

STATUS DATE	ID	Address	Description of Work	DCRA Notice Date	PER SUB TYPE	ANC Expiration Date	SSL	ANC	Zoning	Applicant	Owner Name
5/3/2017	R1700144	1800 COLUMBIA RD NW, WASHINGTON, DC 20009	RAZE OF 2 STORY MIXED USE BRICK BUILDING	May 31, 2017	Raze	July 13, 2017	25510078	1C	MU-5	MELISSA DIAZ DFM DEVELOPMENT; TBD	1800 COLUMBIA ROAD LLC
5/19/2017	R1700153	1822 IRVING ST NW, WASHINGTON, DC 20010	Remove free standing single car garage - Mt. Pleasant Historic District	May 31, 2017	Raze	July 13, 2017	25880035	1D	RF-1	CHRISTOPHER DEROSA	christopher derosa
5/16/2017	R1700149	5514 SHERIER PL NW, WASHINGTON, DC 20016	RAZE OF SHED	May 31, 2017	Raze	July 13, 2017	14490086	3D	R-1-B	CAS ENGINEERING DC LLC; HANLON DESIGN BUILD INC	HANLON DESIGN BUILD INC
4/24/2017	R1700136	5615 33rd Street NW, WASHINGTON, DC	One story garage	May 31, 2017	Raze	July 13, 2017	20220014	3G	R-1-B	Tanya Hill	Emily Phillips
5/2/2017	R1700143	3753 W ST NW, WASHINGTON, DC 20007	TO RAZE 1 STORY WOOD STUD, METAL SIDING BUILDING.	May 31, 2017	Raze	July 13, 2017	13010653	3B	R-3	; N/A	JAMES S CRAMER
5/9/2017	R1700145	5413 9TH ST NW, WASHINGTON, DC 20011	EMERGENCY RAZE OF 2 STORY WITH BASEMENT DETACHED SFD PER GARY WHITESCARVER	May 31, 2017	Raze	July 13, 2017	29940026	4D	RF-1	QUINTEN OWENS; ENGINEERED DEMOLITION LLC	LEROY M OWENS
5/19/2017	R1700154	4108 ILLINOIS AVE NW, WASHINGTON, DC 20011	RAZE OF 1-STORY GARAGE. SLAB TO REMAIN.	May 31, 2017	Raze	July 13, 2017	32410042	4C	RF-1	; OCTAVE CONSTANTINE	FREDERIKA PREVOST
5/18/2017	R1700152	1308 TUCKERMAN ST NW, WASHINGTON, DC 20011	(1) ONE STORY DETACHED BRICK GARAGE	May 31, 2017	Raze	July 13, 2017	27870044	4A	R-1-B	MIKE BANKS; TBD	ANDREA CAMMACK
5/19/2017	R1700155	2708 26TH ST NE, WASHINGTON, DC 20018	RAZE OF (1) ONE STORY BRICK COMMERNCIAL BUILDING	May 31, 2017	Raze	July 13, 2017	42650030	5C	PDR-1	KIM MITCHELL CDKM CONSULTING; FSG CONCRETE	2424 EVARTS PARTNERS LLC
5/23/2017	R1700158	2810 BLADENSBURG RD NE, WASHINGTON, DC 20018	RAZE OF 1 STORY COMMERCIAL BUILDING	May 31, 2017	Raze	July 13, 2017	43370045	5C	PDR-1	BD CONTRACTOR SERVICES LLC; BD CONTRACTOR SERVICES LLC	FRANKLIN AND ROCKY PROPERTIES LLC
5/12/2017	R1700148	8 P ST NE, WASHINGTON, DC 20002	RAZE OF 1 STORU BRICK WAREHOUSE	May 31, 2017	Raze	July 13, 2017	06680014	5E	D-5	BETHESDA ST ELMO LLC; ACCESS DEMOLITION	BETHESDA ST ELMO LLC
5/2/2017	R1700142	1436 IVES PL SE, WASHINGTON, DC 20003	Raze two storybrick SFD	May 31, 2017	Raze	July 13, 2017	16050085	6B	RF-1	Muhittin Aydeniz	1436 Ives Place LLC
5/16/2017	R1700150	226 MASSACHUSETTS AVE NE, WASHINGTON, DC 20002	TWO STORY MASONRY AND WOOD FRAME COMMERCIAL RETAIL BUILDING TO BE RAZED - Capitol Hill Historic District	May 31, 2017	Raze	July 13, 2017	07550850	6C	MU-26	MASSACHUSETTS AVENUE PROPERTIES, LLC; RPS INC	MASSACHUSETTS AVENUE PROPERTIES LLC



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

Permit Operations Division  
1100 4th Street SW  
Washington DC 20024

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



Date: May 03, 2017

Cap Id: R1700144

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:  
1800 COLUMBIA RD NW

LOT: 0078 SQUARE: 2551 TYPE: Mixed Use (Specify)

VACANT:

Please notify our office of the satisfactory completion of your inspection of the premises, by filling out the clearance section below and returning this form to the D.C.R.A. Permit Operations Division, 1100 4th Street S.W., Washington D.C. 20024.

**CLEARANCE**

This is to inform you that we researched our records concerning the structure identified above and we have no objections to proceeding with the proposed razing of said structure.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of releasing HPO Official. (print) \_\_\_\_\_

**APPLICATION FOR RAZE PERMIT**

R1700144

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

Application Date: 5/3/2017

**1. INFORMATION ON PROPERTY**

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
1800 Columbia Road NW	NW	One	2551		0078

**2. APPLICANT INFORMATION**

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
1800 Columbia Road LLC	680 Water Street SW, 20024	202-499-5024	nhoffman@pnhoffman.com
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
Melissa Diaz, DFM Development Services	2735 Hartland Rd, Ste. 200, Falls Church, VA 22043	703-283-1118	mdiaz@dfmdevelopment.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 mixed use building brick building.			2
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
Office/Retail		Brick	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
99	43	20	85,140

**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					
26. Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature			
27. CFA?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
28. Raze Entire Building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
29. Building Condemned?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
30a. Party Wall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	34. Property Owner Signature			
31. Building Vacant?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	30b. If yes, adjacent property owner signature is required.			
32. Public Space Vault?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected.			
		Building must be vacant before Raze Permit issuance.			
		<b>Official Use Only</b>			
		Fee	By	Date	
33. Plumber's Name		34. Plumber's License Number		35. Raze Method (ball, bulldozer, by hand, etc.)	
TBD					
<p>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.</p> <p>2. The Certificate should:</p> <ul style="list-style-type: none"> <li>• Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024</li> <li>• Include a 30-day advance notice cancellation clause.</li> <li>• Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.</li> <li>• State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.</li> <li>• If the insurance is for one specific address only, state that, "Razing Operations at _____"</li> </ul>					
36. Insurance Company		37. Policy or Certificate No.		38. Expiration Date	
39. Asbestos in Building?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Official Use Only</b>			
If yes, indicate location:		Fee	By	Date	

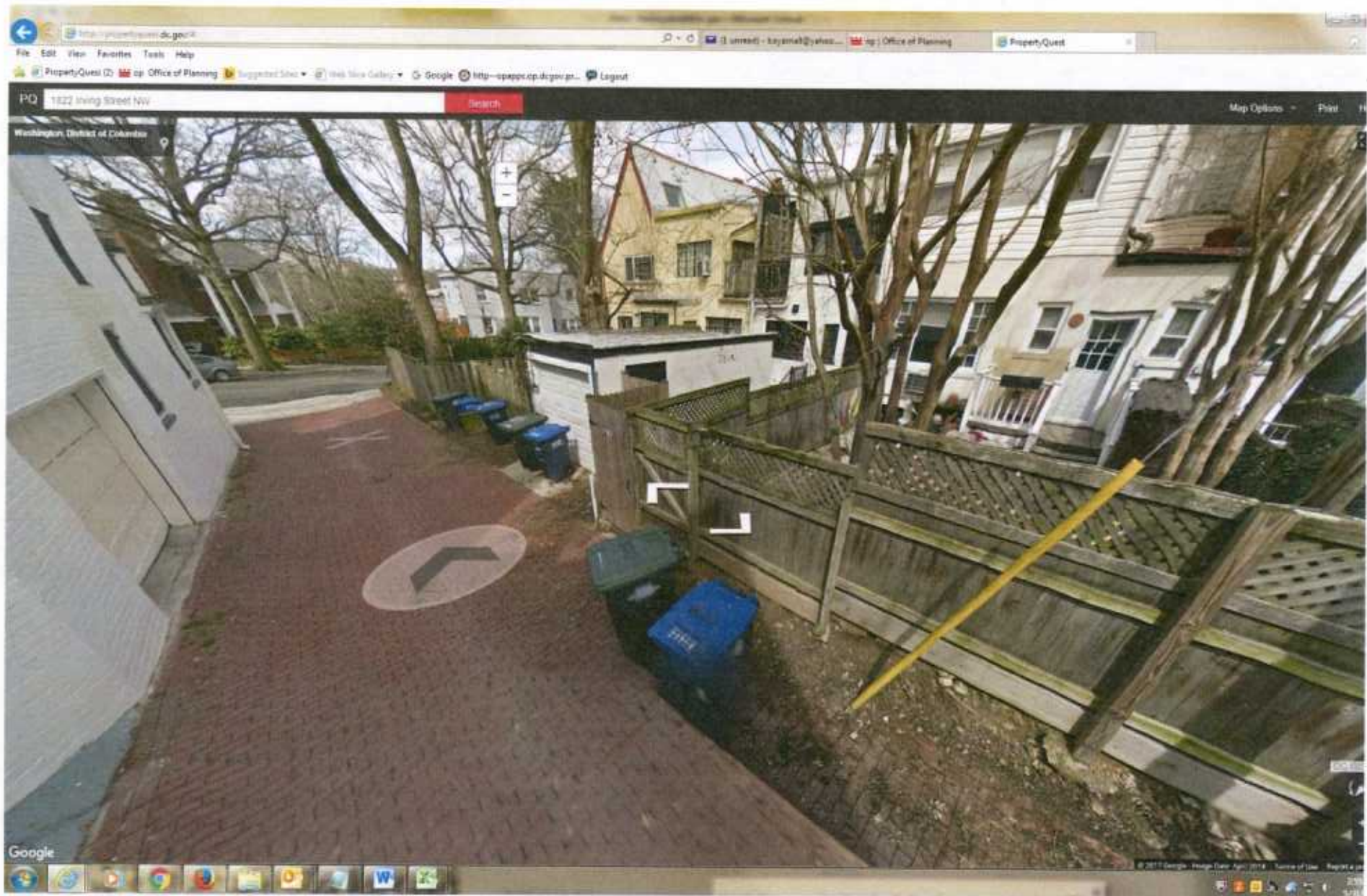
1800 Columbia Road NW - Photos





1800 Columbia Road NW - Photos





1822 Irving Street NW - GARAGE  
MT. Pleasant Historic District





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: May 16, 2017

Cap Id: R1700149

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:

5514 SHERIER PL NW

LOT: 0086 SQUARE: 1449 TYPE: Sheds - U

VACANT:

Please notify our office of the satisfactory completion of your inspection of the premises, by filling out the clearance section below and returning this form to the D.C.R.A. Permit Operations Division, 1100 4th Street S.W., Washington D.C. 20024

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**CLEARANCE**

This is to inform you that we researched our records concerning the structure identified above and we have no objections to proceeding with the proposed razing of said structure.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of releasing HPO Official. (print) \_\_\_\_\_



**APPLICATION FOR RAZE PERMIT**

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whitening out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter 1 § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

Application Date: 05/17/2017

**1. INFORMATION ON PROPERTY**

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
5514 Sherier Place	NW	Three	1449		0086

**2. APPLICANT INFORMATION**

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Hanlon Design Build, Inc.	4927 Eskridge Terr, NW, 20016	202-244-2942	dcpermits@casengineering.com
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
David C. Landsman, CAS Engineering	1001 Conn Ave, NW, #401, 20036	202-393-7200	dcpermits@casengineering.com

**3. TYPE OF PERMIT**

14. Check all that apply:  
☒ Raze Permit

**4. DESCRIPTION OF BUILDING**



15. Description of Building to be Razed (e.g., two story brick single family dwelling)			16. Existing Number of Stories of Bldg
1-story frame detached garage			1
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
Single-family residential		Frame	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
7.0	12.0	10	840

**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
Hanlon Design Build, Inc.	4927 Eskridge Terr, NW, WDC 20016	202-244-2942

26. Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature 						
27. CFA?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
28. Raze Entire Building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	34. Property Owner Signature 						
29. Building Condemned?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	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.						
30a. Party Wall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
31. Building Vacant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Building must be vacant before Raze Permit issuance.						
32. Public Space Vault?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Official Use Only</b> <table border="1"> <tr> <td>Fee</td> <td>By</td> <td>Date</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	Fee	By	Date			
Fee	By	Date						

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

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)

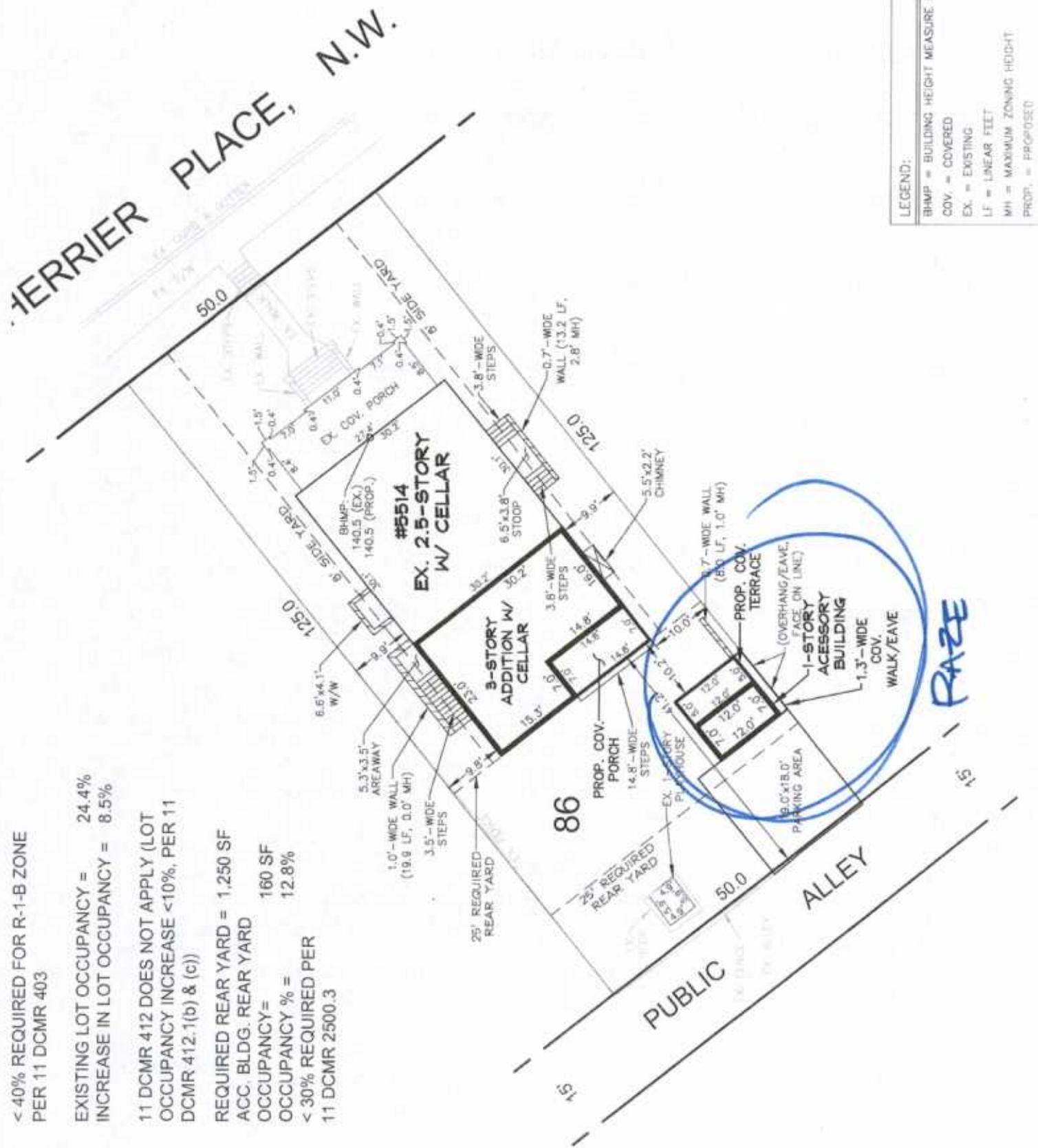
36. Insurance Company	37. Policy or Certificate No.	38. Expiration Date
TBD	TBD	TBD

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

EXISTING LOT OCCUPANCY = 24.4%  
INCREASE IN LOT OCCUPANCY = 8.5%

11 DCMR 412 DOES NOT APPLY (LOT  
OCCUPANCY INCREASE <10%, PER 11  
DCMR 412.1(b) & (c))

REQUIRED REAR YARD = 1,250 SF  
ACC. BLDG. REAR YARD  
OCCUPANCY = 160 SF  
OCCUPANCY % = 12.8%  
< 30% REQUIRED PER  
11 DCMR 2500.3



LEGEND:

BHMP = BUILDING HEIGHT MEASURE POINT

COV. = COVERED

EX. = EXISTING

$$LE = LEAR \cdot EFT$$

MH = MAXIMUM TONING HEIGHT

परम. = परमेश्वर











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: April 24, 2017

Cap Id: R1700136

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:

5615 33RD ST NW

LOT: 0014 SQUARE: 2022 TYPE: Single Family

VACANT: Yes

Please notify our office of the satisfactory completion of your inspection of the premises, by filling out the clearance section below and returning this form to the D.C.R.A. Permit Operations Division, 1100 4th Street S.W., Washington D.C. 20024.

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**CLEARANCE**

This is to inform you that we researched our records concerning the structure identified above and we have no objections to proceeding with the proposed razing of said structure.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of releasing HPO Official. (print) \_\_\_\_\_



**APPLICATION FOR RAZE PERMIT**

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

R1700136

Application Date:

April 22, 2017

**1. INFORMATION ON PROPERTY**

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
5615 33rd St NW	NW	One	2022	<del>0014</del>	0014

**2. APPLICANT INFORMATION**

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Emily Phillips	5615 33rd St NW		
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
Tanya Hill	20707	3017754995	permits@rt2ao.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:	
Garage in rear		1	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
SFD		Wood	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
20	10	8	1600

**OFFICIAL USE ONLY**

CONDITIONS/ COMMENTS:

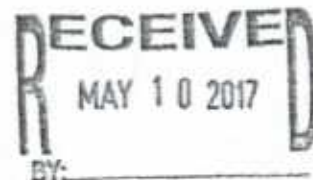




Government of the District of Columbia  
Department of Consumer and Regulatory Affairs

Permit Operations Division  
1100 4th Street SW  
Washington DC 20024

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TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557



Date: May 09, 2017

Cap Id: R1700145

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:  
5413 9TH ST NW

LOT: 0026 SQUARE: 2994 TYPE: Single Family Dwelling - R-3

VACANT:

Please notify our office of the satisfactory completion of your inspection of the premises, by filling out the clearance section below and returning this form to the D.C.R.A. Permit Operations Division, 1100 4th Street S.W., Washington D.C. 20024.

**CLEARANCE**

This is to inform you that we researched our records concerning the structure identified above and we have no objections to proceeding with the proposed razing of said structure.

Date: 5/10/2017 Signature: [Signature]

Name of releasing HPO Official. (print) Maloney

*Emergency Raze required*

*[Signature]* *DOB*



**APPLICATION FOR RAZE PERMIT**

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whitening out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter 1 § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

R1700145

Application Date: 05/09/2017

**1. INFORMATION ON PROPERTY**

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
5413 9th Street	NW	Four	2994		0026

**2. APPLICANT INFORMATION**

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Dr. Leroy M Owens	5413 9th St NW, WDC 20011	202-329-1725	
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
Quinten J. Washington	2828 Noble Fir Ct, WB VA 22192	703-910-3237	qwashington@quintessenti

**3. TYPE OF PERMIT**

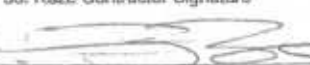
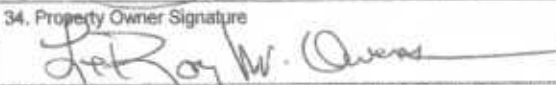
14. Check all that apply:

☒ 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 with basement brick detached single family conventional house		2	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
Residential		Brick	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
57	30	18	30,780

**OFFICIAL USE ONLY**

CONDITIONS/ COMMENTS:

SECTION A. RAZE PERMIT					
23. Raze Contractor's Name <b>Engineered Demolition, LLC</b>		24. Contractor's Address (including zip code) <b>2412 Minnesota Ave SE, Ste 303, WDC 200</b>		25. Contractor's Phone <b>(202) 258-5253</b>	
26. Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature  34. Property Owner Signature  30b. If yes, adjacent property owner signature is required. <b>N/A</b> 30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected. Building must be vacant before Raze Permit issuance.			
27. CFA?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
28. Raze Entire Building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
29. Building Condemned?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
30a. Party Wall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
31. Building Vacant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
32. Public Space Vault?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Official Use Only</b> Fee _____ By _____ Date _____			
33. Plumber's Name		34. Plumber's License Number		35. Raze Method (ball, bulldozer, by hand, etc.)	
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: <ul style="list-style-type: none"> <li>Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024</li> <li>Include a 30-day advance notice cancellation clause.</li> <li>Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.</li> <li>State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.</li> <li>If the insurance is for one specific address only, state that, "Razing Operations at _____"  <div style="text-align: right; margin-right: 50px;">(address of raze operation)</div> </li> </ul>					
36. Insurance Company		37. Policy or Certificate No.		38. Expiration Date	
<b>Integrated Insurance Solutions</b>		<b>CO125D411A</b>		<b>06/08/2017</b>	
39. Asbestos in Building?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Official Use Only</b> Fee _____ By _____ Date _____			
If yes, indicate location:					













May 9, 2017

Quinten J. Washington, CCM  
President & Chief Executive Officer  
QUINTESSENTIAL CONSTRUCTION MANAGERS  
& CONSULTANTS, LLC  
2828 Noble Fir Court  
Woodbridge, Virginia 22192

**RE: EMERGENCY RAZE PERMIT FOR CONDEMNED PROPERTY LOCATED AT 5413 9<sup>TH</sup>  
STREET NW**

To whom it may concern,

The subject property has suffered major structural failure (see attached raze permit application) and has been condemned by the DCRA Construction Inspection Branch. The structure has continued to deteriorate each day, the DCRA Construction Inspection Branch has deemed that the building is not safe to be entered and is in desperate need of demolition. We are therefore requesting your cooperation in expediting the clearance of the subject property so that we may remedy the current situation quickly via demolition of the structure.

Should you have any additional questions or comments please advise. I can be reached at (703) 910-3237 – office or (571) 719-0607 – mobile.

Thanks in advance for your prompt attention to this matter. We look forward to getting started to work soon on this very important project.

Sincerely,

Quinten J. Washington, CCM  
President & CEO  
[qWASHINGTON@quintessentialllc.com](mailto:qWASHINGTON@quintessentialllc.com)



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: May 19, 2017

Cap Id: R1700154

**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:

4108 ILLINOIS AVE NW

LOT: 0042 SQUARE: 3241 TYPE: Single Family Dwelling - R-3

VACANT:

Please notify our office of the satisfactory completion of your inspection of the premises, by filling out the clearance section below and returning this form to the D.C.R.A. Permit Operations Division, 1100 4th Street S.W., Washington D.C. 20024.

**CLEARANCE**

This is to inform you that we researched our records concerning the structure identified above and we have no objections to proceeding with the proposed razing of said structure.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of releasing HPO Official. (print) \_\_\_\_\_





R1700154

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

Application Date:

5/19/17

### 1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
4108 ILLINOIS AVENUE NW	NW	4	3241	N/A	42

### 2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
FREDERIKA PREVOST	4108 ILLINOIS AVENUE NW, WASHINGTON DC 20011	202 270 0100	ACT-TOUCH-SAFETY@MSN.COM
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
N/A	N/A	N/A	N/A

### 3. TYPE OF PERMIT

14. Check all that apply:

☒ Raze Permit

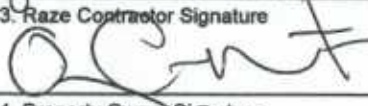
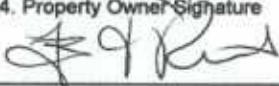
### 4. DESCRIPTION OF BUILDING

15. Description of Building to be Razed (e.g., two story brick single family dwelling) ONE STORY METAL FRAME GARAGE			16. Existing Number of Stories of Bldg: 1
17. Use(s) of Property (specifically indicate if any use is residential.) GARAGE		18. Materials of Building (brick, wood, etc.) METAL, WOOD	
19. Bldg Length (ft) 17	20. Bldg Width (ft) 11	21. Bldg Height (ft) 9	22. Bldg Volume (cu ft) (L x W x H) 1683

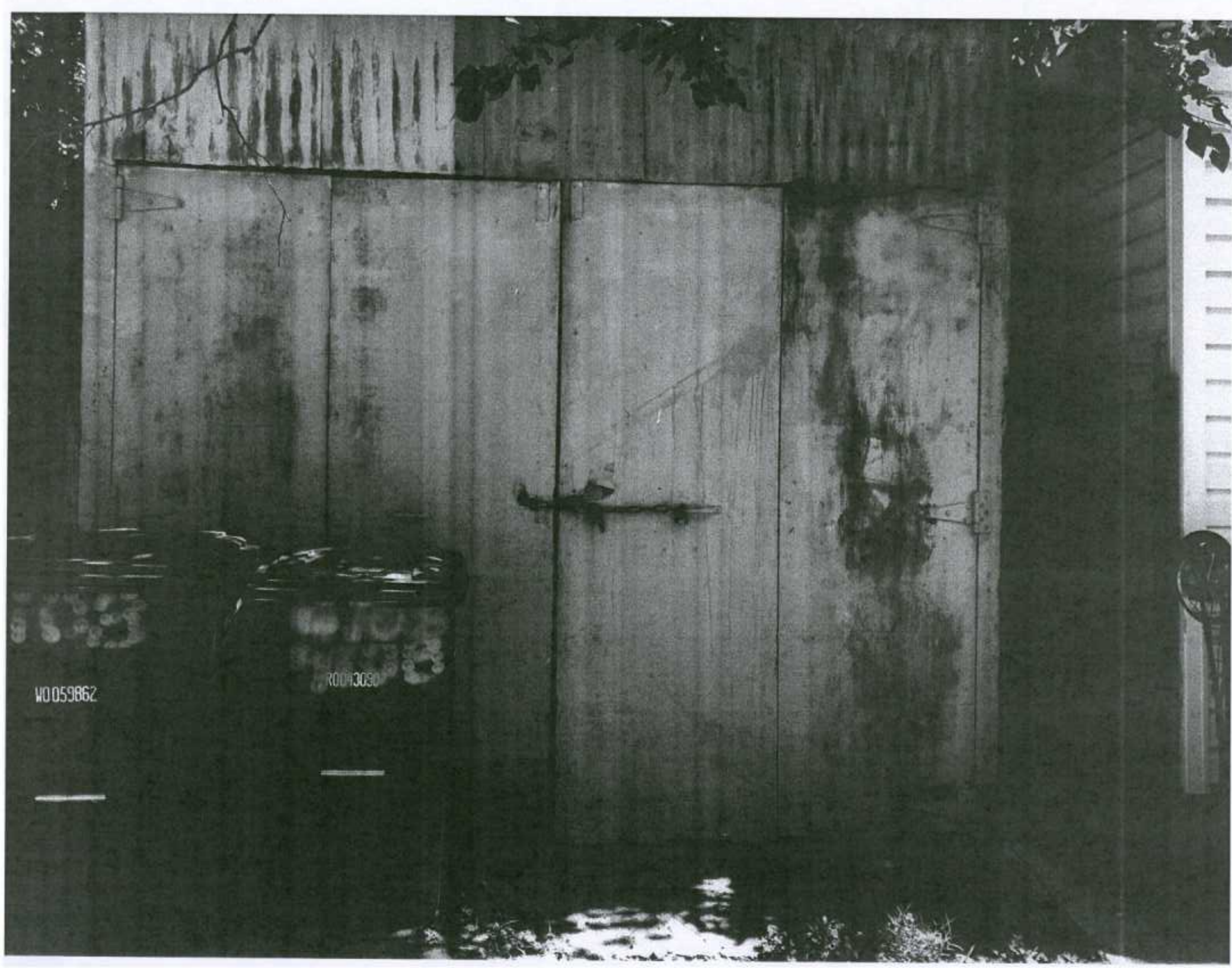
### OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

# SECTION A. RAZE PERMIT

23. Raze Contractor's Name <b>OCTAVE CONSTANTINE</b>		24. Contractor's Address (including zip code) <b>1340 FAIRMONT ST NW WASHINGTON DC 20009</b>		25. Contractor's Phone <b>240 4946832</b>							
26. Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature 									
27. CFA?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No										
28. Raze Entire Building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	34. Property Owner Signature 									
29. Building Condemned?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	30b. If yes, adjacent property owner signature is required. <b>N/A</b>									
30a. Party Wall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected.									
31. Building Vacant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Building must be vacant before Raze Permit issuance.									
32. Public Space Vault?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<div style="text-align: center;"><b>Official Use Only</b></div> <table border="1" style="width: 100%;"> <tr> <td>Fee</td> <td>By</td> <td>Date</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				Fee	By	Date			
Fee	By	Date									
33. Plumber's Name <b>N/A</b>		34. Plumber's License Number <b>N/A</b>		35. Raze Method (ball, bulldozer, by hand, etc.) <b>by hand</b>							
<p>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.</p> <p>2. The Certificate should:</p> <ul style="list-style-type: none"> <li>• Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024</li> <li>• Include a 30-day advance notice cancellation clause.</li> <li>• Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.</li> <li>• State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.</li> <li>• If the insurance is for one specific address only, state that, "Razing Operations at _____ (address of raze operation)"</li> </ul>											
36. Insurance Company <b>N/A</b>		37. Policy or Certificate No. <b>N/A</b>		38. Expiration Date <b>N/A</b>							
39. Asbestos in Building?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<div style="text-align: center;"><b>Official Use Only</b></div> <table border="1" style="width: 100%;"> <tr> <td>Fee</td> <td>By</td> <td>Date</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				Fee	By	Date			
Fee	By	Date									
If yes, indicate location:											





W0059862

R0043030



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: May 19, 2017

Cap Id: R1700155

**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:  
2708 26TH ST NE

LOT: 0030 SQUARE: 4265 TYPE: Retail or Wholesale Store - M VACANT:

Please notify our office of the satisfactory completion of your inspection of the premises, by filling out the clearance section below and returning this form to the D.C.R.A., Permit Operations Division, 1100 4th Street S.W., Washington D.C. 20024.

---

**CLEARANCE**

This is to inform you that we researched our records concerning the structure identified above and we have no objections to proceeding with the proposed razing of said structure.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of releasing HPO Official. (print) \_\_\_\_\_





R1700155

Government of the District of Columbia

Print Form

## APPLICATION FOR RAZE PERMIT

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter 1 § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

Application Date: May 18, 2017

## 1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
2708 26th Street	NE	Five	4265		0030

## 2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
2424 Evarts Partners LLC	3401 8th St NE, Wash, DC 20017	202.733.5465	mark@menkitigroup.com
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
Kim Mitchell	1615 New Hampshire Ave NW 4th Fl	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:	
One story brick commercial building		1	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
Vacant		Concrete, Brick, Steel, Wood, Glass	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
50	32	14	22,400

## OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

REV 11/11

Page 1 of 5 Effective April 9, 2009



SECTION A RAZE PERMIT			
23. Raze Contractor's Name		24. Contractor's Address (including zip code)	
F5G Concrete - Alex Lucero		5001 54th Place, Hyattsville, MD 20781	
25. Contractor's Phone		301.674.5876	
26. Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature <i>Felipe Calvan Lucero</i>	
27. CFA?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
28. Raze Entire Building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	34. Property Owner Signature <i>M. J. Brown</i>	
29. Building Condemned?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
30a. Party Wall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	30b. If yes, adjacent property owner signature is required.	
		30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected.	
31. Building Vacant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Building must be vacant before Raze Permit issuance.	
32. Public Space Vault?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Official Use Only</b>	
		Fee	By Date
33. Plumber's Name		34. Plumber's License Number	
DMV Plumbing & Mechanical Contractors		PC1001139	
		35. Raze Method (ball, bulldozer, by hand, etc.)	
		By hand and skid-steer loader	
<p>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.</p> <p>2. The Certificate should:</p> <ul style="list-style-type: none"> <li>• Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024</li> <li>• Include a 30-day advance notice cancellation clause.</li> <li>• Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.</li> <li>• State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.</li> <li>• If the insurance is for one specific address only, state that, "Razing Operations at _____ (address of raze operation)"</li> </ul>			
36. Insurance Company		37. Policy or Certificate No.	
Utica First Insurance Company		ART-8268082	
		38. Expiration Date	
		05/11/2018	
39. Asbestos in Building?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Official Use Only</b>	
If yes, indicate location:		Fee	By Date



4265 0030 09/13/2004

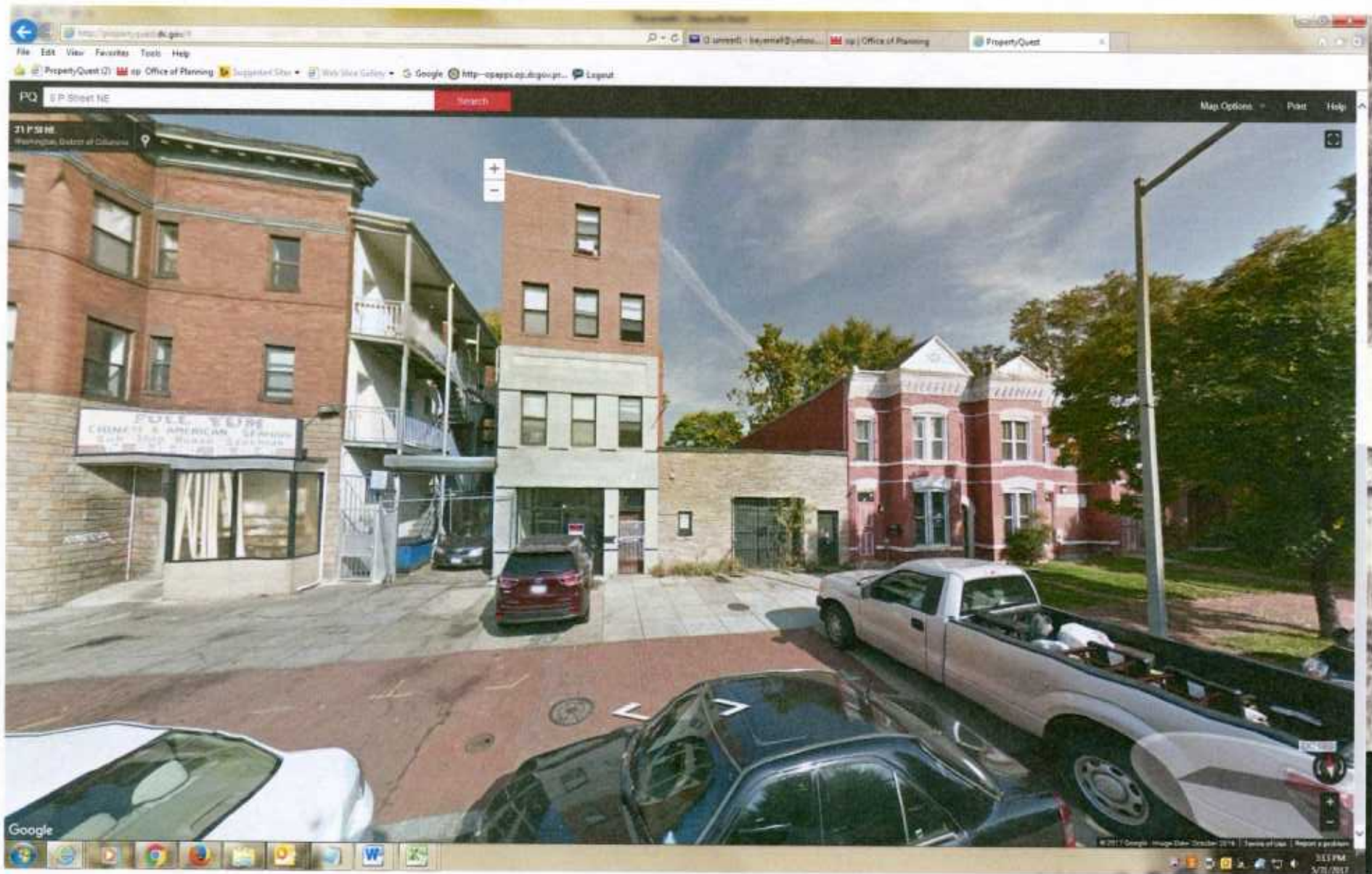




4337 0045 09/15/2004

2810 Bladensburg Road 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: May 02, 2017

Cap Id: R1700142

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:

1436 IVES PL SE

LOT: 0085 SQUARE: 1065 TYPE: Single Family Dwelling - R-3

VACANT:

Please notify our office of the satisfactory completion of your inspection of the premises, by filling out the clearance section below and returning this form to the D.C.R.A. Permit Operations Division, 1100 4th Street S.W., Washington D.C. 20024.

**CLEARANCE**

This is to inform you that we researched our records concerning the structure identified above and we have no objections to proceeding with the proposed razing of said structure.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of releasing HPO Official. (print) \_\_\_\_\_



**APPLICATION FOR RAZE PERMIT**

R1700142

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whitening out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

Application Date: 5-01-17

**1. INFORMATION ON PROPERTY**

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
1436 IVES PLASE	SE	Six	1065		0085

**2. APPLICANT INFORMATION**

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
1436 IVES PLACE LLC	3521 McLean Ave Fairfax, VA 22030	7038984800	SBAJAJ40@GMAIL.COM
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
MUHITTIN AYDENIZ	2452 jostaberry wy Odenton MD 21113	4435592514	maymimar@gmail.com

**3. TYPE OF PERMIT**

14. Check all that apply: ☒ Raze Permit *ousmane39@yahoo.com. 202-5380025*

**4. DESCRIPTION OF BUILDING**

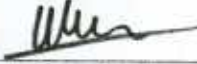

15. Description of Building to be Razed (e.g., two story brick single family dwelling)		16. Existing Number of Stories of Bldg:	
2 STORY BRICK SINGLE Family town house. - <i>Detached</i>		2	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
residential		brick, wood	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
29.6	25.6	24	18186

**OFFICIAL USE ONLY**

CONDITIONS/ COMMENTS:



# SECTION A: RAZE PERMIT

23. Raze Contractor's Name Dila Construction		24. Contractor's Address (including zip code) 1200 potomac ave se Wash. DC 20003		25. Contractor's Phone 202-460-4003							
26. Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature 									
27. CFA?	<input type="checkbox"/> Yes <input type="checkbox"/> No										
28. Raze Entire Building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	34. Property Owner Signature 									
29. Building Condemned?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No										
30a. Party Wall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	30b. If yes, adjacent property owner signature is required.									
		30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected.									
31. Building Vacant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Building must be vacant before Raze Permit issuance.									
32. Public Space Vault?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<div style="text-align: center;"><b>Official Use Only</b></div> <table border="1" style="width: 100%;"> <tr> <td>Fee</td> <td>By</td> <td>Date</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>				Fee	By	Date			
Fee	By	Date									

33. Plumber's Name Junbo Plumbing	34. Plumber's License Number DC Plumbing 1001098 Master Plumber 100097	35. Raze Method (ball, bulldozer, by hand, etc.) By 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 CHENAULT INSURANCE SERVICES, LLC	37. Policy or Certificate No. 7124540	38. Expiration Date 11/01/2017
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39. Asbestos in Building? If yes, indicate location:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<div style="text-align: center;"><b>Official Use Only</b></div> <table border="1" style="width: 100%;"> <tr> <td>Fee</td> <td>By</td> <td>Date</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>		Fee	By	Date			
Fee	By	Date							



1065 0085 09/08/2004

1436 Ines Place SE





0755 0850 09/12/2004

226 Massachusetts Avenue NE