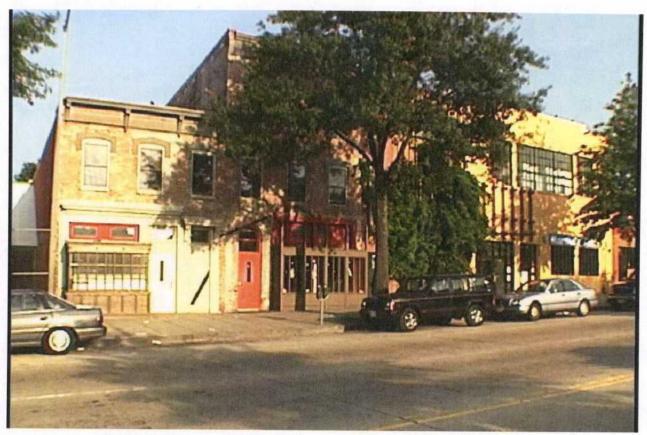
STATUS DATE	ID	Address	Description of Work	DCRA Notice Date	ANC Expiration	PER SUB TYPE	SSL	ANC	Zoning	Applicant
9/4/2018	R1800261	2102 - 2114 14TH ST NW, WASHINGTON, DC 20009	RAZE ON 2-3 STORIES BUILDINGS	Sept. 14, 2018	Oct. 25, 2018	Raze	0203 0096	1B	ARTS-3	KIM MITCHELL; MCCULLOUGH CONSTRUCTION LLC
9/13/2018	R1800262	1400 W ST NW, WASHINGTON, DC 20009	Raze of 1 story building	Sept. 14, 2018	Oct. 25, 2018	Raze	0203 0805	1B	ARTS-3	KIM MITCHELL
	R1800257	5053 LOUGHBORO RD NW, WASHINGTON, DC 20016	2 STORY STONE AND FRAME SINGLE FAMILY DETACHED DWELLING WITH CELLAR	Sept. 14, 2018	Oct. 25, 2018	Raze	1431 0005	3D	R-1-A	TBD
	R1800255	5220 41ST ST NW, WASHINGTON, DC 20015	RAZE ONE STORY, ONE CAR FRAME GARAGE	Sept. 14, 2018	Oct. 25, 2018	Raze	1741 0826	3E	R-2	N/A
	R1800252	6900 GEORGIA AVE NW, BLDG# 91, WASHINGTON,	2 STORY OFFICE BUILDING, BUILDING 91	, ,	Oct. 25, 2018	Raze	2950 0808	4A	WR-2	N/A
8/14/2018	R1800253	6900 GEORGIA AVE NW, BLDG# 83, WASHINGTON,	2 STORY OFFICE BUILDING, BUILDING 83	Sept. 14, 2018	Oct. 25, 2018	Raze	2950 0808	4A	WR-2	N/A
8/23/2018	R1800256	150 S ST NW, WASHINGTON, DC 20001	3 STORY BRICK CHURCH	Sept. 14, 2018	Oct. 25, 2018	Raze	3104 0820	5E	RF-1	YARED TESFAYE; PERDOMO NATIONAL
8/28/2018	R1800258	39 NEW YORK AVE NE, WASHINGTON, DC 20002	2 STORY AUTO REPAIR SHOP AND ASSOCIATED APPURTENANCES	Sept. 14, 2018	Oct. 25, 2018	Raze	0671 0018	6C	D-5	TBD
8/28/2018	R1800259	41 NEW YORK AVE NE, WASHINGTON, DC 20002	2 STORY AUTO REPAIR SHOP & ASSOCIATED APURTENANCES	Sept. 14, 2018	Oct. 25, 2018	Raze	0671 0801	6C	D-5	TBD
8/21/2018	R1800254	4635 NANNIE HELEN BURROUGHS AVE NE,	RAZE 2 STORY DETACHED SINGLE FAMILY WITH BASEMENT	Sept. 14, 2018	Oct. 25, 2018	Raze	5147 0073	7C	MU-3	N/A
9/12/2018	R1800263	5040 A ST SE, WASHINGTON, DC 20019	2 STORY WOOD, STUCCO, BRICK SINGLE FAMILY DWELLING PLUS SHED	Sept. 14, 2018	Oct. 25, 2018	Raze	5328 0026	7E	R-3	KIM PREDDIE; TBD
9/4/2018	R1800260	2200 MINNESOTA AVE SE, WASHINGTON, DC 20020	RAZE EXISTING SCHOOL - NEW APPLICATION SUBMITTED TO CORRECT THE STREET ADDRESS SPELLING, LOT AND SQUARE FROM ORIGINAL PERMIT APPLICATION R1800199. ALL APPROVAL	Sept. 14, 2018	Oct. 25, 2018	Raze	5561 0822	8A	C-2-A	CLIFFORD DIXON

## **Owner Name** MARTHAS TABLE INC PATRICIA YUEN LIFE INSURANCE KURT D VOLKER CHARLES BABCOCK UNITED STATE OF AMERICAN DEPT OF ARMY UNITED STATE OF AMERICAN DEPT OF ARMY 150 S Street, NW, LLC 33 NEW YORK AVENUE LP 33 NEW YORK AVENUE LP 4635 NHB DEVELOPERS LLC FAHAD BAKIR DISTRICT OF COLUMBIA



0203 0096 08/04/2004

2102 – 2114 14<sup>th</sup> Street NW

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: September 13, 2018



Cap Id:

R1800262

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:

1400 W ST NW

LOT: 0805 SQUARE: 0203 TYPE: Retail or Wholesale Store - M

VACANT: No

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

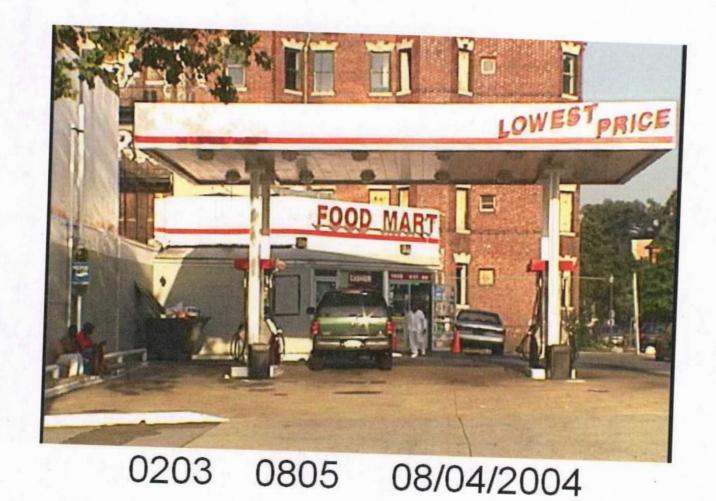
Date:	Signature:	
Name of releasing	HPO Official. (print)	



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

Address of Proposed Work  1400 W Street  2. Quad 3. Ward 4a. Square 4b. Suffix 5. Lot 805  2. APPLICANT INFORMATION  7. Complete mailing address (include zip) 8. Phone Number(s) 9. Email 9. Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email 13. Email 14. Check all that apply:  8. Property Owner 15. Description of Building to be Razed (e.g., two story brick single family dwelling) 15. Description of Building to be Razed (e.g., two story brick single family dwelling) 16. Existing Number of Stories of 15. Use(s) of Property (specifically indicate if any use is residential.) 17. Use(s) of Property (specifically indicate if any use is residential.) 18. Materials of Building (brick, wood, etc.) 18. Materials of Building (brick, wood, e	1. INFORMATION ON PROPERTY Address of Proposed Work 400 W Street  2. Quad 3. Ward NW One 203 4b. Suffix 5. Lot 805  2. APPLICANT INFORMATION Property Owner 7. Complete mailing address (include zip) 2300 Wisconcin Ave NW, WDC 2000 202-737-7111 Ext.6. 2. Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 202-737-7111 Ext.6. 2. Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email 13. Email 13. Email 14. Check all that apply:  3. TYPE OF PERMIT 4. DESCRIPTION OF BUILDING 5. Description of Building to be Razed (e.g., two story brick single family dwelling) 16. Existing Number of Stories of Building (brick, wood, etc.) 2. Bldg Length (ft) 20. Bldg Width (ft) 21. Bldg Height (ft) 22. Bldg Volume (cu ft) (L. x. W.) 2. Special 203 203 203 203 203 203 203 203 203 203	31800262				Appli	cation Date: 09	-06-2018	
Adoles of Proposed Visik  4.00 W Street  2. APPLICANT INFORMATION  7. Complete mailing address (include zip)  8. Phone Number(s)  9. Email ohekmat@madisonin	2. APPLICANT INFORMATION Property Owner 7. Complete mailing address (include zip) 8. Phone Number(s) 9. Email ohekmat@madisoninve 12. Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email include zip) 14. Complete mailing address (include zip) 15. DKM Consulting/Kim Mitchell 16. Existing Number of Stories of Billiding 17. Check all that apply:  18. Raze Permit  4. DESCRIPTION OF BUILDING 18. Materials of Building Number of Stories of Billiding 18. Materials of Building (brick, wood, etc.) Concrete, steel, bricks, glass 18. Materials of Building (brick, wood, etc.) Concrete, steel, bricks, glass 18. Materials of Building (brick, wood, etc.) Concrete, steel, bricks, glass 18. Materials of Building (brick, wood, etc.) Concrete, steel, bricks, glass 18. Materials of Building (brick, wood, etc.) Concrete, steel, bricks, glass 18. Materials of Building (brick, wood, etc.) Concrete, steel, bricks, glass 18. Materials of Building (brick, wood, etc.) Concrete, steel, bricks, glass 18. Materials of Building (brick, wood, etc.) Concrete, steel, bricks, glass 18. Materials of Building (brick, wood, etc.) Concrete, steel, bricks, glass 18. Materials of Building (brick, wood, etc.) Concrete, steel, bricks, glass 18. Materials of Building (brick, wood, etc.) Concrete, steel, bricks, glass			1. INFORMATION	ON PR	OPERTY			
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AT 14 LLC  2300 Wisconcin Ave NW, WDC 20007  202-737-7111 Ext.6  chekmat@madisoning.  202-737-7111 Ext.6  chekmat@madisoning.  202-737-7111 Ext.6  chekmat@madisoning.  202-420-0091  3. TYPE OF PERMIT  3. TYPE OF PERMIT  4. DESCRIPTION OF BUILDING  5. Description of Building to be Razed (e.g., two story brick single family dwelling)  3. Type of Building.  4. Description of Building to be Razed (e.g., two story brick single family dwelling)  3. Type of Permit  4. Description of Building to be Razed (e.g., two story brick single family dwelling)  3. Type of Permit  4. Description of Building to be Razed (e.g., two story brick single family dwelling)  3. Type of Permit  4. Description of Building to be Razed (e.g., two story brick single family dwelling)  3. Type of Permit  4. Description of Building to be Razed (e.g., two story brick single family dwelling)  3. Type of Permit  4. Description of Building to be Razed (e.g., two story brick single family dwelling)  3. Type of Permit  4. Description of Building to be Razed (e.g., two story brick single family dwelling)  1. Story  1. Story  1. Story  1. Story  1. Story  2. Bidg Volume (cu ft) (L.x.)  2. Bidg Volume (cu ft) (L.x.)  3. Type of Permit  4. Description of Building to be Razed (e.g., two story brick single family dwelling)  1. Story  2. Bidg Volume (cu ft) (L.x.)  3. Type of Permit  4. Description of Building to be Razed (e.g., two story brick single family dwelling)  1. Story  2. Bidg Volume (cu ft) (L.x.)  2. Bidg Volume (cu ft) (L.x.)  3. Type of Permit  4. Description of Building to be Razed (e.g., two story brick single family dwelling)  1. Story  2. Bidg Volume (cu ft) (L.x.)  3. Type of Permit	AT 14 LLC  2300 Wisconcin Ave NW, WDC 2000  202-737-7111 Ext.6  20		SLE TO	2. APPLICANT	INFORM	MATION			
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				OFFICIAL	USE OF	ILY			
		CONDITIONS/ COMMENTS:	NEW YORK			376			
		CONDITIONS COMMENTS.							

23. Raze Contractor's Name		24 Contrac	tor's Address (including zip code)	25. Contractor's	Phone
McCullough Construction L	LC		necticut Ave, NW, Ste. 200 nn, DC 20015	202-237-241	5
26. Historic District?	XYE	s No	33 Raze Contractor Signatu	re na	
27. CFA?	□Y€	es X No	11-21 May	the	
28. Raze Entire Building?	□Ye	s 🛛 No	34 Preperty Owner Signatur	9	
29. Building Condemned?	□Ye	s X No	14-1-		2
30a. Party Wall?	XYe	s No	30b. If yes, adjacent pr	operty owner sign	ature is required.
			30c. Any raze permit applic include 2 copies of a plan th		involving party walls must be wall(s) will be protected
31. Building Vacant?	□Ye	s X No	Building must be vacant before		
32. Public Space Vault?	ПҮе	s X No		Official Use On	ly
			Fee	Ву	Date
33. Plumber's Name		34. Plumbe	er's License Number	35. Raze Method	(ball, buildozer, by hand, etc.)
Joseph J. Magnolia, Inc.		PC 512		Excavator, bul	ldozer & hand
<ul> <li>Include a 30-day advance</li> <li>Include these amounts of</li> <li>State that the insurance of</li> </ul>	urance as: £ notice cancinsurance co overs *Razin	e story, wholly Deputy Director ellation clause overage: Bodily g Operations in	detached from any other building or, Permit Division, 1100 4th St SW,	on the same or adjoin Washington, DC 2000 0,000; and Property D	amage, \$100,000. s for blankel coverage.
36. Insurance Company		37. Policy	y or Certificate No.	38. Expiration	Date
Selective Insurance Co of Sou	theast	S227676	l		
39. Asbestos in Building? If yes, indicate location:	Yes	No		Official Use Only	
			Fee By		Date



1400 W Street NW









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: August 28, 2018



Cap Id:

R1800257

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:

5053 LOUGHBORO RD NW

LOT: 0005 SQUARE: 1431 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

Date:	Signature:	
Name of releasing I	HPO Official. (print)	

Government of the District of Columbia



## APPLICATION FOR RAZE PERMIT

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

Applicable code sections are in the 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.				4	.4.4,
			Appl	ication Date:	Av6.28	8, 2018
Control of the Contro	1. INFORMATIO	N ON PR	OPERTY	Service and		
Address of Proposed Work		2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
5053 Loughboro Road, NW		NW	Three	1431		0005
NOSE AZENTENE NE	2. APPLICANT	INFORM	ATION	Part Danie		
6. Property Owner	7. Complete mailing address	s (include zi	9) 8. Ph	one Number(s)	9. Email	
Kurt D. Volker	5053 Loughboro Road,	NW, 20016	202-	393-7200	dcpermits@	casengineering.com
10. Agent/Contractor for Owner (if applic	able) 11. Complete mailing address	ss (include 2	ip) 12. P	hone Number(s)	13. Email	
David C. Landsman, CAS Engineering-DC	LLC 1001 Conn Ave, NW, #46	01, 20036	202-	393-7200	dcpermits@	acasengineering.com
	3. TYPE (	F PERM	Т			
14. Check all that apply:		Street of the last	Constitution of the Consti			
▼ Raze	e Permit			IE 1	05	
	4. DESCRIPTION	N OF BU	ILDING			性性制度
15. Description of Building to be Razed	e.g., two story brick single family dw	elling)	1/2	16	6. Existing Number	er of Stories of Bldg:
2-story stone & frame single-famil	y detached dwelling with cellar			2		
17. Use(s) of Property (specifically indic	ate if any use is residential.)	18	B. Materials	of Building (brick	c, wood, etc.)	
Residential		Si	one and I	Frame		
19. Bldg Length (ft)	0. Bldg Width (ft)	21. Bldg	Height (ft)		22. Bldg Volume	e (cu ft) (L x W x H)
41.6	76.3	20		11	63,482	
L	OFFICIAL	USE ON	Υ .			
CONDITIONS/ COMMENTS:			(4			

		SEC	CTION A. RAZE PE	RMIT				
23. Raze Contractor's Name		24. Contrac	ctor's Address (including	zip code)	25. Contract	or's Phone		
TBD		TBD			TBD			
26. Historic District?	□Yes	x No	33. Raze Contra	ctor Signature				
27. CFA?	Yes	⊠ No	TBD	111				
28. Raze Entire Building?	⋉Yes	□No	34. Property Ov	ner Signature				
29. Building Condemned?	□Yes	× No		M	2			
30a. Party Wall?	□Yes	⊠ No	Notification F 30c. Any raze p	orm which s permit application	afeguards d	s) will need to sign the luring construction ng(s) involving party walls must be party wall(s) will be protected.		
31. Building Vacant?		□No	Building must be					
32. Public Space Vault? ☐ Yes ☒ N				Contract to the second	Official Use			
			Fee			Date		
33. Plumber's Name		34. Plumb	er's License Number		35. Raze Me	thod (ball, bulldozer, by hand, etc.)		
TBD		TBD Bulldozer/Excavator						
I. You must submit a Certificate of Ins square feet or less in area and not real. The Certificate should:  Show the holder of the ins Include a 30-day advance Include these amounts of State that the insurance or	surance as: Do notice cance insurance cov overs "Razing	estory, wholly eputy Directo llation clause verage: Bodil Operations	y detached from any off or, Permit Division, 1100 a. ly Injury, \$100,000; Agg in the District of Columb	her building on 0 4th St SW, W regate, \$300,0 bia," if the scop	/ashington, DC 2000; and Prope the of the insura	djoining premises.  20024  rty Damage, \$100,000.  ance is for blanket coverage.		
36. Insurance Company		37 Polic	cy or Certificate No.			of raze operation)		
TBD		TBD	by or Certificate No.		38. Expira	tion Date		
39. Asbestos in Building? If yes, indicate location:	□Yes			0	TBD	Only		
			Fee	Ву		Date		



1431 0005 10/03/2004

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.



VMQGRG. HOUSE

#### 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: August 22, 2018



Cap Id:

R1800255

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:

5220 41ST ST NW

LOT: 0826 SQUARE: 1741 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

Date:	Signature	
Name of releasing	HPO Official. (print)	

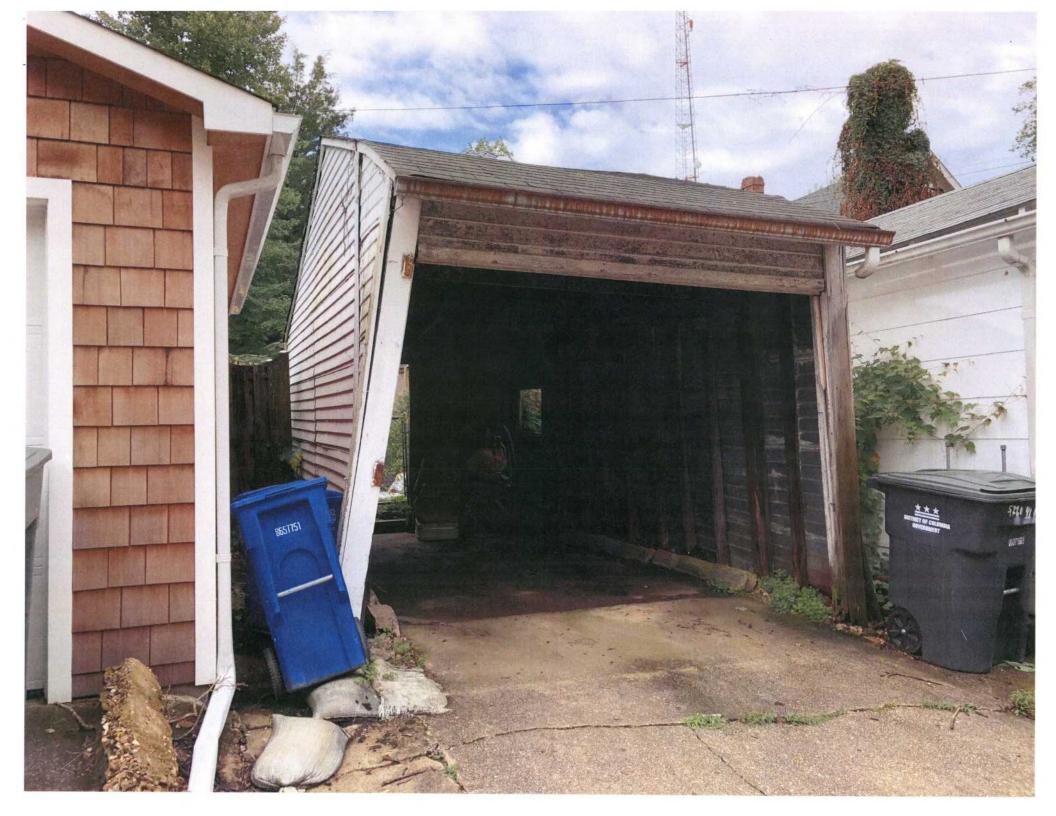


Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any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

Applicable code sections are in the 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.

05.1.7.1.2, 105.1.7.2, and Section	1.55A.		_ DAPES	STREET, ST. 18C		FERGUS ANNUAL VERTIL
			Applio	cation Date:	122/20	18
	1. INFORMATIO	N ON PROP	ERTY	F 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
Address of Proposed Work		2. Quad 3. \	Ward	4a. Square	4b. Suffix	5. Lot
5220 41st St,	WW. DC 20015	NW	3	1741		0826
	2. APPLICANT					
6. Property Owner	7. Complete mailing address		8. Pho	one Number(s)	9. Email	
CHARLES BABGOC				22815462		on net
10. Agent/Contractor for Owner (if appl			12. Ph	none Number(s)	13. Email	
VISVYDAS MATULI	S RESTON, VA 20	IDGE CT.	240	8999949	VMag	rg.house
	3. TYPE (	OF PERMIT				
14. Check all that apply:	ze Permit		- 31			
	4. DESCRIPTION	ON OF BUILD	DING			
15. Description of Building to be Razed	d (e.g., two story brick single family dv	velling)		16	Existing Number	er of Stories of Bldg:
FREE STANDING	GARAGE	Tude I				
17. Use(s) of Property (specifically indi	icate if any use is residential.)	18. M	laterials	of Building (brick	wood, etc.)	
RESIDENTIAL 1	CAR GARAGE	W	000	FRAMIA	G	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Heig	ght (ft)	He die	22. Bldg Volum	e (cu ft) (L x W x H)
22	10	13	1 8	Lie C. J	2,860	>
	OFFICIAL	USE ONLY				
				the latest to		

		SEC	TION A. RAZE PERMIT					
23. Raze Contractor's Name		24. Contracto	or's Address (including zip code	)	25. Contractor's Phone			
GENERAL CONSTRUCTION MILLWORKS LLC	IN	11722 RESTON	NEWBRIDGE CT. 2408999949					
26. Historic District?	□Yes	₩No	33. Raze Contractor Sign					
27. CFA?	Yes	No	V- Clartif.	- 11.	VISTYDAS MATULIS			
28. Raze Entire Building?	Yes	□No	500	34. Property Owner Signature				
29. Building Condemned?	Yes	□No	- CKBabar	u				
30a. Party Wall? Yes You 30			30b. If yes, adjacent Notification Form wh	nich sa	afeguards during	construction		
			30c. Any raze permit ap include 2 copies of a plan			volving party walls must be wall(s) will be protected.		
31. Building Vacant?	Yes	□No	Building must be vacant b	Raze Permit issuance	е.			
32. Public Space Vault?		No		-	Official Use Only			
			Fee	Ву		Date		
	1 500							
33. Plumber's Name	700	34. Plumber's License Number			35. Raze Method (ball, bulldozer, by hand, etc.)			
N/A NO PLUMBINGIN	GARAGE				BY HAND			
1. You must submit a Certificate of Insuran	nce coveri	covering the raze operation/contractor- unless the building you plan to raze is an accessory building 5						
square feet or less in area and not more 2. The Certificate should:	than one	story, wholly	detached from any other buildi	ing on	the same or adjoinir	ig premises.		
	nce as: De	eputy Director	, Permit Division, 1100 4th St S	SW. W	ashington, DC 2002	4		
<ul> <li>Include a 30-day advance not</li> </ul>	ice cancel	lation clause.						
Include these amounts of insu	rance cov	erage: Bodily	Injury, \$100,000; Aggregate, \$	\$300,00	00; and Property Da	mage, \$100,000.		
State that the insurance cover     If the insurance is for one spe	CONTRACTOR OF THE PARTY OF THE		n the District of Columbia," if the	e scop	e of the insurance is	for blanket coverage.		
If the insurance is for one special	Cilic addie	iss only, state	that, reading Operations at		(address of raz	re operation)		
36. Insurance Company		37. Policy	y or Certificate No.		38. Expiration [	Date		
			Bearing to the little					
39. Asbestos in Building?	Yes	No		Of	fficial Use Only			
If yes, indicate location:								
			Fee	Ву		Date		
			NAME OF THE OWNER, WHEN			TO SEE LI SEAL OF		
						THE RESERVE OF THE PERSON OF T		





**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

D.C. Historic Preservation Office

August 14, 2018

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:

6900 GEORGIA AVE NW

BULLDING 91

LOT: 0808 SQUARE: 2950 TYPE: Office - B

VACANT: Yes

R1800252

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

Date:	Signature:	
Name of releasing	HPO Official, (print)	

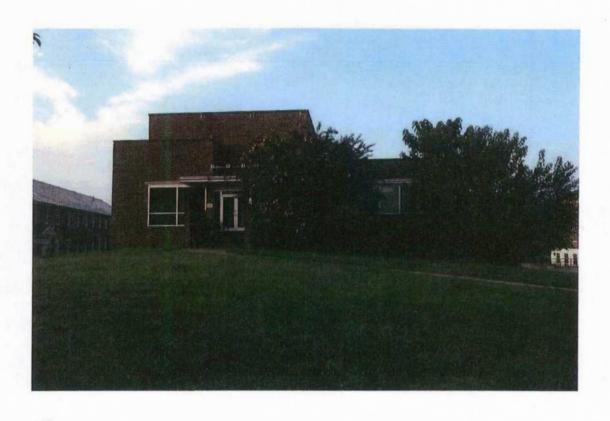


Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide detailed information. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered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

vs in the 2012 DCMD 12 Building Code Cumplement Chapter IS 105 1 7 105 1 71 105 1 71

					Applic	cation Date: Aug	ust 10, 2018	
	See man Se	1. INFORMATIO	N ON P	ROPE	RTY	Pin our to	4 4 4 4 1	NAME OF STREET
. Address of Proposed Work			2. Quad	3. W	ard	4a. Square	4b. Suffix	5. Lot
Building 91, 6900 Georgia	a Ave, NW,	Washington, DC 20012	NW	Fo	ur	2950	WR-7	817
	Adjoint se	2. APPLICANT	INFOR	MATI	ON		Si Talaha	
. Property Owner		7. Complete mailing address	(include	zip)	8. Pho	ne Number(s)	9. Email	
TPWR Developer,	LLC	1010 Butternut Street, NW, Washi	ngton, DC 2	0012	202	2-558-4420	robert.fau	uteux@hines.co
0. Agent/Contractor for Owner (	if applicable)	11. Complete mailing address	s (include	zip)	12. Ph	one Number(s)	13. Email	
The Berg Corpora	tion	2519 Wilkens Ave, Baltimo	re, MD 2	223	443	3-752-6883	rwoods@	bergdemo.co
CORPORATE DESCRIPTION		3. TYPE 0	F PERI	MIT				
4. Check all that apply:	Raze Per	mit						
Color A design		4. DESCRIPTIO	THE REAL PROPERTY.	UILDI	NG		PERME	
5. Description of Building to be	Razed (e.g., to	wo story brick single family dw	elling)			16.	Existing Number	r of Stories of Bldg
2-Story office build	ding					2		
7. Use(s) of Property (specifical	ly indicate if a	ny use is residential.)		18. Mat	terials (	of Building (brick,	wood, etc.)	
acant Medical Of	fice Buil	dings		Bric	k, w	oods and	concrete	X .
9. Bldg Length (ft)	20. Bld	g Width (ft)	21. Bld	g Heigh	t (ft)		22, Bldg Volume	e (cu ft) (L x W x H
110	50		22				121,000	
A Market Market	DE WEL	OFFICIAL	USE OF	NLY	Printer.			
CONDITIONS/ COMMENTS:								

		SE(	CTION A. RAZE PERMIT					
23. Raze Contractor's Name		24. Contrac	tor's Address (including zip co	de)	25. Contractor's Phone			
The Berg Corporation		2519 Wilk	kens Ave, Baltimore, MD 21223 443-752-6883					
26. Historic District?	□Ye:	S X No	33. Raze Contractor Signature					
27. CFA?	☐ Ye	s× No						
28. Raze Entire Building?	ĭYes ☐ No		34. Property Owner Sig	34. Property Owner Signature				
29. Building Condemned?	☐ Yes	s ⊠ No						
30a. Party Wall?			30b. If yes, adjacer Notification Form w			s) will need to sign the uring 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?		s X No			Official Use Only			
			Fee	Ву		Date		
33. Plumber's Name		34. Plumbe	er's License Number		35. Raze Meth	hod (ball, bulldozer, by hand, etc.)		
Ellis Jones Plumbing &	Heating	PC117	73		Exeavator			
<ul> <li>Include a 30-day advance</li> <li>Include these amounts of</li> <li>State that the insurance of</li> </ul>	surance as: D notice cance insurance cov overs "Razing	e story, wholly eputy Directo llation clause verage: Bodily Operations i	detached from any other buil r, Permit Division, 1100 4th St	lding on t SW, W , \$300,0	the same or ad/ /ashington, DC 2 000; and Propertoe of the insuran	ljoining premises,  20024  ly Damage, \$100,000, nce is for blanket coverage.		
36. Insurance Company		37 Polic	y or Certificate No.	STATE OF THE PARTY	(address of raze operation)  38. Expiration Date			
Insurance, Inc.		DAN1000			6-01-2019	on bate		
39. Asbestos in Building? If yes, indicate location:	□Yes	19		0	fficial Use O	nly		
			Fee	Ву		Date		





May 24, 2018

## Hines

To Whom It May Concern,

Please accept this letter as confirmation that The United States Army officially vacated the property known as Building 91 located at 6900 Georgia Avenue, NW Washington, DC 20012 on November 10, 2016.

Please contact me if you need any additional information.

Sincerely,

Katherine L. Wlacek Managing Director

800 10<sup>th</sup> Street, NW | Suite 600 Washington, DC 20001 202.347.6337



**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: August 14, 2018 Cap Id: R18	800253	
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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:

6900 GEORGIA AVE NW

BUILDING 83

LOT: 0808 SQUARE: 2950 TYPE: Office - B

**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

Date:	Signature:	
Name of releasing	HPO Official. (print)	

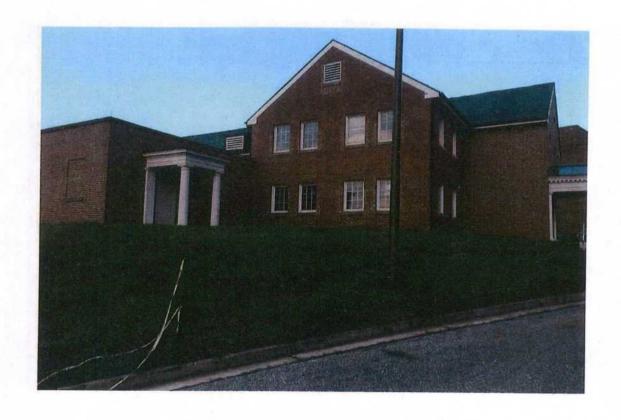


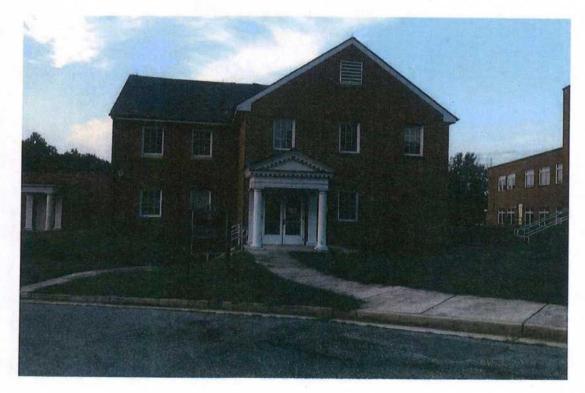
Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any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

Applicable code sections are in the 2013 DCMR 12 Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.2, 105.1.7.1.2, and Section 1554

10. Agent/Contractor for Owner (if applicable)  11. Complete mailing address (include zip)  12. Phone Number(s)  13. Expression of the contractor for Owner (if applicable)	-7 817	
1. Address of Proposed Work  Building 83, 6900 Georgia Ave, NW, Washington, DC 20012  NW Four 2950  C. APPLICANT INFORMATION  7. Complete mailing address (include zip)  8. Phone Number(s)  10. Agent/Contractor for Owner (if applicable)  The Berg Corporation  2. Quad 3. Ward 4a. Square WR-  NW Four 2950  NR-  1. Complete mailing address (include zip)  1. Complete mailing address (include zip)	-7 817 mail pert.fauteux@hines.com	
2. APPLICANT INFORMATION  6. Property Owner  7. Complete mailing address (include zip)  8. Phone Number(s)  9. Err  TPWR Developer, LLC  1010 Butternut Street, NW, Washington, DC 20012  10. Agent/Contractor for Owner (if applicable)  11. Complete mailing address (include zip)  12. Phone Number(s)  13. Err  The Berg Corporation  2519 Wilkens Ave, Baltimore, MD 21223  3. TYPE 0F PERMIT  14. Check all that apply:	nail pert.fauteux@hines.com Email	
7. Complete mailing address (include zip)  8. Phone Number(s)  9. Err  TPWR Developer, LLC  1010 Butternut Street, NW, Washington, DC 20012  10. Agent/Contractor for Owner (if applicable)  11. Complete mailing address (include zip)  12. Phone Number(s)  13. Err  The Berg Corporation  2519 Wilkens Ave, Baltimore, MD 21223  3. TYPE 0F PERMIT	pert.fauteux@hines.com	
TPWR Developer, LLC  10. Agent/Contractor for Owner (if applicable)  11. Complete mailing address (include zip)  12. Phone Number(s)  13. Enter the Berg Corporation  14. Check all that apply:	pert.fauteux@hines.com	
10. Agent/Contractor for Owner (if applicable)  11. Complete mailing address (include zip)  12. Phone Number(s)  13. En  The Berg Corporation  2519 Wilkens Ave, Baltimore, MD 21223  3. TYPE 0F PERMIT  14. Check all that apply:	mail	
The Berg Corporation 2519 Wilkens Ave, Baltimore, MD 21223 443-752-6883 rwo 3. TYPE 0F PERMIT		
3. TYPE OF PERMIT  14. Check all that apply:	oods@bergdemo.com	
14. Check all that apply:		
14. Check all that apply:	UNIVERSITY OF STREET	
4. DESCRIPTION OF BUILDING	Number of Stories of Didg:	
	Number of Stories of Bldg:	
2-Story office building 2		
17. Use(s) of Property (specifically indicate if any use is residential.)  18. Materials of Building (brick, wood, etc.)	c.)	
Vacant Medical Office Buildings Brick, woods and conc	rete	
19. Bldg Length (ft)         20. Bldg Width (ft)         21. Bldg Height (ft)         22. Bldg	Volume (cu ft) (L x W x H)	
170 60 22 224,4	224,400	
OFFICIAL USE ONLY		

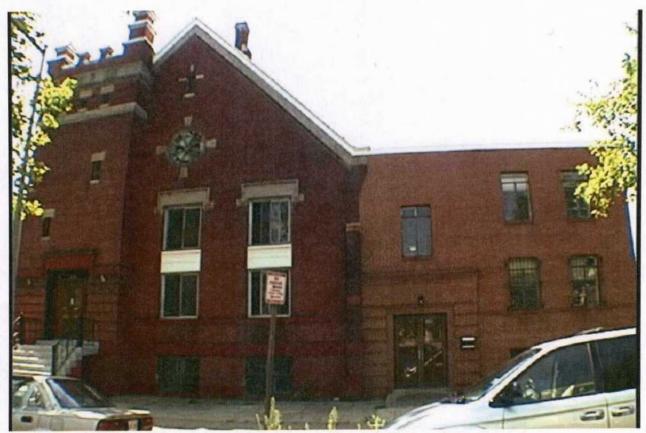
23. Raze Contractor's Name		-	CTION A. RAZE PERMIT ctor's Address (including zip code	e) 25.	Contractor's Phone		
The Berg Corporation		2519 Wilk	ens Ave, Baltimore, MD 212	23 443	443-752-6883		
26. Historic District?	☐ Yes	s × No	33. Raze Contractor Signature				
27. CFA?	☐ Ye	s× No					
28. Raze Entire Building?	XYes	s No	34. Property Owner Signature				
29. Building Condemned?	□Yes	s × No					
30a. Party Wall?	Yes	s × 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				
					t show how the party wall(s) will be protected.		
31. Building Vacant?	x Yes ☐ No		Building must be vacant before Raze Permit issuance.				
32. Public Space Vault?	ПYes	s x No	Official Use Only				
			Fee	Ву	Date		
33, Plumber's Name		34. Plumb	er's License Number	35. F	Raze Method (ball, bulldozer, by hand, etc.)		
Ellis Jones Plumbing &	Heating	PC117	73	Exc	Excavator		
square feet or less in area and not at the Certificate should:  Show the holder of the instance of the include a 30-day advance of the include these amounts of the State that the insurance of t	surance as: D notice cance insurance co overs "Razinç	e story, wholly eputy Directo Illation clause verage: Bodil g Operations	y detached from any other build or, Permit Division, 1100 4th St St. y Injury, \$100,000; Aggregate, S	ing on the sa SW, Washing 300,000; an e scope of th	gton, DC 20024 d Property Damage, \$100,000. ne insurance is for blanket coverage.		
36. Insurance Company		37 Polic	y or Certificate No.		address of raze operation)		
nsurance, Inc.	,	DAN1000					
39. Asbestos in Building?  f yes, indicate location:	□Yes				I Use Only		
			Fee	Ву	Date		











3104 0820 08/09/2004

150 S Street NW



Permit Operations Division 1100 4th Street SW Washington DC 20024 2) 442 - 4589 Fax (202) 442

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

Date: August 28, 2018



Cap Id:

R1800258

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:

39 NEW YORK AVE NE

LOT: 0018 SQUARE: 0671 TYPE: Motor Vehicle Service Station - S-1 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**

Date:	Signature:	
Name of releasing H	PO Official. (print)	



R1800258

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.

105.1.7.1.2, 105.1.7.2, and Section	и 133А.					Appli	cation Date:	08/28/20	018
	SALE.	1. INFORMA	TION	ON PR	ROPI	ERTY		who has	
1. Address of Proposed Work				2. Quad	3. V	Vard	4a. Square	4b. Suffix	5. Lot
39-4. New York Avenue				NE	Six		0671		0018-
25.2000年3月22日本	E TABLE	2. APPLICA	ANT I	NFORM	TAN	ION			
6. Property Owner	Complete mailing address (include zip)     8. Phone Number(s)		one Number(s)	9. Email					
UIP NY Ave Invest LLC		140 Q ST NE STE 140	OB			202-393-7200		dcpermits	@casengineering.com
10. Agent/Contractor for Owner (if ap	plicable)	11. Complete mailing ac	ddress (	include :	zip)	12. P	hone Number(s)	13. Email	
David C. Landsman, CAS Engineering-	DC, LLC	1001 Conn Ave, NW,	, #401,	20036		202-	393-7200	dcpermits	@casengineering.com
	n System	3. TYP	PE OF	PERM	IT	0.45	M. S. M. S. K. S.		
14. Check all that apply:	D		Marie Control of the			OUT WE			and the second second
⊠ Ra	aze Pern	nit							
	16	4. DESCRIP	A STATE OF THE PARTY OF THE PAR		JILD	ING			
15. Description of Building to be Raze			ly dwelli	ng)	_				er of Stories of Bldg:
2-story auto-repair shop and as	sociated	appurtenances					2		
17. Use(s) of Property (specifically in	dicate if ar	ny use is residential.)		1	8. Ma	aterials	of Building (brick	(, wood, etc.)	
Commercial				В	lrick	and C	oncrete Block		
19. Bldg Length (ft)	20. Bldg	Width (ft)		21. Bldg Height (ft)				22. Bldg Volume (cu ft) (L x W x H)	
<del>1893</del> 91.5	764 3	35.75		90 30				405,401 98, 133,75	
NEW THE SECTION AND ADDRESS.		OFFIC	IAL U	SE ON	LY				Mark Park

		SE	CTION A. RAZE PERMIT				
23. Raze Contractor's Name		24. Contrac	ctor's Address (including zip code	25. (	25. Contractor's Phone		
TBD		TBD	TBD				
26. Historic District?	Yes	×No	33. Raze Contractor Sign	Contractor Signature			
27. CFA?	□Yes	× No	TBD	787			
28. Raze Entire Building?		□No	34. Property Owner Signature				
29. Building Condemned?	□Yes	×No	Meghan Leahy				
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	X No	Official Use Only				
			Fee	Ву	Date		
33. Plumber's Name		34. Plumb	er's License Number	35. R	Raze Method (ball, bulldozer, by hand, etc.)		
TBD		TBD		Bulle	dozer/Excavator		
square feet or less in area and not 2. The Certificate should:  Show the holder of the include a 30-day advance Include these amounts of State that the insurance of	surance as: De e notice cance insurance cov covers "Razing	eputy Director llation clause verage: Bodi Operations	by detached from any other build or, Permit Division, 1100 4th St Se. ly Injury, \$100,000; Aggregate, S	SW, Washing	gton, DC 20024		
	openio addic	, or only, ord	to trial, making operations at _	(a	address of raze operation)		
36. Insurance Company		37. Polic	cy or Certificate No.	38.	Expiration Date		
TBD TBD				TBD			
39. Asbestos in Building? If yes, indicate location:	□Yes	□ No		Officia	l Use Only		
			Fee	Ву	Date		
					A STATE OF THE STA		



0671 0018 08/22/2004

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

August 28, 2018



Cap Id:

R1800259

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:

41 NEW YORK AVE NE

LOT: 0801 SQUARE: 0671 TYPE: Motor Vehicle Service Station - S-1

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

Date:	Signature:	
Name of releasing	HPO Official. (print)	



R1800259

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.

		Application Date	e: 8 28 2018	3
	1. INFORM	MATION ON PROPERTY		
. Address of Proposed Work		2. Quad 3. Ward 4a. Squ	are 4b. Suffix 5. L	ot
11 New York	t Aue,	NE 6 6	1 80	10
		CANT INFORMATION		
Property Owner	7. Complete mailing			
UIP NY AU	e Investille / 140	65+, NE 202-395	1200 depermitsec	asengi
0. Agent/Contractor for Owne	ber(s) 13. Email			
David Lundona		2026 202 \$451 202-343.	7200 depermits@c	casena
CAS Engine			1200	
4. Check all that apply:	3. Т	YPE OF PERMIT		
	Raze Permit			
	4. DESCR	RIPTION OF BUILDING		
5. Description of Building to	be Razed (e.g., two story brick single fa	mily dwelling)	16. Existing Number of Storie	es of Bldg:
2- Story Auto.	Repair Shop & Asso	x. Apurtenances	12	
	ically indicate if any use is residential.)	18. Materials of Buildin	g (brick, wood, etc.)	4 A
Commission	1		HILLIAN DAY OF THE PARTY OF THE	
Commercia	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L	x W x H)
9. Bldg Length (ft)			0811171	
	3<76	フカ		
9. Bldg Length (ft)	35.75	ICIAL USE ONLY	98,115.75	

		SE	CTION A. RAZE PERMIT				
23. Raze Contractor's Name		24. Contra	ctor's Address (including zip cod	or's Address (including zip code) 25. Contrac			
TBD	183	TBD	ТВО				
26. Historic District?	Yes	I No	33. Raze Contractor Sig	33. Raze Contractor Signature			
27. CFA?	□Yes	ĭ No	78D	780			
28. Raze Entire Building?		No	34. Property Owner Signature				
29. Building Condemned?	□Yes	No	Meghan Le	aky			
30a. Party Wall?	☐Yes ☒ No		Notification Form w	er(s) will need to sign the is during construction ilding(s) involving party walls must be the party wall(s) will be protected.			
31. Building Vacant?		No	Building must be vacant before Raze Permit issuance.				
32. Public Space Vault?	ПУея	▼ No	Official Use Only				
			Fee	Ву	Date		
33. Plumber's Name		34. Plumb	er's License Number	35. Raze	Method (ball, bulldozer, by hand, etc.)		
TBD		TBD		Bulldoz	Bulldozer/Excavator		
square feet or less in area and not	urance as: Do notice cance insurance cov overs "Razing	e story, wholl eputy Directo llation clause verage: Bodi Operations	ly detached from any other build or, Permit Division, 1100 4th St e. ly Injury, \$100,000; Aggregate,	SW, Washington, \$300,000; and Price scope of the ins	DC 20024		
36. Insurance Company		37. Polic	cy or Certificate No.	A CANAGE STREET	iration Date		
TBD		TBD		TBD			
39. Asbestos in Building? If yes, indicate location:	Yes	No	NP - 1	Official Us	se Only		
			Fee	Ву	Date		



0671 0018 08/22/2004

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.



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: August 21, 2018



Cap Id:

R1800254

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:

4635 NANNIE HELEN BURROUGHS AVE NE

LOT. 0073 SQUARE: 5147 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

Date:	Signature:	
Name of releasing h	IPO Official. (print)	



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

Applicable code sections are in the 2013 DCMR 12 Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1, 105.1.7.1, 105.1.7.1, 2, 105.1.7.2, and Section 155A.

R18	00250	1		Applic	cation Date:	8/21	18			
1. Address of Proposed Work	N. P. S.	1. INFORMATIO		PERTY . Ward	4a. Square	4b. Si	uffix	5. Lot		
4635 NANNIE	HELEN BUREOUS	SHS AVE. NE	NE	7	5147			0073		
		2. APPLICANT	INFORMA	TION		M(6)Y				
6. Property Owner	7. Co	omplete mailing address	s (include zip)	10000	ne Number(s		Email			
4635 NHB DEVE		6 PINEY BRANCH WER SPEING, N			286 13	537	ipesha@ (	CIHAZOARCIUS.		
10. Agent/Contractor for Owner	er (if applicable) 11. C	Complete mailing address		0. 1025-250000	one Number(	s) 13.	Email			
CIH Mones	14 Mones #18802 SAZING, MD 2043 240 286 1337 607844QCMPROPEGI									
		3. TYPE (	OF PERMIT				of Cale			
14. Check all that apply:	Raze Permit		Syan ve							
		4. DESCRIPTION	ON OF BUI	DING						
15. Description of Building to	be Razed (e.g., two sto	ry brick single family dw	velling)			16. Existin	g Number o	of Stories of Bldg:		
TWO STORY DETAM	CHED SINGLE	FAMILY		Thu.		2	-			
17. Use(s) of Property (specif	ically indicate if any use	is residential.)	18.	Materials	of Building (br	rick, wood,	etc.)			
	residentia	I and comme	reial	D OCH						
19. Bldg Length (ft)	20. Bldg Widt	20. Bldg Width (ft) 21. Bldg Height (ft)					22. Bldg Volume (cu ft) (L x W			
35.41	2	2.61		24	1					
PER CONTRACTOR	THE REAL PROPERTY.	OFFICIAL	USE ONL	Y						
CONDITIONS/ COMMENTS:										

		SEC	TION A. RAZE P	ERMIT					
23. Raze Contractor's Name 24			24. Contractor's Address (including zip code)			25. Contractor's Phone			
CIH Homes, LC	SILVER SPANG, MD 20903 301 445 500 =								
26. Historic District?		s No 33. Raze Contractor Signatu							
27. CFA?		s No		Valle					
28. Raze Entire Building?   ☐ Yes		s 🗆 No	34. Property Ov	34. Property Owner Signature					
		s No	yell						
		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						
31. Building Vacant?	⊠Ye.	s ☐ No	-	-	lan that show how the party wall(s) will be protected.				
32. Public Space Vault?		s No Fee		В	Official Use Or	se Only Date			
33. Plumber's Name	34. Plumber's License Number			35. Raze Method	d (ball, bulldozer, by hand, etc.				
. You must submit a Certificate of Insi square feet or less in area and not in . The Certificate should:  Show the holder of the insinclude a 30-day advance Include these amounts of inside that the insurance of the insurance is for one in .	urance as: D notice cance insurance co overs "Razing	e story, wholly eputy Director, llation clause. verage: Bodily of Operations in	Permit Division, 110 Injury, \$100,000; Agg the District of Colum	her building or 0 4th St SW, V gregate, \$300,0 bia," if the sco	n the same or adjoing vashington, DC 2000; and Property In period of the insurance of the i	ning premises. 024 Damage, \$100,000.			
36. Insurance Company	37. Policy or Certificate No.			38. Expiration Date					
THE HARFORD MUTUAL INSURANCE		1-	17688		10/01/2018				
39. Asbestos in Building? If yes, indicate location:	₩Yes			0	fficial Use Onl				
- PIPE INSULATION - 2ND FLOOR FLOORIN	<i>ن</i>		Fee	Ву		Date			



5147 0073 08/01/2004

4635 Nannie Helen Burroughs Avenue NE



5328 0026 10/04/2004

5040 A Street SE

## Government of the District of Columbia





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

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

Date: September 04, 2018



Cap Id:

R1800260

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:

2200 MINNESOTA AVE SE

LOT: 0822 SQUARE: 5561 TYPE:

VACANT: Yes

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

#### CLEARANCE

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

Date: 917 W Signature

Name of releasing HPO Official. (print)

Maloner

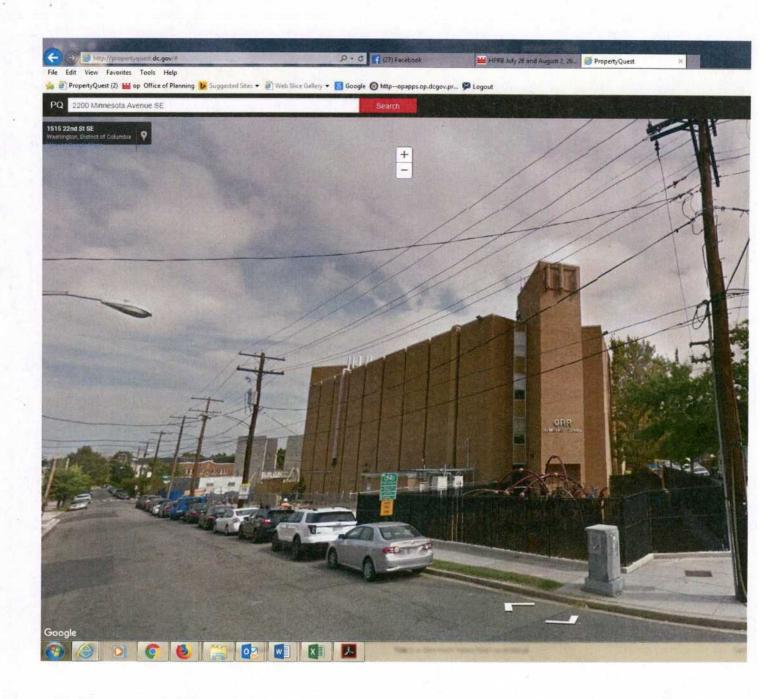


Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any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

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: INFORMATION ON PROPERTY 1. Address of Proposed Work 2. Quad 3. Ward 4a. Square 4b. Suffix 5. Lot Minnesota Are SE NW One 6 2. APPLICANT INFORMATION 7. Complete mailing address (include zip) 8. Phone Number(s) 9. Email 6. Property Owner Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 13. Email dixonelifford egmail com 202-705-1453 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: DGS Drr 17. Use(s) of Property (specifically indicate if any use is residential.) 18. Materials of Building (brick, wood, etc.) 20. Bldg Width (ft) 21. Bldg Height (ft) 22. Bldg Volume (cu ft) (L x W x H) 19. Bldg Length (ft) OFFICIAL USE ONLY CONDITIONS/ COMMENTS:

		SE	CTION A. RAZE PERMIT					
11-12-2-13-2-13-2-13-2-13-2-13-2-13-2-1			ctor's Address (including zip code	25. Conti	25. Contractor's Phone			
			rille MD 20856 301-573-7495					
26. Historic District? ☐Yes ☑No		No	33. Raze Contractor Signature					
27. CFA?		s No						
28. Raze Entire Building?		No	34. Property Owner Signa	iture				
29. Building Condemned?		S No						
30a. Party Wall?		No	Notification Form wh	30b. If yes, adjacent property owner(s) will need to sign the Notification Form which safeguards during construction				
		5		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 b	efore Raze Perm	it issuance.			
32. Public Space Vault?	□Yes	No No		Official Use Only				
		/~	Fee	Ву	Date			
<ul> <li>Include a 30-day advance</li> <li>Include these amounts of</li> </ul>	surance as: Do notice cance insurance cov	e story, whollow eputy Director llation clause verage: Bodil	y detached from any other building, Permit Division, 1100 4th St S	mg on the same of W, Washington, 1300,000; and Pro	DC 20024  pperty Damage, \$100,000.			
			e that, "Razing Operations at					
			0 different N		(address of raze operation)			
			cy or Certificate No.	38. Expi	Expiration Date			
TRD								
39. Asbestos in Building? If yes, indicate location:	□Yes	No		Official Us	e Only			
			Fee	Ву	Date			

Aug 22, 2018



2200 Minnesota Avenue SE

SCHOOL NAME	THUMBNAIL IMAGE	SSL	ADDRESS	WARD	OWNERSHIP	YEAR(S) BUILT	LANDMARK / HISTORIC DISTRICT	PRESERVATION CONSIDERATIONS
ORR ES		5561 0822	2200 MINNESOTA AVE SE	8	DC	c. 1970		NOT ELIGIBLE
OYSTER ES		1808 0801	2801 CALVERT ST NW	3	DC	2001		NOT ELIGIBLE
PARK VIEW ES / BRUCE MONROE		3033 0830	3570 WARDER ST NW	1	DC	1916	HL	LANDMARK BUILDING
PATTERSON, WALTER B. ES		6214 0039	4310 SOUTH CAPITOL ST SW	8	DC	c. 2005		NOT ELIGIBLE
PAYNE ES		1061 0820	305 15 <sup>TH</sup> STREET SE / 1445 C ST SE	6	DC	1951-1967		NOT ELIGIBLE / 1896 SCHOOL BURNED; NEW SCHOOL c. 1951; FLOOR ADDED c. 1957; NEW WING c. 1967; ADDITIONAL ALTERATIONS c. 2014
PEABODY ELEMENTARY SCHOOL	#0# • # • B B B	3757 0802	425 C ST NE	6	DC	1879-80	HL / CAPITOL HILL HD	LANDMARK BUILDING / CONTRIBUTING TO HISTORIC DISTRICT