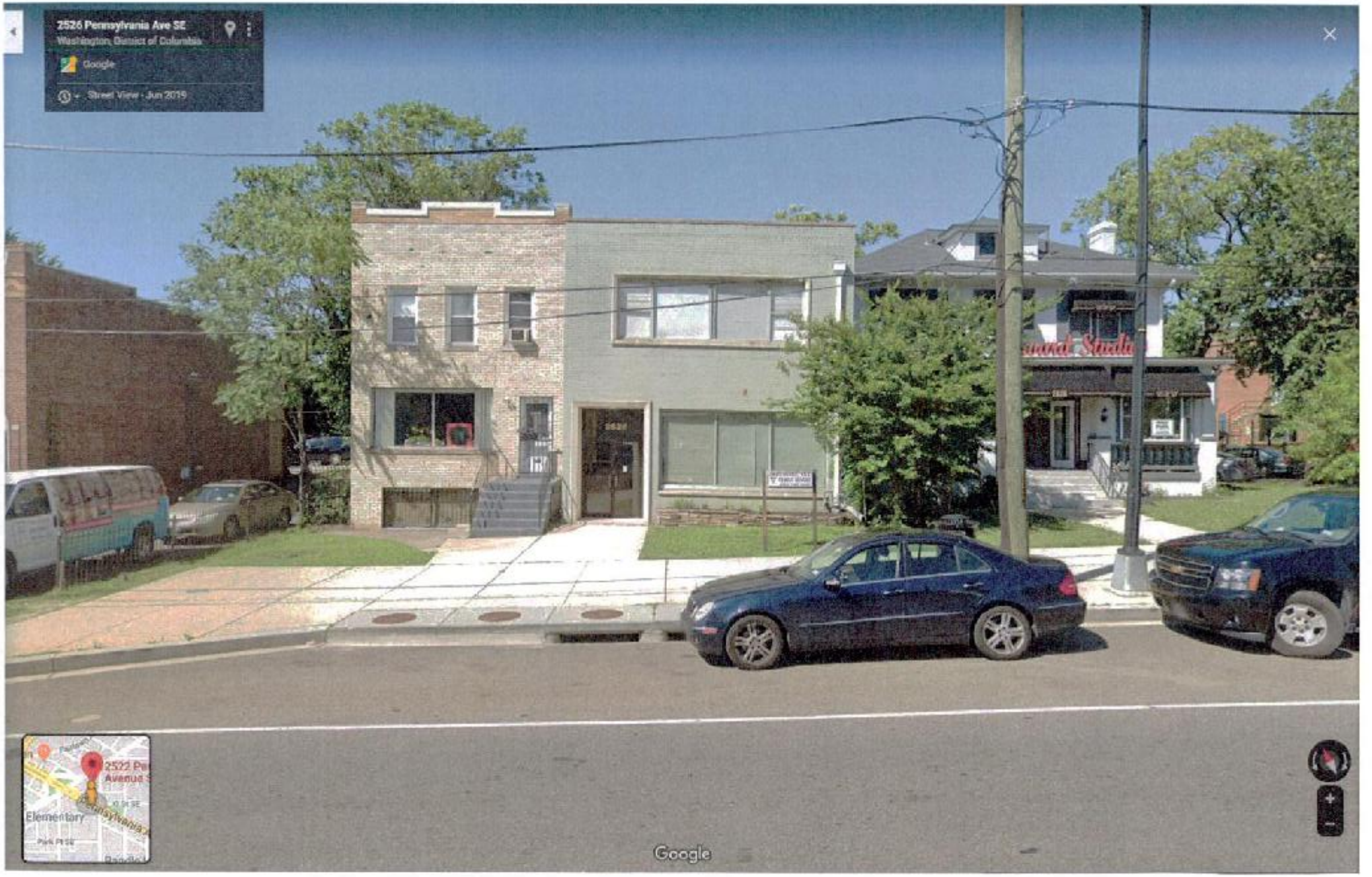
33. Plumber's Name	34. Plumber's License Number	35. Raze Method (ball, bulldozer, by hand, etc.)
TBD	TBD	ANY METHOD PERMITTED

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
MILLERS CAPITAL INSURANCE COMPANY	7172810	09-16-2020

39. Asbestos in Building? If yes, indicate location:	☐ Yes ☒ No	**Official Use Only**

Fee	By	Date


2526 Pennsylvania Ave SE
Washington, District of Columbia
Google
Street View - Jun 2019
Elementary
Google

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: February 06, 2020 Cap Id: R2000102

RECEIVED
MAR 0 3 2020
BY:

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:
5123 C ST SE

LOT: **0007** SQUARE: **5312** TYPE: **Sheds - U** 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) _____

Print Form

Government of the District of Columbia

dcra

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 2013 DCMR 12 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 1556.

Application Date:

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
5123 C St	SE	Seven	5312		42

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
YASMIN SIKDER	6201 Columbia Park Road, Landover MD 20785	240 606 5305	sikder@district-properties.com
10. Agent/Contractor for Owner (if applicable)	**11. Complete mailing address (include zip)**	**12. Phone Number(s)**	**13. Email**
District-Properties.com inc	5100 Wisconsin Ave NW, Washington DC 20012	202 526 8664	rasiff@reluxhomess.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 story Brick Shed	1

17. Use(s) of Property (specifically indicate if any use is resident al.)	18. Materials of Building (brick, wood, etc.)
Storage	Bricks

19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
25	20	15	7,500

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
District Properties.com inc	5100 Wisconsin Ave NW, Washington DC 20012	202 526 8664

26. Historic District?	☐ Yes ☒ No	33. Raze Contractor Signature	
27. CFA?	☐ Yes ☒ No		
28. Raze Entire Building?	☒ Yes ☐ No	34. Property Owner Signature	
29. Building Condemned?	☒ Yes ☐ No		
30a. Party Wall?	☐ Yes ☒ No	30b. If yes, adjacent property owner(s) will need to sign the Notification Form which safeguards during construction 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 ☐ No	Building must be vacant before Raze Permit issuance.	
32. Public Space Vault?	☐ Yes ☒ No	**Official Use Only**	

Fee	By	Date

33. Plumber's Name	34. Plumber's License Number	35. Raze Method (ball, bulldozer, by hand, etc.)
KEWAL KHATTA	PGM1000470	BULLDOZER

1. You must submit a Certificate of Insurance covering the raze operation/contractor– unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story, wholly detached from any other building on the same or adjoining premises.
2. The Certificate should:
   - Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024
   - Include a 30-day advance notice cancellation clause.
   - Include these amounts of insurance coverage: Bodily Injury, $100,000; Aggregate, $300,000; and Property Damage, $100,000.
   - State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.
   - If the insurance is for one specific address only, state that, "Razing Operations at _____ (address of raze operation)"

36. Insurance Company	37. Policy or Certificate No.	38. Expiration Date
V W BROWN INSURANCE	Q380350541	02/03/2020

39. Asbestos in Building? If yes, indicate location:	☐ Yes ☒ No	**Official Use Only**	

Fee	By	Date

DISTRICT OF COLUMBIA GOVERNMENT
OFFICE OF THE SURVEYOR

Washington, D.C., November 20, 2018

Plat for Building Permit of: SQUARE 5873 Lot 858

Scale: 1 inch = 40 feet

Recorded on Book/Page:

Receipt No. 20-07116 Drawn by: A.S.

Furnished to: MOHAMMAD SIKDER

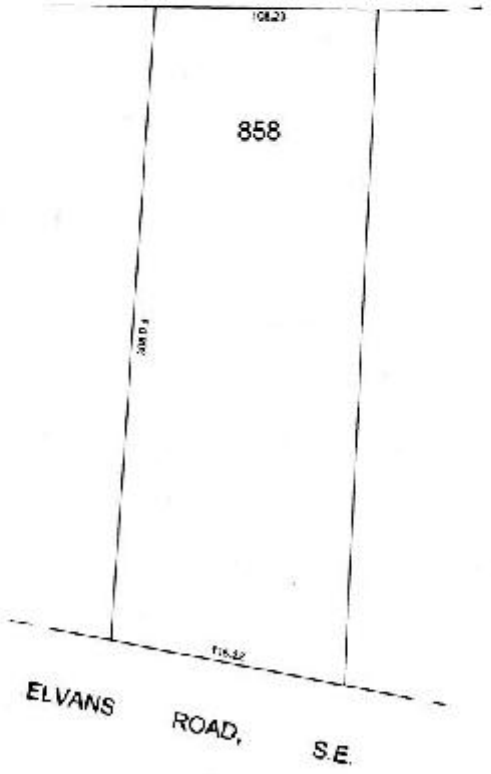
"I hereby certify that the dimensions and configuration of the lot(s) hereon represent are consistent with the records of the Office of the Surveyor (which office may not reflect actual land measurements). The dimensions and configuration of said lots are provided by the Office of Tax and Revenue and may not measure by agree with the deed description(s)."

Surveyor, D.C.

I hereby certify that on the plat on which the Office of the Surveyor has drawn the dimensions of the lot I have accurately and completely depicted and labeled the following:
1) (a) existing buildings and improvements including parking spaces, covered porches, decks and retaining walls over four feet above grade, and any existing fences/fences or party wall labeled as such; and (b) any public space improvements in public space – with complete and accurate dimensions
2) (a) proposed demolition or razing of existing buildings only labeled as such; all proposed buildings and improvements – including parking spaces, covered porches, decks and retaining walls over four feet above grade, any existing fences/fences or party wall labeled as such, as well as projections and/or encroachments in public space and the improvements to satisfy minimum setback or green area requirements – with complete and accurate dimensions, consistently with the plans submitted with building permit application _____ and
3) any existing structures on the lot or on an adjacent property that is located within 10 feet of this lot.
I also hereby certify that
1) this depiction on the plat, as detailed above, is accurate and complete as of the date of my signature hereon;
2) there is no elevation change exceeding ten feet measured between at least two of the lot elevation change is depicted on a site plan submitted with the plans for the permit application;
3) (a) I have/have not (circle one) filed a valid raze application with the Office of the Surveyor;
4) (a) I have/have not (circle one) filed a valid raze application with the Office of Tax & Revenue; and
5) if there are changes to the lot and its boundaries as shown on this plat, or in the proposed construction and grade as shown on the plat, that I shall obtain an updated plat from the Office of the Surveyor on which I will depict all existing and proposed construction and submit it to file with the Office of the Zoning Administrator for review and approval prior to permit issuance.
The Office of the Zoning Administrator will not duly accept a Building Plat issued by the Office of the Surveyor earlier than two years prior to the date DCRA accepts a Building Permit Application as complete.
I acknowledge that any inaccuracy or omission in my depiction on the plat will subject any permit or certificate of occupancy issued in reliance on the plat to revocation, including revocation under Section 105.6(f) and 110.9.2 of the Building Code (Title 12A of the DCMR) as well as prosecution and penalties under Section 403 of D.C. Law 6-311 (D.C. Official Code §22-3403).

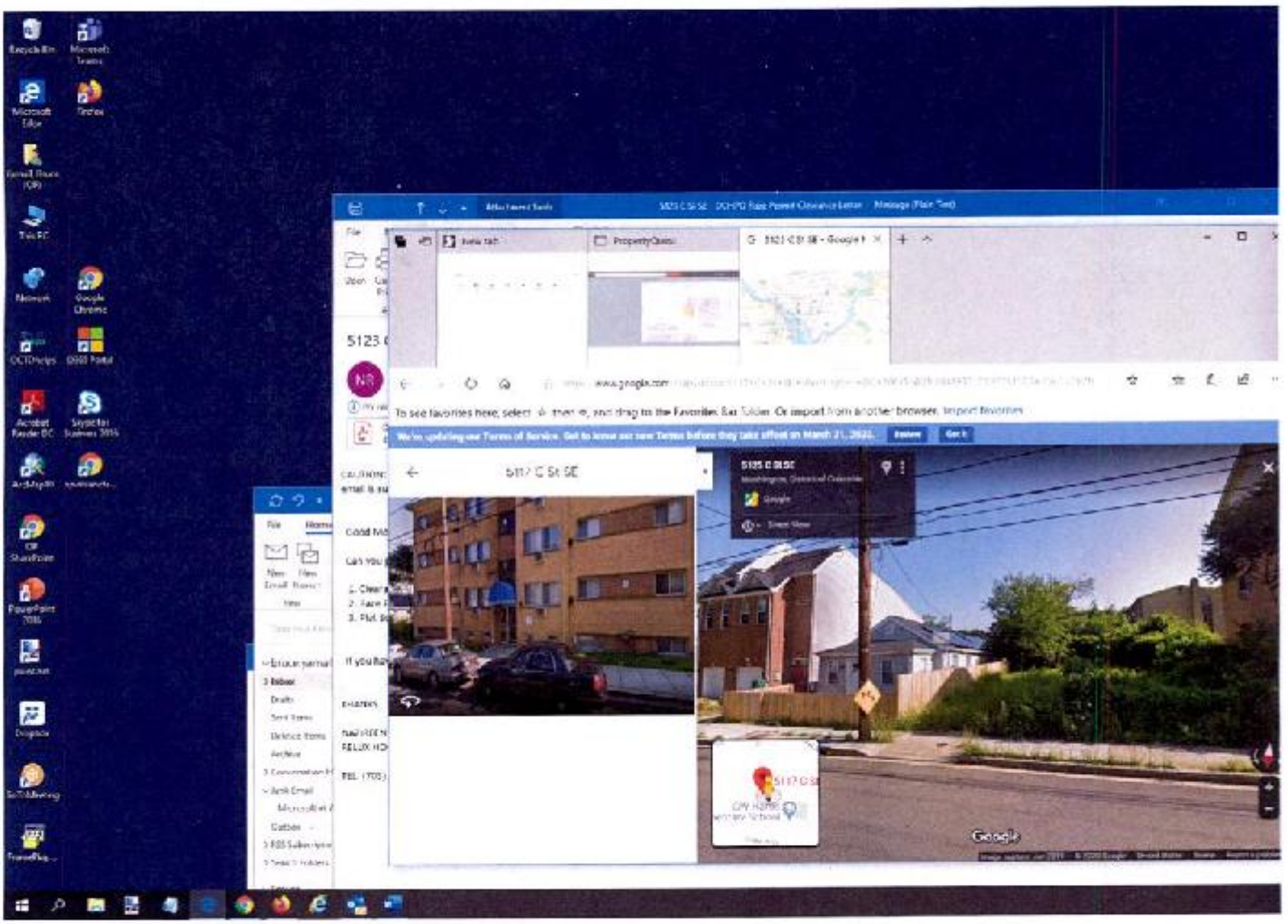
Signature _____ Date 11/21/2018
Printed Name MOHAMMAD Y SIKDER Relationship to Tax Owner: OWNER
My registered design professional, provider/license number N/A not to include phone/email

POMEROY ROAD, S.E.



0 10 20 60 100 200
SCALE 1:40

SR-20-07116(2018)
* E-MAIL



5123 C Street SE – wooded lot with "brick storage building" – 20 x 25

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: **January 17, 2020** Cap Id: **R2000065**

D.C. Historic Preservation Office
1100 4th Street S.W. , Rm E650
Washington, DC 20024

RECEIVED
MAR 06 2020
BY:

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:
817 18TH ST NE

LOT: **0078** SQUARE: **4494** TYPE: **Two-Family Flat - R-3** 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) _____

Print Form

Government of the District of Columbia

dcra

APPLICATION FOR RAZE PERMIT

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Applicable code sections are in the 2013 DCMR 12 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
817 18th ST	NE	Five	4494		0078

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
817 18th ST LLC	817 18th ST NE Washington DC 2000	202-536-3006	projectdox@rmichaelcross.
10. Agent/Contractor for Owner (if applicable)	**11. Complete mailing address (include zip)**	**12. Phone Number(s)**	**13. Email**
R. Michael Cross Design Group LLC	2001 S ST NW #230 Washington DC 2	202-536-3006	ebacher@rmichaelcross.cor

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:
2-Story Brick and CMU attached 2-family flat	2

17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)
2-Family Flat	Brick, CMU, Wood Joists

19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
37 ft	18 ft	20 ft	13,320 cu ft

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
Reliable Redevelopment	8855 Annapolis Rd. #201 Lanham, MD 20706	301 795 4272

26. Historic District?	☐ Yes ☒ No	33. Raze Contractor Signature	
27. CFA?	☐ Yes ☒ No		
28. Raze Entire Building?	☒ Yes ☐ No	34. Property Owner Signature	
29. Building Condemned?	☐ Yes ☒ No		
30a. Party Wall?	☒ Yes ☐ No	30b. If yes, adjacent property owner(s) will need to sign the Notification Form which safeguards during construction 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.	
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32. Public Space Vault?	☐ Yes ☒ No	**Official Use Only**	
		Fee	By / Date

33. Plumber's Name	34. Plumber's License Number	35. Raze Method (ball, bulldozer, by hand, etc.)
Jeff Rohrs	PFG-71996	By Hand

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   - 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
Erie Insurance	Q37305084 19 MV	1/30/20

39. Asbestos in Building? If yes, indicate location:	☐ Yes ☒ No	**Official Use Only**	
		Fee	By / Date

Raze Application – 817 18th ST NE

Narrative:

Complete raze of existing 2-story brick 2-family flat. Existing shared party wall to remain

Contact Information:

Emily Bacher
R. Michael Cross Design Group
2001 S St NW, Washington, DC 20009
202-536-3006
ebacher@rmichaelcross.com

Images:

Front Façade

Corner View

Rear Façade