STATUS DATE	ID	Address	Description of Work	DCRA Notice Date	ANC Expiration Date	PER SUB TYPE	SSL		ANC	Zoni ng	Applicant	Owner Name
7/12/2018	R1800227	1418 MERIDIAN PL NW, WASHINGTON, DC 20010	TWO STORY BRICK SFD	August 14, 2018	September 27, 2018		2678	0017	1A	MU-4	BYRD	WILLIAM EASTON
7/26/2018	R1800240	3305 18TH ST NW, WASHINGTON, DC 20010	TO RAZE A SINGLE STRUCTURE WITH A PARTY WALL USED FOR TWO CARS ONE FOR 3305 AND ONE FOR 3307 18TH STREET NW	August 14, 2018	September 27, 2018	Raze	2613	0034	1D	RF-1	CUMMINGS	CLAUDIA E SCHLOSBERG
8/3/2018	R1800245	3601 14TH ST NW, WASHINGTON, DC 20010	RAZE A TWO STORY SFD	August 14, 2018	September 27, 2018	Raze	2827	0083	1A	MU-4	ROSE	RICARDO GALBIS
7/31/2018	R1800243	2100 PENNSYLVANIA AVE NW, WASHINGTON, DC 20037	Eight-Story Office Building	August 14, 2018	September 27, 2018	Raze	0075	0050	2A	MU-9	N/A	BXP 2100 PENN LLC
7/17/2018	R1800228	4620 Cathedral Avenue NW, Washington, DC	two story dwelling	August 14, 2018	September 27, 2018	Raze	1524	0004	3D	R-14	CAS Engineering	Christopher Taleghani Trustee
7/31/2018	R1800244	2400 FOXHALL RD NW, WASHINGTON, DC 20007	2.5 story brick and frame dwelling	August 14, 2018	September 27, 2018	Raze	1382	0845	3D	R-1-A		BARBARA LANAHAN MAURO, TRUSTEE
8/13/2018	R1800249	3900 WISCONSIN AVE NW, WASHINGTON, DC 20016	three story parking garage	August 14, 2018	September 27, 2018	Raze	1823	0801	3C	MU-5	DFM	NASH-ROADSIDE 3900 WISCONSIN
8/7/2018	R1800248	1210 HOLLY ST NW, WASHINGTON, DC 20012	RAZE A GARAGE	August 14, 2018	September 27, 2018	Raze	2955	0033	4A	R-1-B	ROSE	MELVIN LIPSCOMB JR
7/23/2018	R1800233	4111 KANSAS AVE NW, WASHINGTON, DC 20011	brick/block warehouse	August 14, 2018	September 27, 2018	Raze	2910	0039	4C	MU-4		WILLIAM J DEOUDES
8/2/2018	R1700212	150 S Street NW, Washington, DC 20001	3 story brick church	August 14, 2018	September 27, 2018	Raze	3104	0820	5E	RF-1	Alfred Roberts	150 S Street LLC
7/31/2018	R1800242	1265 HAMLIN ST NE, WASHINGTON, DC 20017	RAZE A TWO STORY FRAMED BUILDING	August 14, 2018	September 27, 2018	Raze	3934	0833	5B	R-1-B	MATZIE	STEPHEN MATZIE
7/27/2018	R1800241	1603 Isherwood Street NE, Washington, DC	Raze remaining front wall of burned out rowhouse	August 14, 2018	September 27, 2018	Raze	4545	1603	6A	RF-1	J. Truitt	Abundant Construction Group LLC
7/11/2018	R1800225		Reapplication of R1500176 due to lapse. Raze a two story warehouse.	August 14, 2018	September 27, 2018	Raze	0772	0024	6C	PDR-1	PHIL	M STREET DEVELOPMENT GROUP
7/23/2018	R1800230	55 Q ST SW, WASHINGTON, DC 20024	RAZE A TWO S TORY TOWNHOUSE	August 14, 2018	September 27, 2018	Raze	0656 0	0036	6D	CG-4		55 Q ST SW LLC
7/23/2018	R1800231	57 Q ST SW, WASHINGTON, DC 20024	RAZE A TWO S TORY TOWNHOUSE	August 14, 2018	September 27, 2018	Raze	0656 0	0037	6D	CG-4		57 Q ST SW LLC
7/23/2018	R1800232	59 Q ST SW, WASHINGTON, DC 20024	RAZE A TWO S TORY TOWNHOUSE	August 14, 2018	September 27, 2018	Raze	0656 0	0038	6D	CG-4		59 Q ST SW LLC
7/23/2018	R1800234	61 Q ST SW, WASHINGTON, DC 20024	RAZE A TWO S TORY TOWNHOUSE	August 14, 2018	September 27, 2018	Raze	0656	0039	6D	CG-4		61 Q ST SW LLC
7/24/2018	R1800235	63 Q ST SW, WASHINGTON, DC 20024	RAZE A TWO STORY BRICK BUILDING	August 14, 2018	September 27, 2018	Raze	0656	0040	6D	CG-4		63 Q ST SW LLC
7/24/2018	R1800236	65 Q ST SW, WASHINGTON, DC 20024	RAZE A TWO STORY BRICK BUILDING	August 14, 2018	September 27, 2018	Raze	0656	0041	6D	CG-4		65 Q ST SW LLC
7/24/2018	R1800237	67 Q ST SW, WASHINGTON, DC 20024	RAZE A TWO S TORY TOWNHOUSE	August 14, 2018	September 27, 2018	Raze	0656 0	0042	6D	CG-4		67 Q ST SW LLC
7/24/2018	R1800237	69 Q ST SW, WASHINGTON, DC 20024	RAZE A TWO S TORY Frame Rowhouse	August 14, 2018	September 27, 2018	Raze	0656	0043	6D	CG-4		Q ST SW LLC
7/23/2018	R1800229	1535 HALF ST SW, WASHINGTON, DC 20024	RAZE A TWO STORY BRICK BUILDING	August 14, 2018	September 27, 2018	Raze	0656	0035		CG-4		1535 HALF STREET SW LLC
8/7/2018	R1800246	1900 MASSACHUSETTS AVE SE, WASHINGTON, DC 20003	RAZE A THREE STORY BRICK HOSPITAL WITH CRAWL SPACE AND PENTHOUSES BUILDING -29	August 14, 2018	September 27, 2018	Raze	1112E	0001	7F	HE-1	LEE	DISTRICT OF COLUMBIA

Γ	8/13/2018		5127 NANNIE HELEN	TWO STORY BRICK BUILDING	August 14, 2018	September 27, 2018	Raze	5196 0805	7C	MU-3	DFM	WASHINGTON METROPOLITAN
L			BURROUGHS AVE NE,									COMMUNITY DEVELOPMENT
Г	7/24/2018	R1800239	4656 LIVINGSTON RD SE,	RAZE 1-STORY COMMERCIAL BRICK	August 14, 2018	September 27, 2018	Raze	6242 0023	8D	MU-7	KIM MITCHELL;	YLC INC
L			WASHINGTON, DC 20032	BUILDING							YLC INC	



2678 0017 08/16/2004

1418 Meridian Place NW

# 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 - 4689 Fax (202) 442 - 4862 TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

Date:

July 26, 2018



Cap Id:

R1800240

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:

3305 18TH ST NW

LOT: 0034 SQUARE: 2613 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:

Name of releasing HPO Official, (print)

Tim Denna



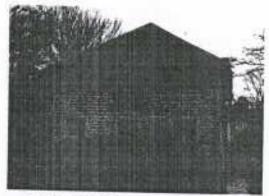
Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in Ink. Please provide detailed information. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered 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 1554

R1800 2	40				Арр	dication Date	July	25, 2018	
Address of Proposed Work		1. INFORMA			OPERT 3. Ward	CONTRACTOR OF THE PERSONS IN			
3305/3307 18th Street, NW				W	One	4s. Squs 2613/2		4b. Suffix	5. Let 0034/0035
		2. APPLICA	ANTIN	FORN	ATTON		1	A ST WHICK	A STATE OF
6. Property Owner		7. Complete mailing add	dress (inc	lude zi	p) 8.P	hone Numbe	r(s)	9. Email	
Claudia Schlosberg/Michae	Oumming	3305 18th Street, N.V	W., Wasi	ningto	n, 202	-486-0822	/202-60	daudiasc	hlosberg@gmail.
10. Agent/Contractor for Owner (i	f applicable)	11. Complete mailing ad	ddress (in	clude z	ip) 12 i	hone Numb	et(s)	13 Email	
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23 Raze Contractor's Name			CTION A. RAZE PER ctor's Address (including zi		25. Contractor's	Dhoma
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28. Raze Entire Building?	1	s 🗆 No	34 Propperty Owner	Signature	1010	7
29 Building Condemned?		s No	11/1/1/1	11111	4 /91	.10.
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31. Building Vacant?	⊠Y€	s 🔲 No	Building must be va			
32. Public Space Vault?	□Ye	s⊠No	Fee		fficial Use On	
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# Existing Structure (1)



C SOUTH ELEVATION



D WEST ELEVATION -#330



SOUTH-EAST ELEVATION



8 WEST ELEVATION - #3305

HISTORIC PRESERVATION REVIEW BOARD - CONCEPT REVIEW CARRIAGE HOUSE 3305+3307 18TH ST. NW From: DC Government disdocs@dc-gov P Subject: HPRB ACTIONS - June 28, 2018

Date: July 9, 2018 at 4:25 PM
Te: claushaschlasberg = gmail.com

Having trouble viewing this small? You it as a Web page

C SHARE

Greetings: This document and others related to the Historic Preservation Review Board (HPRB) meeting of June 28 are posted on the website at. https://pianning.dc.gov/node/1337101

Video of the hearing is also posted on the website at: https://planning.dc.gov/mode/905322

Historic Preservation Review Board ACTIONS

June 28: 2018

Present: Marrique Heath (Chair), Andrew Aurbach, Thomas Brokaw, Brian Crane, Linda Greene, Cuterbridge Horsey, Sandra Jowers-Barber, Chris Landis, Absent, Gretchen Pfaehler.

AGENDA

PRELIMINARY ITEMS

Status Update: Proposed Bloomingdale Historic District.

Design guideline: "Door Repair and Replacement for Historic Property".

The Board voted to adopt the guideline as reflective of their policies on door repair and replacement, 8-0.

Design guideline: "Emerald Street Historic District"

The Board voted to adopt the guideline as reflective of their policies for the treatment of properties in the Emerald Street Historic District, 8-0.

MOUNT PLEASANT HISTORIC DISTRICT

1627 Monroe Street NW, HPA 18-314, permit/enlarge first floor window opening.

The Board acknowledged the ANC resolution and stated that the proposal would be evaluated the same as if the work were proposed and had not already been done. The Board has published design guidelinus that state that expanding or adding openings to most building facades is typically incompatible. The Board reaffirmed that the subject property is contributing and should be respected for its own design and as part of a consistent row. The Board found that the alteration is incompatible with the character of this house, its consistently funestrated row, and with the historic district in general and, thus, is contrary to the purposes of the preservation law. Vote: 7-1 (Candis against)

3305-3307 18th Street NW, HPA 17-659, concept/raze carriage house and build similar but larger garage.

The Board recommended that the building could be razed because it no longer contributes to the character of the Mount Pleasant Historic District due to a loss of historic integrity. The Board also approved the concept of the replacement building and delegated further review to staff, recommending that the design be simplified, particularly by a reduction in the number of dormers. Vote: 7-1 (Horsey against).

WALTER REED HISTORIO DISTRICT

6900 Georgia Avenue; NW, HPA 18-306, permit/raze Building 38, and HPA 18-368, concept/extension, widening and realignment of Dahša and 12th Streets.

The Board found that clearance of a permit application to raze Building 38 is inconsistent with the purposes of the preservation law, because its demolition would not retain, enhance or adapt this contributing building. Vote. 8-0.

The Board approved the concept for the road construction in this location, with the following conditions: (1) that Building 36 not be razed unless approved by the Mayor's Agent as necessary in the public interest, as the demolition of a contributing building would fail to retain and enhance the building, or be compatible with the character of the historic district or consistent with the purposes of the preservation law, and (2) that the road-improvement project later be further developed and reviewed by the Board, particularly as it relates to the proposed finished grades and their relationships to historic buildings and adjacent and contributing landscapes, both in this immediate vicinity and as planned elsewhere. Vote: 8-0.

CAPITOL HILL HISTORIC DISTRICT

637 E Street NE, HPA 18-432, concept/basement areaway and walkway.

The Board agreed with the comments made by the ANC and voted to find the concept to be incompatible with the historic district. Vote 5-2

212 A Street NE. HPA 18-426, concept/demolition of existing garage; new construction of rear addition and carriage house.

The Board approved the concept as consistent with the purposes of the preservation act and delegated final approval to staff. Voto: 7-0.

526 8th Street SE, HPA 18-433, concept/construction of three-story structure.

The Board approved the concept for new construction and subdivision as consistent with the purposes of the preservation act and delegated final approval to staff. Vote: 7-9.

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### 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 03, 2018



Cap ld:

R1800245

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:

3601 14TH ST NW

LOT: 0083 SQUARE: 2827 TYPE:

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

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

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



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

11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email  Ligh Mebrahtu 1803 2nd St NW 571-299-7065 Include Emailing address (include zip) 12. Phone Number(s) 13. Email  3. TYPE OF PERMIT  4. Check all that apply:  4. Check all that apply:  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 Bid 2 exteries  7. Use(s) of Property (specifically indicate if any use is residential.) 18. Materials of Building (brick, wood, etc.)  Residential  9. Bidg Length (ft) 20. Bidg Width (ft) 21. Bidg Height (ft) 22. Bidg Volume (cu ft) (L x W x	Address of Proposed Work  3 60   14th St N.W   NW   One   2827   46. Suffix   5. Lot    2 60   14th St N.W   NW   One   2827   48. Suffix   5. Lot    2 8 3   28 4	R1800	245			Appl	lication Date:	08-01-2	018
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2827 0083 08/17/2004

3601 14th Street NW



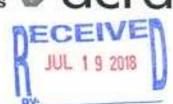
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2100 Pennsylvania Avenue NW



# 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:

July 17, 2018

Cap ld:

R1800228

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:

4620 CATHEDRAL AVE NW

LOT: 0004 SQUARE: 1524 TYPE:

VACANT: Yes

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

#### CLEARANCE

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

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



### APPLICATION 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 Hullding 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

						Applic	Lation Date:		
	THE OWNER OF THE PERSON NAMED IN	1 INFORM	OTTAN		-		WITE COLON	CHARLE	MATERIAL COL
Address of Proposed Work			_	2 Quad	3. W	/ard	4a Square	4b. Suffix	f. Lot
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Christopher K Talegha	ani Trustee	4620 Cathedral A	ve, NV	, WDC2	3000	202	393-7200	ulcparmitsi	Scawing/neering com
10. Agent/Contractor for Owner	r (if applicable)	11 Complete malky	g addres	a (notade	2(0)	12. P	hone Number(s)	13 Emp#	
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14 Check all that apply	Raze Pen		1000	AMELINA					
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CONDITIONE/ COMMENTS:									

The state of the s		SEC	TION A. RAZE PER	III	TON ES	THE NEXT PROPERTY.
23 Raza Contractor's Name		24 Contract	ors Address (including zi	p cndet	25 Contractor	s Phone
TBD		TBO			TBO	
26 Historic District?	□Yes	₽No	11 Raze Contracto	or Signature	Al-	
27 CFA?	□Yes	E No	TISO			
26 Raze Entire Building?	■Yes	□No	34. Ezoperty Owner	Squatery.		
29 Building Cardemned?	□Yes	≥ No	(h)	201	1	
30a Party Wall?	□Yes	⊠ No	Notification For 30c. Any raze per	m which s mit applicati	afeguards du on for a building	will need to sign the ring construction (s) involving party walls must be any wall(s) will be protected
31 Building Vacant?		□No:	Building must be v	acant before	Raze Permit lan	uance
32 Public Space Vault?	□Yes	⊠ No	Fee	B	Official Use 0	Only
		T				vod (ball, buildozer, by hand, etc.)
33 Plumber's Name		Production	er's License Number			the state of the s
TBD		TBD			Bulldazer/Ex	scavator
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36. Insurance Company		37 Polis	cy or Certificate No.		38 Expirati	
TBD		TBD			TRO	
39. Asbestos in Building? If yes, indicate location.	Yes	□ No	MARK	C	official Use C	Only
			Fee	By		Date



1524 0004 07/28/2004

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.



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

July 31, 2018



Cap Id.

R1800244

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

2400 FOXHALL RD NW

LOT: 0845 SQUARE: 1382 TYPE Single Family Dwelling - R-3

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

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 2013 DCMR 12 Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1.

65.1.7.1.2, 105.1.7.2, and Sec	tion 155A				As	ophication Date:	7	1/31/	2018
Address of Proposed Work	1 -400	1, INFOR	MATION	ON PR	OPER	Y		4b Suffix	5 Lot
2400 Foxhall Road				NW	Three	1382			0845
6. Property Charter	91074 B	2, APPI	LICANT			Prone Number	r(e)	9 Email	000
Bret and Amy Baier		2400 Foxhall Ho				02-393-7200		digaments.	(grywengimeering co
10. Agent/Contractor for Owner (f	(applicable)	11. Complete mail:	WE CENTRE	Fe 1 (5)		Phone Numb	1000	13 Email	
Davif G. Landman, ISAS Engineer		1001 Conn Ave.	NW #40	, 20036	2	02-393-7200		dopeants	@casergneering o
14. Check all that apply	Raze Pen		TYPE O	FPERM	IT				
15 Description of Building to be	Raced (e.g., h	The second second	CRIPTIO	The same series	JILDIN	G	3		oer of Stones of Ric
2.5 story brick & frame single	e-family det	ached dwelling v	with cellar				2.5		
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CONDITIONS/COMMENTS		OF	FFICIAL	USE ON	ILY				
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3. Raze Contractor's Numbe			TION A. RAZE PERMIT  O's Address (reduling appose)	25. Cart	ractor's Phone
lanks Development Co		4811 St. Eli	mo Ave, Bethesda, MD 20184	202-36	9-9558
6. Historic District?	□Ye:	No.	33 Raze Contractor Signal	ice.	
7 CFA7	□Ye	® No	michael banke		
8. Raze Entire Building?	⊠ Ye	□ No	34 Property Owner Sepus		1
9. Building Condemned?	□Yes	No.	( 1) Drot	7 Suc	7
Oa Party Wali?	□Ye	NO NO	Notification Form white 30c. Any raze permit app	ch safeguard lication for a bu	er(s) will need to sign the is during construction ilding(s) involving party walls must be the party walls) will be protected.
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32. Public Space Vault?	□Ye	No No	Fee	Official L	
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# 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 07, 2018



Cap Id:

R1800248

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:

1210 HOLLY ST NW

LOT: 0033 SQUARE: 2955 TYPE:

VACANT: Yes

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

#### CLEARANCE

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

Date:	Signature:	
Name of releasing H	PO 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 of 1051712, 105172, and RIBOO	Section 155A				Date: 8. 8		
Note the latest the	A CONTROL	1. INFORMA	TION ON PROP	ERTY			
1. Address of Proposed Worl		- 200104	2. Quad 3. \		Square 4b.	Suffix	5. Lot
1210 Hally	HOLLY 3	INW	NW Or	ne			
Property Owner			ANT INFORMAT	SPECIAL STREET	200	<b>1</b>	
		Complete mailing add		8. Phone Nu		. Email	
1210 HOLLYST	CONTRACTOR SECURITION AND ADDRESS OF THE PARTY OF THE PAR	1208 GHG 5		The second of th	Contraction of the last of the		DACKAD
Agent/Contractor for Own	er (if applicable) 11	Complete mailing ac	ddress (include zip)	12. Phone N	umber(s) 1	3. Email	
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Check all that apply:	Raze Permit						
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7. Use(s) of Property (specif				aterials of Build	ling (brick, wood	, etc.)	
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20	20	0	15			600	ONE VARIED CONTRACT
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ONDITIONS/ COMMENTS:							
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23. Raze Contractor's Name		24. Contra	ctor's Address (including zip cod	e) 25. C	ontractor's Phone		
PERDOMO DEL WE	Ecking			5	71-218-9123		
26. Historic District?	□Ye	s (No	33. Raze Contractor Signature  34. Property Owner Signature				
27. CFA?	□Ye	s No					
28. Raze Entire Building?	⊠Ye	s No					
29. Building Condemned?	□Ye	s MNo	1/1/2	1	//-		
30a. Party Wall?	/ Wall? ☐Yes QNo		30b! If yes, adjacent property owner(s) will need to sign the Notification Form which stregguards during construction 30c. Any raze permit application for a building(s) involving party walls must be				
					w the party wall(s) will be protected.		
31. Building Vacant?	MYe	s 🗌 No		Building must be vacant before Raze Permit issuance.			
32. Public Space Vault?	ПҮе	s tarko		Official	Official Use Only		
		7	Fee	By	Date		
33. Plumber's Name		34, Plumb	er's License Number	35. Ra	ze Method (ball, bulldozer, by hand, etc.)		
square feet or less in area and not of the Certificate should:  Show the holder of the interpretation include a 30-day advance of the include these amounts of State that the insurance of	surance as: 0 notice cance insurance co overs "Razin	e story, wholi deputy Directo eflation clause werage: Bodil g Operations	y detached from any other build or, Permit Division, 1100 4th St St b. ly Injury, \$100,000; Aggregate, \$	ing on the same SW, Washingto 300,000; and f a scope of the i	n, DC 20024		
36. Insurance Company		37. Polic	y or Certificate No.	38. Ex	piration Date		
	CAR						
9. Asbestos in Building? f yes, indicate location:	□Yes	K No		Official U	Ise Only		
			Fee	Ву	Date		



https://mail.com/inau/in/fil#inhox/16511187/a5/rife1?mmartor=1A-nessagePetigin0.1

# Warehouse condoproject@gmail-com



# Government of the District of Columbia

# Department of Consumer and Regulatory Affairs Permit Operations Division

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: July 23, 20	18	Cap Id:	R1800233
D.C. Historic Prese			
1100 4th Street S.W. Washington, DC 200	1900		
	ee of premises subject to razing operations		
Re: Request for clearar	ice of premises subject to razing operations		
this date with the Perm	the structure identified below, located in it Operations Division. Our records do no re hereby requesting confirmation from yo	ot reveal any kind	of conservation holds
Address:			
4111 KANSAS AVE	NW		
LOT: 0039 SQUARE:	2910 TYPE Other (Specify)	١	ACANT: Yes
Please notify our offic the clearance section I 4th Street S.W. Wash	e of the satisfactory completion of your in selow and returning this form to the D.C. inston D.C. 20024	nspection of the pr R.A. Permit Opera	remises, by filling out tions Division, 1100
	CLEARANCE		
	hat we researched our records concerning	the structure iden	tified above and we
This is to inform you t have no objections to	proceeding with the proposed razing of sa	id structure.	since above and the



warehousecondoproject@gmail.com

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.

1. Address of Proposed Work		ject@gmail.	com	Арр	ication Date:		
	M XX	1. INFOR	MATION ON	-		The state of	EN HOL
4111 Kansas Ave			NW.	ad 3. Ward	4a Square	4b. Suffix	5. Lot
1111 Natisas Ave			INV	One	2910	1	0039
. Property Owner		APPL     Complete mailing	ICANT INFO	AND REAL PROPERTY AND REAL PROPERTY.	none Number(s)	9. Email	Tro-ty-E-
	c					warehousecondoprojec	
Warehouse Condo Project  O. Agent/Contractor for Owner		1501 11th st NW	Order State of the		297-4177		econdoprojaces.
		11. Complete mailin	331.3/2011/02		hone Number(s)	13. Email	
Warehouse Condo Projec	tLLC	1501 11th st NW 1	Wash DC 2000	1 202-	297-4177	warehous	econdoprojectio
5. Description of Building to b  Existing Indus:  7. Use(s) of Property (specific	trial Wa		amily dwelling)	18. Materials	2 of Building (brick		r of Stories of Bldg:
oada) or richerty (abdoni				Brick Facad	e, Concrete str	ucture	
ndustrial warehouse			Width (ft) 21. Bidg Height (ft)			22. Bldg Volume (cu ft) (L x W x	
ndustrial warehouse	20. Bld	g Width (ft)	21. Bi	dg Height (ft)		22. Bldg Volume	(cu ft) (L x W x H)
	20. Bid		21. Bi			182,280	

		SE	CTION A. RAZE PER	MIT			
23. Raze Contractor's Name		24. Contra	ctor's Address (including z	ip code)	25. Contractor	s Phone	
Lock7 Development LLC		1501 11th	st NW Washington DO	20001	202-670	-1360	
26. Historic District?	□Ye:	No	33. Raze Contractor Signature				
27. CFA?	☐ Yes	No No					
28. Raze Entire Building?	▼Yes	No	34. Property Owne	r Signature			
29. Building Condemned?	□Yes	ĭ No					
30a. Party Wall?	□Yes	⊠ No	30b. If yes, adjacent property owner(s) will need to sign the Notification Form which safeguards during construction 30c. Any raze permit application for a building(s) involving party walls mu- include 2 copies of a plan that show how the party wall(s) will be protected				
31. Building Vacant?	⊠Yes	□ No	Building must be v	acant before	cant before Raze Permit issuance.		
32. Public Space Vault?	□Yes	⊠ No		12.5	Official Use O	nly ( )	
			For	8		Date:	
33. Plumber's Name		34. Plumb	er's License Number		35. Raze Metho	d (ball, buildozer, by hand, etc.)	
Ace Utilities		100510	By Hand				
1. You must submit a Certificate of Institute Square feet or less in area and not a control of the Certificate should:  Show the holder of the Institute a 30-day advance include these amounts of State that the insurance confit the insurance is for one.	curance as: De notice cance insurance cov overs "Razing	story, wholi eputy Directo llation clause verage. Bodil Operations	y detached from any other or, Permit Division, 1100 4 or, y Injury, \$100,000; Aggre in the District of Columbia	th St SW, W gate, \$300.0 ;" if the scop	the same or adjo /ashington, DC 20 000; and Property	oining premises. 2024 Damage, \$100,000.	
	MAZERIA		ALCOHOL: N	18.30		raze operation)	
36. Insurance Company			y or Certificate No.		38. Expiration	n Date	
Harford Mutual		9148230			01/01/2019		
39. Asbestos in Building? If yes, indicate location:	Yes	⊠ No		0	fficial Use On	ly	
			Fee	Ву		Date	

warehousecondoproject@gmail.com



# Department of Consumer and Regulatory Affairs

Permit Operations Division 1100 4th Street SW Washington DC 20024 Fax (202) 442 - 4862

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



August 02, 2018 Date:



Cap Id:

R1700212

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:

150 S ST NW

LOT: 0820 SQUARE: 3104 TYPE:

VACANT: Yes

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

#### CLEARANCE

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

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



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

2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2

Address of Proposed Work	THE RESERVE AND PARTY AND PARTY AND PARTY AND PARTY AND PARTY.	ATION ON P	1055	A LAND SOURCE	8.1.18	
IEA e el al		2. Quad		4a. Square	4b, Suffix	5. Lot
150 S Street		NW	One	3104		0820
	2. APPLI 7. Complete mailing	CANT INFOR		none Number(s)	9. Email	
Property Owner		address (include 2	7	ione manusinaj		
50 S ST LCC Agent/Contractor for Owner (if applic		address (include	zip) 12. F	hone Number(s)	13. Email	
h 0	luze 4ths			6-702-157	Zah Alfart	eterting Commi
Alfred Roberts	11/27	Street JW YPE OF PERI	-111-		The state of	Car Con
. Check all that apply:						MCHI (Continue)
☑ Raz	e Permit					
	A STATE OF PARTY AND ADDRESS O	RIPTION OF B	UILDING			er of Stories of Bid
5. Description of Building to be Razed	(e.g., two story brick single for	amily dwelling)				er of acordes of one
Church being raze	rd				3	
7. Use(s) of Property (specifically indic	cate if any use is residential.)		18. Materia	is of Building (bri	k, wood, etc.)	
Church commercial			bo	de		
	20. Bldg Width (ft)	21. Bld	g Height (ft)		22. Bldg Volum	ne (cu ft) (L x W x f
544	72f4	2	58+		9720	10 (cuft)
	The second secon	ICIAL USE O	NLY			1

23. Raze Contractor's Name 24. Co			Address (including zip code)	THE RESERVE OF THE PERSON NAMED IN	25. Contractor's Phone	
Da Perdomo No	trenal	7664	1 fulleten ed evi	571-214	-9813	
26. Historic District?	□Ye	s PNo	33. Raze Contractor Signature  34. Property Owner Signature  (LL) to A Market (Accepted)			
27. CFA?	□Ye	s No				
8. Raze Entire Building?	P Ye	s □ No				
9. Building Condemned?	□Ye	s TNp				
30a. Party Wall? ☐Yes		S No	No 30b. If yes, adjacent propo		ature is required.	
sentingeral Asserting from	,		30c. Any raze permit application for a building(s) involving party walls must include 2 copies of a plan that show how the party wall(s) will be protected.			
11. Building Vacant?	ØYe	s 🗆 No	Building must be vacant before	ore Raze Permit issuan	ce.	
32. Public Space Vault?	□Ye	s []No	Official Use Onl		y Date	
3. Plumber's Name		34, Plumber's L	Joense Number	35. Raze Method	(ball, buildozer, by hand, etc.)	
				-11		
square feet or less in area and not r The Certificate should:  Show the holder of the ins Include a 30 day advance Include these amounts of	surance as E e notice cario insurance co overs "Razin	e story, wholly det reputy Director, Pe station clause, werage. Bodily Inju g Operations in the	ached from any other building smit Division, 1100 4th St SW ury, \$100,000; Aggregate, \$30 a District of Columbia,* if the s	on the same or adjoin Washington, DC 2000 0,000, and Property Do cope of the Insurance I	ing premises. 24 amage, \$100,000. is for blanket coverage.	
Include a 30 day advance     Include these amounts of     State that the insurance of     If the insurance is for one	surance as E e notice cario insurance co overs "Razin	e story, wholly det eputy Director, Pe station clause, werage. Bodily Inju- g Operations in the ess only, state tha	ached from any other building smit Division, 1100 4th St SW ary, \$100,000; Aggregate, \$30 a District of Columbia," if the s it, "Razing Operations at	on the same or adjoin Washington, DC 200 0,000, and Property Do cope of the insurance i	ing premises. 24 amage, \$100,000. is for blanket coverage. ize operation)	
rquare feet or less in area and not of the Gertificate should:  Show the holder of the instance and advance of the instance of	surance as E e notice cario insurance co overs "Razin	e story, wholly det eputy Director, Pe station clause, werage. Bodily Inju- g Operations in the ess only, state tha	ached from any other building smit Division, 1100 4th St SW ury, \$100,000; Aggregate, \$30 a District of Columbia,* if the s	on the same or adjoin Washington, DC 2000 0,000, and Property Do cope of the Insurance I	ing premises. 24 amage, \$100,000. is for blanket coverage. ize operation)	
square feet or less in area and not of the Certificate should:  Show the holder of the instance and advance include these amounts of State that the insurance of the insurance is for one	surance as E e notice cano insurance ex overs "Razin specific addi	e story, wholly det eputy Director, Pe station clause, werage. Bodily Inju- g Operations in the ess only, state tha	ached from any other building smit Division, 1100 4th St SW ary, \$100,000; Aggregate, \$30 a District of Columbia," if the s it, "Razing Operations at	on the same or adjoin Washington, DC 200 0,000, and Property Do cope of the insurance i	ing premises. 24 amage, \$100,000. is for blanket coverage. ize operation) Date	



3104 0820 08/09/2004

150 S Street NW

# Department of Consumer and Regulatory Affairs

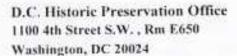
Permit Operations Division 1100 4th Street SW Washington DC 20024

TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

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



R1800242



July 31, 2018

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:

1265 HAMLIN ST NE

LOT 0833 SQUARE: 3934 TYPE

VACANT: Yes

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

#### CLEARANCE

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

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



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

Applicable code sections are in the 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 1554.

1. Address of Proposed Work		1. INFORM		Quad 3.		4s. Square	4b. Suffix	5 Lot
1265 Hamlin Street			N	E FIN	/e	3934	0833	
POS-			CANT IN		A COLUMN TWO IS NOT THE OWNER.			
. Property Owner	00	7. Complete mailing a	address (incl	ude zip)	8. Ph	one Number(s)	9. Email	
Stephen and Bridget Mat		939 5th ST NE Was	shington, I	OC 20002	202-531-5060		smatzle@gmail.com	
Agent/Contractor for Owner	r (If applicable)	11. Complete mailing	address (in	dude zip)	12. P	hone Number(s)	13. Email	
Zach Gasper		929 W.Broad St. St	te 200 Falls	Church,	703 304 1159		zach@gre	enspur.net
		3. T	YPE OF P	ERMIT				
Check all that apply:	Raze Pen			DESCRIPTION OF THE PARTY OF THE				
	Naze Fen	- International Control						
5. Description of Building to b	e Razed (e.g. h	4 DESCR			ING			
story stick framed buildi	-	no actify brick alliglic lar	mily owening	į	-		. Existing Number	of Stones of Bio
Martin Company of the				_		2		
7. Use(s) of Property (specific	sally indicate if a	ny use is residential.)		7	W-DIEL	of Building (brick	wood, etc.)	
ingle Family Residential				Wood	d, bloc	k foundation		
9. Bldg Length (ft)	20. Bld	g Width (ft)	21.	1. Bldg Height (ff)			22. Bldg Volume (cu ft) (L x W x	
8.	16"		25				15,200	
	. 1		CIAL USE		_			

		SECTI	ON A. RAZE PER	MIT			
23. Raze Contractor's Name		24. Contractor	s Address (including z	rip code)	25. Contractor	's Phone	
GreenSpur		929 W.Broad	St Ste200 Falls Chi	urch 22046	703 304 115	9	
26. Historic District?	□Yes	s 🗷 No	33. Raze Contractor Signature				
27, CFA?	☐ Ye	s⊠ No	- In last				
28. Raze Entire Building?		B □ No	101 767				
29. Building Condemned?	□Yes	s 🗵 No					
30a. Party Wall? ☐ Yes ☒ No 31. Building Vacant? ☒ Yes ☐ No		s 🗵 No	Notification Form which safeguards during construction 30c. Any raze permit application for a building(s) involving party walls must include 2 copies of a plan that show how the party wall(s) will be protected.				
		s 🗆 No					
32. Public Space Vault?	ALIGN SECTION AND ADDRESS OF THE PARTY OF TH	DATE SHEET	Official Use Only				
SE Public Space Vault	Public Space Vault? ☐ Yes ☑ No		Fee	Ву		Date	
33, Plumber's Name		34. Plumber's	License Number		35. Raze Meth	od (ball, buildozer, by hand, etc.)	
Michael Sydorko - Crescent Plu	mbing	1015			By Hand and		
You must submit a Certificate of in square feet or less in area and not The Certificate should:  Show the holder of the in Include a 30-day advance	more than one surance as: D e notice cance	e story, wholly de eputy Director, P Hation clause.	stached from any other	er building on	the same or adj	oining premises.	
<ul> <li>Include these amounts o</li> <li>State that the insurance</li> <li>If the insurance is for one</li> </ul>	covers "Razing	Operations in the	ne District of Columbia	a," if the scop	e of the insuran	oe is for blanket coverage.	
State that the insurance     If the insurance is for one	covers "Razing	Operations in the ess only, state the	ne District of Columbia at, "Razing Operation	a," if the scop	e of the insurance (address o	ce is for blanket coverage.  f raze operation)	
State that the insurance     If the insurance is for one 36. Insurance Company	covers "Razing	Operations in the ess only, state the 37. Policy of	ne District of Columbi- lat, "Razing Operation or Certificate No.	a," if the scop	(address of 38. Expiration	ce is for blanket coverage.  f raze operation)	
<ul> <li>State that the insurance</li> </ul>	covers "Razing e specific addre	37. Policy of Q42-245055	ne District of Columbi- lat, "Razing Operation or Certificate No.	s," if the scop	e of the insurance (address o	os is for blanket coverage.  fraze operation) on Date	



3934 0833 06/20/2004

1265 Hamlin Street NE

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



Permit Operations Division 1100 4th Street SW Washington DC 20024

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



Date:

July 27, 2018



Cap Id:

R1800241

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:

Date:

1603 ISHERWOOD ST NE

LOT: 2008 SQUARE: 4545 TYPE:

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

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.

Name of releasing H	PO Official. (print)	

Signature:



Government of the District of Columbia Certify Trees

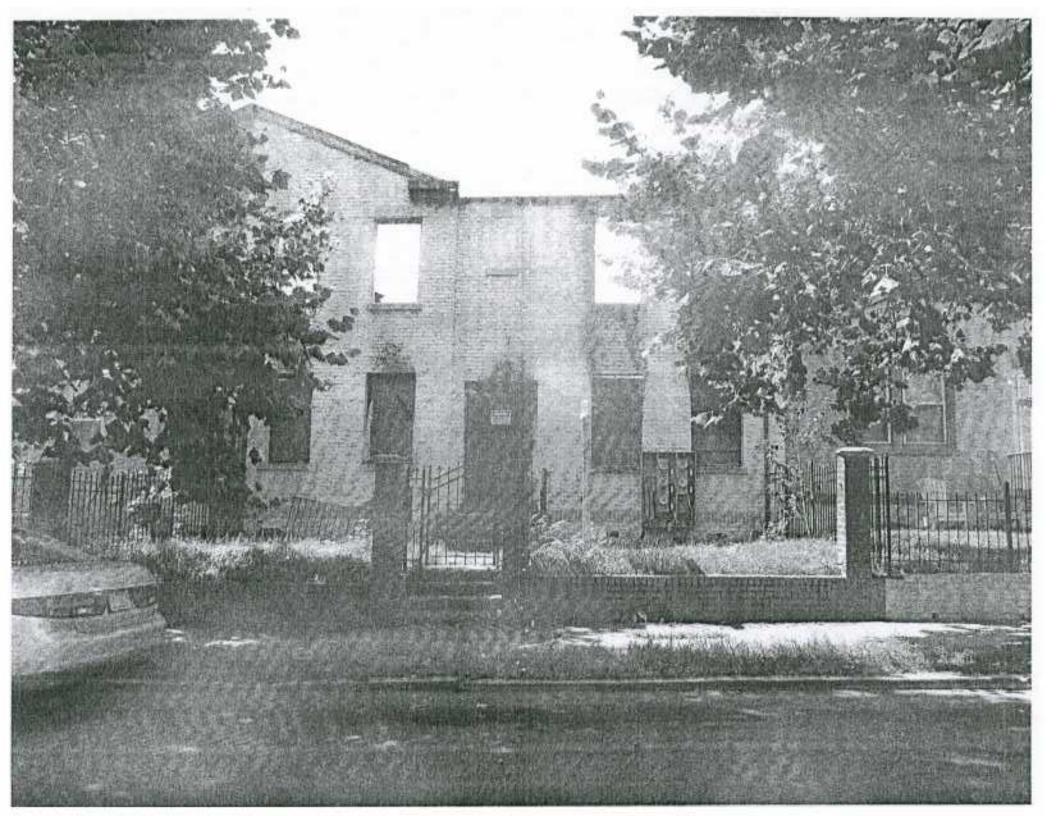
#### APPLICATION FOR RAZE PERMIT

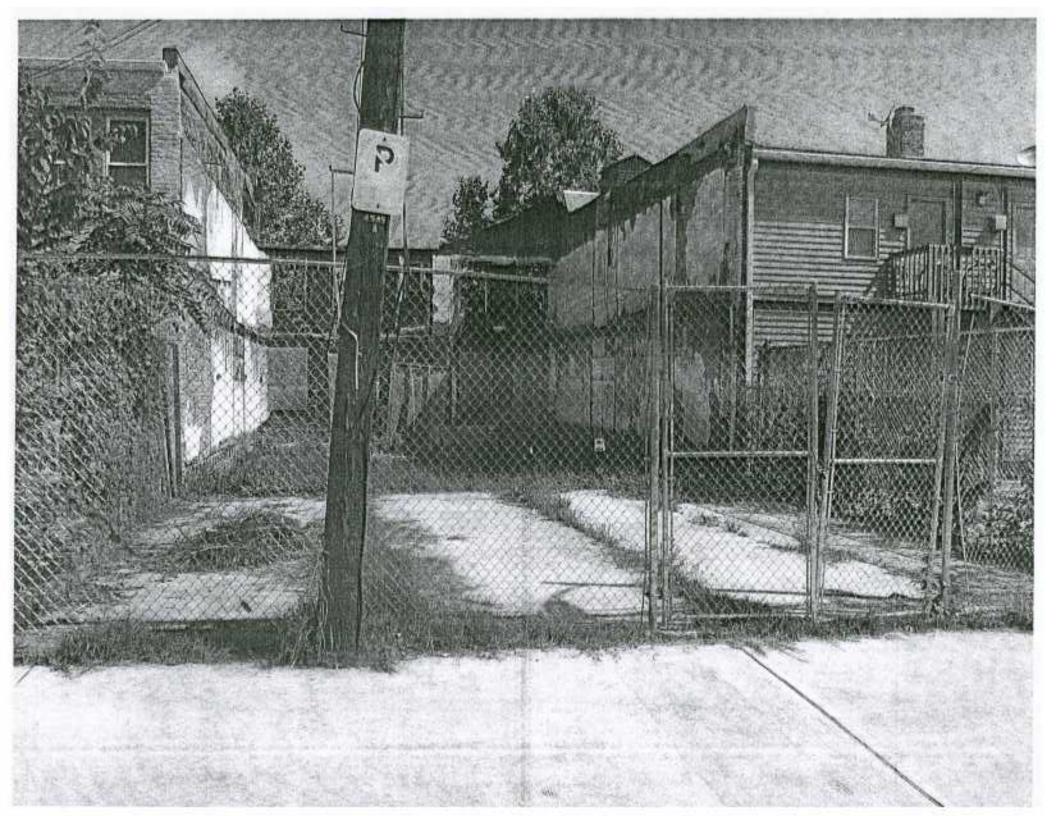
Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide detailed information. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered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

Applicable code sections are in the 2013 DCMR 12 Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1,

	2 10000	ATTONION DE		lication Date:	7)26/	
Address of Proposed Work	1 INFURI	AATION ON PR	_	4a, Square	4b. Suffix	5. Lot
1603 ISHERU	bod STIYE	NW	One	4545		208
Property Owner	2. APPL 7. Complete mailing	CANT INFOR	OR STREET, SQUARE, SQU	hone Number(s)	9. Email	
CHENTES PROPE				2547-27	7 INFO	essa Num
0. Agent/Contractor for Owner	A STATE OF THE PARTY OF THE PAR	A STATE OF THE PARTY OF THE PAR	zip) 12.	Phone Number(s)		
Sta Truitt	734 7	W.	207	2547-227	INFO	d Jul Tevi
DEDLO REMA; MG	cally indicate if any use is residential.		11200	als of Building (bri	Z, ck, wood, etc.)	ner of Stories of Bldg.
DS 10"	3.5 '		25		0	
7- (-		FICIAL USE 0	NLY	W-wccar-		
CONDITIONS/ COMMENTS:						

	0.0	make the second	TION A RAZE PER		45	
Raze Contractor's Name		24. Contracto	or's Address (including a	p code)	25. Contractor	s Phone
6. Historic District?	Yes	☑No	33. Raze Contract	or Signature		
7. CFA?	☐Yes	□ No				
8. Raze Entire Building?	□Yes	T No	34. Property Own	r Signature		
9. Building Condemned?	□Yes	□ No			1100	
0a, Party Wall?	□Yes	12No	30b. If yes, ad	acent prop	erty owner(s) afeguards du	will need to sign the ring construction
			30c. Any raze pe	ermit applicati	on for a building	(s) involving party walls must be arty wall(s) will be protected.
1. Building Vacant?	☑ Yes	□ No	Building must be	vacant before	Raze Permit issu	Jance.
32. Public Space Vault?	ПYes	E No			Official Use (	Only
NOTE OF CONTRACT OF SECRETARY OF SEC.			Foe	Ву		o di
33. Plumber's Name		34. Plumbe	er's License Number		35. Raze Meth	od (ball, buildozer, by hand, etc.
NIA						
You must submit a Certificate of Insquare feet or less in area and not. The Certificate should: Show the holder of the influence and advance include these amounts of State that the insurance if the insurance is for one	more than on surance as: E e notice cano finsurance co covers "Razin	e story, wholly Deputy Directo ellation clause overage: Bodil g Operations	or, Permit Division, 1100 t. ly Injury, \$100,000; Agg in the District of Columb	4th St SW, V regate, \$300, via," if the sco	Vashington, DC 000; and Proper pe of the insurar	20024 ty Damage, \$100,000. see is for blanket coverage.
and the second s		- 1 - 1 - S - A	AND DESCRIPTION OF THE PERSON		38, Expirat	of raze operation)
36. Insurance Company		37. Polic	cy or Certificate No.	2	30, CAPITAL	ion para
39. Asbestos in Building?	□Ye	s No			Official Use C	Only
FOR SHALL SHOULD BE AND						
If yes, indicate location:			Fee	Ву		Date

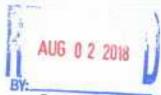






0772 0006 08/22/2004

1215 3rd Street NE





## Department of Consumer and Regulatory Affairs Permit Operations Division



Washington DC 20024 Tel. (202) 442 - 4589 Fax (202) 442 - 4862 TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

Date:	July 23, 2018	_	Cap ld:	R1800230
1100	Historic Preservation 4th Street S.W., Rm ington, DC 20024			
Re: Re	equest for clearance of	premises subject to razing ope	rations	
this da	te with the Permit Ope property. We are here	ructure identified below, loc- erations Division. Our records by requesting confirmation f	s do not reveal any kind o	d'conservation holds
Addre	SS:			
55 Q	STSW			
LOT:	0036 SQUARE: 0656	TYPE:	v	ACANT: Yes
the cle		ne satisfactory completion of and returning this form to the D.C. 20024.		
1100		CLEARANC	E	
		e researched our records cond ding with the proposed razin		ified above and we
Date:		Signature:		
Name	of releasing HPO Of	ficial. (print)		

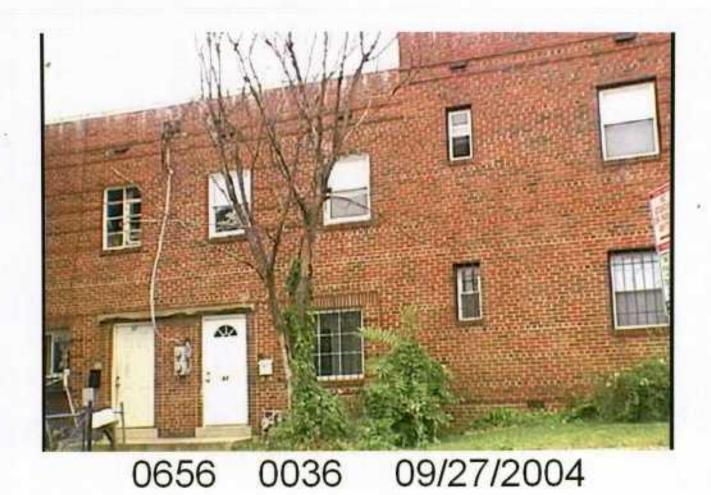


Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide **detailed information**. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any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

					Appl	cation Date: 7/1	1/2018	
STATE OF LABOR.		1. INFORMATIO	N ON PE	ROPE	1500			
1. Address of Proposed Work			2. Quad	3. V	Vard	4a. Square	4b. Suffix	5 Lot
55 Q Street			SW	Six		0656		0036
Complete and the	To Marie	2. APPLICANT		1000				
6. Property Owner		7. Complete mailing address	s (include z	ip)	8. Ph	one Number(s)	9. Email	
55 Q ST SW LLC		711 Park Avenue, Falls C	hurch, VA	220	703-	868-1184	mike@20	2development.co
10. Agent/Contractor for Owner (if appli	(cable)	11. Complete mailing address	ss (include	zip)	12. P	hone Number(s)	13. Email	
		3. TYPE (	DE DEDM	UT				
14. Check all that apply:	AV-186-51	12.	JF FERM		-			
, ⊠ Raz	te Perm	it						
	100	4. DESCRIPTION	AND DESCRIPTION OF THE PERSON NAMED IN	UILD	ING	and of the	W-111-1	- Torma
15. Description of Building to be Rezed	(e.g., two	story brick single family dw	veling)			16	Existing Number	er of Stones of Bldg
Townhome						2		
17. Use(s) of Property (specifically indic	cate if any	use is residential.)		18. Ma	atenais	of Building (brick	, wood, etc.)	
Vacant				Vood				
19. Bidg Length (ft)	20. Bldg	Width (ft)	21. Bldg	Heigh	Nt (ft)		22. Bidg Volum	e (cu fi) (L x W x H)
17.5	35		20				12,250	
Name of Street	107141	OFFICIAL	USE ON	LY	4	No Francis	DE UEST	Control of the
CONDITIONS/COMMENTS:		0.000000	Second Test	in the last	100	1000	28 V = 7.43	

		24. Contract	or's Address (including zip code)	25. Contractor's Pho	ne
ACECO, LLC		901 Stodd	ard PL, Silver Spring, MD 2091	301-588-0707	
26. Historic District?	□Yes	Mo	33. Raze/Contractor Signatur	9 0.	
27. CFA?	☐Yes	⊠ No	Dur	le	
28. Raze Entire Building?	⊠Yes	□No	34. Property Owner Signatur	e	
29. Building Condemned?	Yes	⊠No			
30a. Party Wall?	⊠Yes	□No	30b. If yes, adjacent pr Notification Form which 30c. Any raze permit applie	n safeguards during cation for a building(s) in	construction volving party walls must be
31. Building Vacant?	[X] Yes	ΠNo	Include 2 copies of a plan th	VENTON MALE AND WASHINGTON	Chronical Commence of the Comm
			Building must be vacant before		
32. Public Space Vault?	□Yes	⊠ No	Fee	Official Use Only	Date
33. Plumber's Name			r's License Number		ell, buildozer, by hand, etc.
Daniel Narh		1239		Excavator w/ thu	
You must submit a Certificate of Ins square feet or less in area and not The Certificate should:  Show the holder of the ins Include a 30-day advance Include these amounts of State that the insurance of	more than one surance as: Do notice cance insurance con covers "Razing	ing the raze of story, wholly eputy Directo llation clause verage: Bodili Operations i	detached from any other building r, Permit Division, 1100 4th St SW	uilding you plan to raze is on the same or adjoining /, Washington, DC 20024 00,000; and Property Dar scope of the insurance is	an accessory building 50 premises. nage, \$100,000. for blanket coverage.
You must submit a Certificate of Ins square feet or less in area and not The Certificate should:  Show the holder of the ins Include a 30-day advance Include these amounts of State that the insurance of If the insurance is for one	more than one surance as: Do notice cance insurance con covers "Razing	ing the raze of story, wholly eputy Directo llation clause verage: Bodily (Operations)	r, Permit Division, 1100 4th St SW y Injury, \$100,000; Aggregate, \$30 in the District of Columbia," If the s	uilding you plan to raze is on the same or adjoining I, Washington, DC 20024 00,000; and Property Dar	an accessory building 50 premises. nage, \$100,000. for blanket coverage.
Nou must submit a Certificate of Insequere feet or less in area and not square feet or less in area and not some control of the insequence of the insequenc	more than one surance as: Do notice cance insurance con covers "Razing	ing the raze of story, wholly eputy Directo llation clause verage: Bodily (Operations)	r detached from any other building r, Permit Division, 1100 4th St SW y Injury, \$100,000; Aggregate, \$30 in the District of Columbia," If the se that, "Razing Operations at y or Certificate No.	uilding you plan to raze is on the same or adjoining /, Washington, DC 20024 00,000; and Property Dar cope of the insurance is (address of raze	an accessory building 50 premises. nage, \$100,000. for blanket coverage.
1. You must submit a Certificate of Ins square feet or less in area and not 2. The Certificate should:  Show the holder of the ins Include a 30-day advance Include these amounts of State that the insurance of If the insurance is for one	more than one surance as: Do notice cance insurance con covers "Razing	ng the raze of story, wholly eputy Directo llation clause verage: Bodili Operations i ass only, stati	r detached from any other building r, Permit Division, 1100 4th St SW y Injury, \$100,000; Aggregate, \$30 in the District of Columbia," If the se that, "Razing Operations at y or Certificate No.	uilding you plan to raze is on the same or adjoining to the same or adjoining to the same of adjoining to the same of adjoining to the same of the insurance is a same of the	an accessory building 50 premises. nage, \$100,000. for blanket coverage.
1. You must submit a Certificate of Ins square feet or less in area and not 2. The Certificate should:  Show the holder of the insert include a 30-day advance Include these amounts of State that the insurance of If the insurance is for one 36. Insurance Company Arch Specialty Insurance Co.	more than one surance as: Do e notice cance insurance co covers "Razing e specific addre	ng the raze of story, wholly eputy Directo llation clause verage: Bodili Operations i ass only, stati	r detached from any other building r, Permit Division, 1100 4th St SW y Injury, \$100,000; Aggregate, \$30 in the District of Columbia," If the se that, "Razing Operations at y or Certificate No.	uilding you plan to raze is on the same or adjoining to the same of the insurance is a same of the same of th	an accessory building 50 premises.  nage, \$100,000. for blanket coverage.



55 Q Street SW





## Department of Consumer and Regulatory Affairs Permit Operations Division



Washington DC 20024 Tel. (202) 442 - 4589 Fax (202) 442 - 4862 TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

ons
I in the District of Columbia, was filed on o not reveal any kind of conservation holds t your office, in order to release the subject
VACANT: Yes
r inspection of the premises, by filling out C.R.A. Permit Operations Division, 1100
ing the structure identified above and we said structure.



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.

					Appl	cation Date: 7/11	/2018	
	10000	1. INFORMAT		_	_			
Address of Proposed Work			2. Quad	3 V	Vard	4a. Square	4b. Suffix	5. Lot
57 Q Street			sw	Six		0656		0037
	وسيالتهال	2. APPLICAT	NTINFOR	MAT	ION			
6. Property Owner		7. Complete mailing addre	ess (include a	rip)	8. Ph	one Number(s)	9. Email	
57 Q ST SW LLC		711 Park Avenue, Falls	Church, V	220	703-	868-1184	mike@202	development.com
10. Agent/Contractor for Own	er (if applicable)	11. Complete mailing add	ress (include	zip)	12. P	hone Number(s)	13. Email	
	SERVIN,	3. TYPE	OF PERM	AIT.			-	No Williams
14. Check all that apply:	Raze Pen	mit						
		4. DESCRIPT		UILD	ING	L 100	177./10	- 000000
15. Description of Building to	be Razed (e.g., h	wo story brick single family	dwelling)			16.	Existing Number	r of Stories of Bldg:
Townhome						2		
17. Use(s) of Property (specif	Ically indicate if a	ny use is residential.)		18. Ma	sterials	of Building (brick.	wood, etc.)	
Vacant				Brick				
19. Bldg Length (ft)	20. Bld	g Width (ft)	21. Bldg	Heigh	ut (fft)		22. Bldg Volum	e (cu ft) (L x W x H)
17.5	35		20				12,250	
ASSESSED BY		OFFICIA	L USE ON	ILY				III S
CONDITIONS/ COMMENTS:								

Yes [	No N	Notification F 30c. Any raze include 2 copie Building must b Fee	wher Signature adjacent prop Form which a permit applicat as of a plan that	safeguards durir ion for a building(s) show how the part Raze Permit Issual Official Use On	involving party walls must be y wall(s) will be protected.  The protected of the protected	
Yes [	No No No No No Sho	34. Property Ov  30b. If yes, a Notification F 30c. Any raze include 2 copie Building must b  Fee	wher Signature adjacent prop Form which is permit applicat is of a plan that is vacant before	safeguards durings on for a buildings show how the part Raze Permit Issua Official Use On 135. Raze Method	ng construction involving party walls must be y wall(s) will be protected.  The protected of the protected o	
Yes □     Yes □     Yes □     Yes □     Yes □	No No No No SA, Plumbe	30b. If yes, a Notification F 30c. Any raze include 2 copie Building must b Fee	adjacent prop Form which s permit applicat s of a plan that se vacant before	safeguards durings on for a buildings show how the part Raze Permit Issua Official Use On 135. Raze Method	ng construction involving party walls must be y wall(s) will be protected.  The protected of the protected o	
☐Yes ☐Yes ☐	No N	30b. If yes, a Notification F 30c. Any raze include 2 copie Building must b Fee	adjacent prop Form which s permit applicat s of a plan that se vacant before	safeguards durings on for a buildings show how the part Raze Permit Issua Official Use On 135. Raze Method	ng construction involving party walls must be y wall(s) will be protected.  The protected of the protected o	
▼Yes [  Yes [	□ No □ No ☑ No ☑ No 34. Plumbe	Notification F 30c. Any raze include 2 copie Building must b Fee	Form which is permit applicated to far plan that is a vacant before	safeguards durings on for a buildings show how the part Raze Permit Issua Official Use On 135. Raze Method	ng construction involving party walls must be y wall(s) will be protected.  The protected of the protected o	
⊠Yes [	□ No ⊠ No 34. Plumbe 1239	Notification F 30c. Any raze include 2 copie Building must b Fee	Form which is permit applicated to far plan that is a vacant before	safeguards durings on for a buildings show how the part Raze Permit Issua Official Use On 135. Raze Method	ng construction involving party walls must be y wall(s) will be protected.  The protected of the protected o	
□Yes [	34. Plumbe	Fee  Fee  ar's Lipense Number	e vacant before	Raze Permit Issual Official Use On 7	Date Date (ball, buildozar, by hand, etc.)	
	34. Plumbe	ar'a Lipense Number	8	35. Raze Method	Date Date (bell, buildozar, by hand, etc.)	
	34. Plumbe	ar'a Lipense Number		35. Raze Method	(bell, buildozer, by hand, etc.	
	1239					
				Excavator w/t	humb	
-	o the error o					
than one s nce as: Dep ice cancella rance cove s "Razing (	story, wholly puty Director lation clause erage: Bodily Operations is	r, Permit Division, 110 c, Permit Division, 110 y Injury, \$100,000; Ag in the District of Colum	other building or 00 4th St SW, V ggregate, \$300, nbia," if the sco	Nashington, DC 20 000; and Property pe of the insurance	Damage, \$100,000. Is for blanket coverage.	
	37 Police	y or Carlifonta No	ALTO COLUMN TO A C		The second secon	
	-	Part of the Action of the Control of	/-			
☐Yes [		10.00			y	
		Foo	By	ALLIS IS	Date	
0	ic addre	ic address only, stat	37. Policy or Certificate No. 57080509	37. Policy or Certificate No.  57080509  Yes No	37. Policy or Certificate No. 38. Expiration 57080509 6/30/2019  38. Expiration 6/30/2019  Official Use On	



0656 0037 09/27/2004

57 Q Street SW





#### Government of the District of Columbia

### Department of Consumer and Regulatory Affairs Permit Operations Division

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:	July 23, 2018		Cap Id:	R1800232
1100 4	Historic Preservation (th Street S.W., Rm lington, DC 20024			
	Carried and American Action	oremises subject to razing ope	rations	
this da	te with the Permit Ope property. We are here	ructure identified below, loc rations Division. Our record by requesting confirmation f	s do not reveal any kind	of conservation holds
Addre 59 Q	ST SW			
LOT.	0038 SQUARE: 0656	TYPE:	1	/ACANT: Yes
the cle	e notify our office of the earance section below reet S.W., Washington	ne satisfactory completion of and returning this form to the D.C. 20024.	your inspection of the pe e D.C.R.A. Permit Open	remises, by filling out ations Division, 1100
		CLEARANG	E	
This is	s to inform you that we no objections to procee	e researched our records cond ding with the proposed razin	erning the structure iden g of said structure.	tified above and we
Date:		Signature:		
	of selection UBO Of			



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.

1. INFORMATION ON PROPERTY  1. Address of Proposed Work  59 O Street  2. Quad 3. Ward 4a. Square 4b. Suffix 5. Lot 59 O Street  8. W Six 0656  0038  2. APPLICANT INFORMATION  6. Property Owner 7. Complete mailing address (include zip) 8. Phone Number(s) 9. Email mike@202develop.n  7. The Park Avenue, Falls Church, VA 22 703-868-1184  10. Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email mike@202develop.n  3. TYPE OF PERMIT  14. Check all that apply:  4. DESCRIPTION OF BUILDING  15. Description of Building to be Razed (e.g., two story brick single family dwelling) 16. Existing Number of Stories 17. Use(s) of Property (specifically indicate if any use is residential.)  18. Materials of Building (brick, wood, etc.)  Prick
SW Six 0656 0038  2. APPLICANT INFORMATION 6. Property Owner 7. Complete mailing address (include zip) 8. Phone Number(s) 9. Email mike@202developn 10. Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email 14. Check all that apply:  3. TYPE OF PERMIT 14. Check all that apply:  4. DESCRIPTION OF BUILDING 15. Description of Building to be Razed (e.g., two story brick single family dwelling) 16. Existing Number of Stories 17. Use(s) of Property (specifically indicate if any use is residential) 18. Materials of Building (brick, wood, etc.)
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6. Property Owner  7. Complete mailing address (include zip) 8. Phone Number(s) 9. Email 70. Agent/Contractor for Owner (if applicable) 10. Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email 14. Check all that apply:  8. Phone Number(s) 13. Email 14. Check all that apply:  15. Description of Building to be Razed (e.g., two story brick single family dwelling) 16. Existing Number of Stories 17. Use(s) of Property (specifically indicate if any use is residential.) 18. Materials of Building (brick, wood, etc.)
10. Agent/Contractor for Owner (if applicable)  11. Complete mailing address (include zip)  12. Phone Number(s)  13. Email  14. Check all that apply:  15. Description of Building to be Razed (e.g., two story brick single family dwelling)  16. Existing Number of Stories  17. Use(s) of Property (specifically indicate if any use is residential.)  18. Materials of Building (brick, wood, etc.)
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14. Check all that apply:  A. DESCRIPTION OF BUILDING  15. Description of Building to be Razed (e.g., two story brick single family dwelling)  Townhome  17. Use(s) of Property (specifically indicate if any use is residential.)  18. Materials of Building (brick, wood, etc.)
14. Check all that apply:  4. DESCRIPTION OF BUILDING  15. Description of Building to be Razed (e.g., two story brick single family dwelling)  16. Existing Number of Stories  17. Use(s) of Property (specifically indicate if any use is residential.)  18. Materials of Building (brick, wood, etc.)
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17. Use(s) of Property (specifically indicate if any use is residential.)  18. Materials of Building (brick, wood, etc.)
Vacant Brick
19. Bldg Length (ft) 20. Bldg Width (ft) 21. Bldg Height (ft) 22. Bldg Volume (cu ft) (L.x
17.5 35 20 12,250
OFFICIAL USE ONLY

23, Raze Contractor's Name		24. Contract	or's Address (including zip code)	26. Con	tractor's Phone
ACECO, LLC		901 Stodd	ard Pl., Silver Spring, MD 2091	0 301-58	8-0707
26. Historic District?	□Yes	⊠No	33. Raze/Contrader Signat	9 1.	
27. CFA?	□Yes	⊠ No	Dut	le	_
28. Raze Entire Building?	⊠Yes	□No	34. Property Owner Signatu	re	
29. Building Condemned?	□Yes	⊠No			Language and the second
30a. Party Wall?	⊠Yes	□No	Notification Form which 30c. Any raze permit appl	h safeguar ication for a b	ner(s) will need to sign the ds during construction uilding(s) involving party walls must be the party wall(s) will be protected.
31, Building Vacant?	⊠Yes	□No	Building must be vacant be	THE PERSON NAMED IN	Note: National Commence of the
32. Public Space Vault?	□Yes	FINA	building most be value in be	Elifornia de la companya della companya de la companya de la companya della compa	Use Only
Sz. r doit Space Vaultr	L. 163	[2]140	Fee	Ву	Date
33. Plumber's Name		34, Plumbe	er's Ligense Number	35. Raz	te Method (ball, buildazer, by hand, etc
Daniel Narh  You must submit a Certificate of Inc	surance cover	1239 ng the raze o	operation/contractor- unless the b		ator w/ thumb an to raze is an accessory building 50
You must submit a Certificate of Ins square feet or less in area and not The Certificate should:  Show the holder of the In- Include a 30-day advance Include these amounts of State that the insurance of	surance as: Do e notice cance insurance co covers "Razing	ng the raze of story, wholly eputy Directo llation clause verage: Bodill Operations	y detached from any other building, Permit Division, 1100 4th St St t y Injury, \$100,000; Aggregate, \$3 in the District of Columbia," if the	uilding you pl g on the same V, Washingto 00,000; and i	lan to raze is an accessory building 50 e or adjoining premises. n, DC 20024
You must submit a Certificate of Ins square feet or less in area and not The Certificate should:  Show the holder of the Ins Include a 30-day advance Include these amounts of State that the insurance of	surance as: Do e notice cance insurance co covers "Razing	ng the raze of story, wholly epoly Director lation clause verage: Bodil Operations assignly, state	y detached from any other buildings, Permit Division, 1100 4th St	vilding you pl g on the same V, Washingto 00,000; and i scope of the i	lan to raze is an accessory building 50 e or adjoining premises.  n, DC 20024  Property Damage, \$100,000, insurance is for blanket coverage.
You must submit a Certificate of Insequere feet or less in area and not a square feet or less in area and not a The Certificate should:  Show the holder of the last include a 30-day advance or include these amounts of State that the insurance or if the insurance is for one	surance as: Do e notice cance insurance co covers "Razing	ng the raze of story, wholly epoly Director lation clause verage: Bodil Operations ass only, state 37. Polici	y detached from any other building, Permit Division, 1100 4th St St St It. by Injury, \$100,000; Aggregate, \$3 in the District of Columbia," if the let that, "Razing Operations at	vilding you pl g on the same V, Washingto 00,000; and i scope of the i (ad 38. Es	lan to raze is an accessory building 50 e or adjoining premises.  n, DC 20024  Property Damage, \$100,000. Insurance is for blanket coverage.   dress of raze operation)
. You must submit a Certificate of Ins square feet or less in area and not be. The Certificate should:  Show the holder of the Ins Include a 30-day advance Include these amounts of State that the insurance of If the insurance is for one 36. Insurance Company Arch Specialty Insurance Co.	surance as: Do e notice cance l'insurance co covers "Razing e specific addre	ng the raze of story, wholly epoly Directo llation clause verage: Bodil Operations ass only, state 57080509	y detached from any other building, Permit Division, 1100 4th St St St It. by Injury, \$100,000; Aggregate, \$3 in the District of Columbia," if the let that, "Razing Operations at	vilding you pl g on the same V, Washingto 00,000; and i scope of the (ad 38, Es	lan to raze is an accessory building 50 a or adjoining premises.  In, DC 20024  Property Damage, \$100,000, insurance is for blanket coverage.  Idress of raze operation)  Expiration Date
You must submit a Certificate of Insequere feet or less in area and not a square feet or less in area and not a The Certificate should:  Show the holder of the last include a 30-day advance include these amounts of State that the insurance of If the insurance is for one 36. Insurance Company	surance as: Do e notice cance insurance co covers "Razing	ng the raze of story, wholly epoly Directo llation clause verage: Bodil Operations ass only, state 57080509	y detached from any other building, Permit Division, 1100 4th St St St It. by Injury, \$100,000; Aggregate, \$3 in the District of Columbia," if the let that, "Razing Operations at	vilding you pl g on the same V, Washingto 00,000; and i scope of the (ad 38, Es	lan to raze is an accessory building 50 e or adjoining premises.  n, DC 20024  Property Damage, \$100,000. Insurance is for blanket coverage.   dress of raze operation)  expiration Date



59 Q Street SW



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



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:	July 23, 2018	-6.15	Cap Id:	R1800234
1100	Historic Preservatio 4th Street S.W., Rm I ington, DC 20024			
Re: Re	equest for clearance of p	oremises subject to razing ope	rrations	
this da	te with the Permit Ope property. We are here	ructure identified below, loc rations Division. Our record by requesting confirmation	ls do not reveal any kind o	of conservation holds
Addre 61 Q	ST SW			
LOT: (	0039 SQUARE: 0656	TYPE:	v	ACANT: Yes
the clo		e satisfactory completion of and returning this form to th D.C. 20024.		
		CLEARANG	E	The state of the s
	5. TAN 100 CO TO SEE TO SEE THE SECOND SERVICE AND SECOND	researched our records cond ling with the proposed razin		ified above and we
Date:		Signature:		
Name	of releasing HPO Off	icial. (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

	. Lot 039
2. APPLICANT INFORMATION 6. Property Owner 7. Complete mailing address (include zip) 8. Phone Number(s) 9. Email 61 0 ST SW LLC 711 Park Avenue, Falls Church, VA 22 703-868-1184 mike@202devel 10. Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email  3. TYPE 0F 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 Sto	-
2. APPLICANT INFORMATION  6. Property Owner 7. Complete mailing address (include zip) 8. Phone Number(s) 9. Email  61 O ST SW LLC 711 Park Avenue, Falls Church, VA 22 703-868-1184 mike@202devel  10. Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email  3. TYPE 0F PERMIT  14. Check all that apply:  15. Description of Building to be Razed (e.g., two story brick single family dwelling) 15. Existing Number of Stores	039
6. Property Owner 7. Complete mailing address (include zip) 8. Phone Number(s) 9. Email  61 Q ST SW LLC 711 Park Avenue, Falls Church, VA 22 703-868-1184 mike@202devel  10. Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email  3. TYPE 0F 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 Stores	9.0
61 Q ST SW LLC  711 Park Avenue, Falls Church, VA 22 703-868-1184  10. Agent/Contractor for Owner (if applicable)  11. Complete mailing address (include zip)  12. Phone Number(s)  13. Email  3. TYPE OF PERMIT  14. Check all that apply:  14. Check all that apply:  15. Description of Building to be Razed (e.g., two story brick single family dwelling)  15. Existing Number of Stores	
10. Agent/Contractor for Owner (if applicable)  11. Complete mailing address (include zip)  12. Phone Number(s)  13. Email  3. TYPE 0F PERMIT  14. Check all that apply:  14. Check all that apply:  15. Description of Building to be Razed (e.g., two story brick single family dwelling)  16. Existing Number of Stores	
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)  15. Existing Number of Story	opment.co
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)  15. Existing Number of Story	
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)  15. Existing Number of Story	
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)  15. Existing Number of Story	
17. Use(s) of Property (specifically indicate if any use is residential.)   18. Materials of Building (brick, wood, etc.)	
OFFICIAL USE ONLY	-

27. CFA? Yes  28. Raze Entire Building? Yes  29. Building Condemned? Yes  30a. Party Wall? Yes  31. Building Vacant? Yes  32. Public Space Vault? Yes  33. Plumber's Name  Daniel Narh  1. You must submit a Certificate of Insurance cover square feet or less in area and not more than one  2. The Certificate should:  Show the holder of the Insurance as: Delinctude a 30-day advance notice cancer include these amounts of Insurance cover State that the Insurance covers "Razing If the insurance is for one specific address 36. Insurance Company  Arch Specialty Insurance Co.		ard Pl., Silver Spring, MD 20		
27. CFA? Yes  28. Raze Entire Building? Yes  29. Building Condemned? Yes  30a. Party Wall? Yes  31. Building Vacant? Yes  32. Public Space Vault? Yes  33. Plumber's Name  Daniel Narh  1. You must submit a Certificate of Insurance cover square feet or less in area and not more than one  2. The Certificate should:  Show the holder of the Insurance as: Delinctude a 30-day advance notice cancer include these amounts of Insurance cover State that the Insurance covers "Razing If the insurance is for one specific address 36. Insurance Company  Arch Specialty Insurance Co.	- Anna Anna Anna Anna Anna Anna Anna Ann	and a server about the store was	910 301-58	88-0707
28. Raze Entire Building?  29. Building Condemned?  30a. Party Wall?  31. Building Vacant?  32. Public Space Vault?  33. Plumber's Name  Daniel Narh  1. You must submit a Certificate of Insurance cover square feet or less in area and not more than one 2. The Certificate should:  Show the holder of the insurance cover include a 30-day advance notice cance include these amounts of insurance cover State that the insurance covers "Razing Include these amounts of insurance covers" Razing If the insurance is for one specific address 36. Insurance Company  Arch Specialty Insurance Co.	図No	33. Raza Contractor Sign	99 1	
29. Building Condemned?  30a. Party Wall?  31. Building Vacant?  32. Public Space Vault?  33. Plumber's Name  Daniel Narh  You must submit a Certificate of Insurance cover square feet or less in area and not more than one.  The Certificate should:  Show the holder of the insurance as: Definitude these amounts of insurance cover. Include these amounts of insurance cover. State that the insurance covers "Razing". If the insurance is for one specific address.  36. Insurance Company  Arch Specialty Insurance Co.	⊠ No	Blu	ale	_
30a. Party Wall?  31. Building Vacant?  32. Public Space Vault?  33. Plumber's Name  Daniel Narh  You must submit a Certificate of Insurance cover square feet or less in area and not more than one. The Certificate should:  Show the holder of the insurance as: Definition in the insurance cover include a 30-day advance notice cance. Include these amounts of insurance covers. State that the insurance covers. Razing.  If the insurance is for one specific address.	□No	34. Property Owner Signa	ature	
31. Building Vacant?  32. Public Space Vault?  33. Plumber's Name  Daniel Narh  You must submit a Certificate of Insurance cover square feet or less in area and not more than one. The Certificate should:  Show the holder of the insurance as: Die Include a 30-day advance notice cance. Include these amounts of insurance covers "Razing." If the insurance is for one specific address.  36. Insurance Company  Arch Specialty Insurance Co.	⊠No			
32. Public Space Vault?  33. Plumber's Name  Daniel Narh  You must submit a Certificate of Insurance cover square feet or less in area and not more than one. The Certificate should:  Show the holder of the insurance as: Definitude these amounts of insurance covers. State that the insurance covers. Razing  If the insurance is for one specific address.  Insurance Company  Arch Specialty Insurance Co.	□No	Notification Form wh 30c. Any raze permit ap	ich safeguar plication for a b	ner(s) will need to sign the ds during construction uilding(s) involving party waits must b v the party wall(s) will be protected.
33. Plumber's Name  Daniel Narh  1. You must submit a Certificate of Insurance cover square feet or less in area and not more than one.  2. The Certificate should:  Show the holder of the insurance as: Definitive these amounts of insurance covers. Include these amounts of insurance covers. State that the insurance covers. Razing.  If the insurance is for one specific address.  36. Insurance Company.  Arch Specialty Insurance Co.	□No	Building must be vacant t	THE RESERVE OF THE PARTY OF THE	
33. Plumber's Name  Daniel Narh  1. You must submit a Certificate of Insurance cover square feet or less in area and not more than one.  2. The Certificate should:  Show the holder of the insurance as: Definitive these amounts of insurance covers. Include these amounts of insurance covers. State that the insurance covers. Razing.  If the insurance is for one specific address.  36. Insurance Company.  Arch Specialty Insurance Co.	EN No.			Use Only
Daniel Narh  You must submit a Certificate of Insurance cover square feet or less in area and not more than one. The Certificate should:  Show the holder of the insurance as: Districted a 30-day advance notice cance include these amounts of insurance covers "Razing If the insurance is for one specific address."  Insurance Company  Arch Specialty Insurance Co.		Fee	Ву	Date
. You must submit a Certificate of Insurance cover square feet or less in area and not more than one than one than constitute. The Certificate should:  Show the holder of the insurance as: Definition of Include a 30-day advance notice cance include these amounts of insurance covers. State that the insurance covers "Razing if the insurance is for one specific address. Insurance Company  Arch Specialty Insurance Co.	34. Plumbe	er's License Number	35. Raz	te Method (ball, buildozer, by hand, etc.
square teet or less in area and not more than one  The Certificate should:  Show the holder of the insurance as: Di Include a 30-day advance notice cance Include these amounts of insurance cor State that the insurance covers "Razing If the insurance is for one specific addres  36. Insurance Company  Arch Specialty Insurance Co.	1239			stor w/ thumb
36, Insurance Company Arch Specialty Insurance Co.	eputy Directo lation clause verage: Bodily Operations i	r, Permit Division, 1100 4th St.; r, Permit Division, 1100 4th St.; r, injury, \$100,000; Aggregate, to the District of Columbia," if the	ing on the same SW, Washington \$300,000; and F	n, DC 20024
Arch Specialty Insurance Co.	SASSAN OF THE	Company of the Comment of the Commen		dress of raze operation)
		y or Certificate No.		piration Date
39. Asbestos in Building? Tyes	57080509	1/5	6/30/2	019
If yes, indicate location:	□No	PLO MAD HE	Official L	Jse Only
		Fee	Ву	Date



61 Q Street SW



0656 0041 09/27/2004

63 Q Street SW

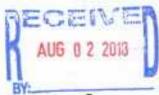
23. Raze Contractor's Name		24. Contrac	tor's Address (including zip code)	25. C	ontractor's Phone
ACECO, LLC		901 Stodd	lard PL, Silver Spring, MD 2091	0 301-	588-0707
26. Historic District?	Yes	⊠No	33. Raze Contractor Signat	9 1	•
27. CFA?	□Yes	⊠ No	Blut	le	_
28. Raze Entire Building?	⊠Yes	□No	34. Property Owner Signal.	te	The state of the s
29. Building Condemned?	□Yes	⊠No			
30a. Party Wall?	⊠Yes	□No	Notification Form which 30c. Any raze permit appl	h safegua cation for a	wner(s) will need to sign the ards during construction building(s) involving party walls must b ow the party wall(s) will be protected.
31. Building Vacant?	⊠Yes	□No	Building must be vacant be		The state of the s
32. Public Space Vault?	□Yes	MNo	TOTAL DESIGNATION OF THE PERSON OF THE PERSO	Officia	l Use Only
		7,500	Fee	By	Cate
		Tax as a		1 20 12	
33. Plumber's Name		34, Plumb	er's License Number	35. FG	aze Metrico (call, buildozer, by hand, etc
33. Plumber's Name  Daniel Narh  Vou must submit a Carlificate of In-	surance cover	1239		Exca	vator w/ thumb
Daniel Narh  You must submit a Certificate of Insquare feet or less in area and not? The Certificate should:  Show the holder of the insurance	more than one surance as: Do e notice cance finsurance cov covers "Razing	ng the raze of story, whole eputy Director lation clause verage: Bodil Operations	operation/contractor—unless the by detached from any other building or, Permit Division, 1100 4th St SV to Juliury, \$100,000; Aggregate, \$3 in the District of Columbia," If the	Exca uilding you you the sar V, Washing	vator w/ thumb plan to raze is an accessory building 5 me or adjoining premises. Ion, DC 20024
Daniel Narh  You must submit a Certificate of Insquare feet or less in area and not in the Certificate should:  Show the holder of the in Include a 30-day advance Include these amounts of State that the insurance is for one	more than one surance as: Do e notice cance finsurance cov covers "Razing	ng the raze of story, whole eputy Director lation clause verage: Bodil Operations ess only, stat	operation/contractor—unless the by detached from any other building or, Permit Division, 1100 4th St SV b.  y Injury, \$100,000; Aggregate, \$3 in the District of Columbia," If the se that, "Razing Operations at	Exca uilding you i on the sar /, Washing 00,000; and scope of the	plan to raze is an accessory building 56 me or adjoining premises. ion, DC 20024 d Property Damage, \$100,000. e insurance is for blanket coverage.
Daniel Narh  1. You must submit a Certificate of Insequare feet or less in area and not 2. The Certificate should:  Show the holder of the in Include a 30-day advance include these amounts of State that the insurance is If the insurance is for one 36. Insurance Company	more than one surance as: Do e notice cance finsurance cov covers "Razing	ng the raze of story, whole eputy Director lation clause verage: Bodil Operations ess only, stat	operation/contractor— unless the by detached from any other building or, Permit Division, 1100 4th St SV to Juliury, \$100,000; Aggregate, \$3 in the District of Columbia," If the e that, "Razing Operations at	Exca uilding you g on the sar /, Washing 00,000; and scope of the (a 38. 6	plan to raze is an accessory building 50 me or adjoining premises.  Ion, DC 20024  Property Damage, \$100,000.  Insurance is for blanket coverage.  Iddress of raze operation)  Expiration Date
Daniel Narh  1. You must submit a Certificate of Insquare 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 is if the insurance is for one 36. Insurance Company  Arch Specialty Insurance Co.	more than one surance as: Do e notice cance f insurance cov covers "Razing e specific addre	ng the raze of story, whole eputy Director lation clause verage: Bodil Operations ess only, stat 37, Polici	operation/contractor— unless the by detached from any other building or, Permit Division, 1100 4th St SV to Juliury, \$100,000; Aggregate, \$3 in the District of Columbia," If the e that, "Razing Operations at	Exca uilding you g on the sar /, Washing 00,000; and scope of the (a 38. 6	plan to raze is an accessory building 56 me or adjoining premises.  Ion, DC 20024  Property Damage, \$100,000.  Insurance is for blanket coverage.  Iddress of raze operation)  Expiration Date  /2019
Daniel Narh  1. You must submit a Certificate of Insquare feet or less in area and not 2. The Certificate should:  Show the holder of the in Include a 30-day advance Include these amounts of State that the insurance is for one	more than one surance as: Do e notice cance finsurance cov covers "Razing	ng the raze of story, whole eputy Director lation clause verage: Bodil Operations ess only, stat 37, Polici	operation/contractor— unless the by detached from any other building or, Permit Division, 1100 4th St SV to Juliury, \$100,000; Aggregate, \$3 in the District of Columbia," If the e that, "Razing Operations at	Exca uilding you g on the sar /, Washing 00,000; and scope of the (a 38. 6	plan to raze is an accessory building 50 me or adjoining premises.  Ion, DC 20024  Property Damage, \$100,000.  Insurance is for blanket coverage.  Iddress of raze operation)  Expiration Date



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

				Appli	cation Date: 7/11	/2018	
Address of Proposed Work	1. INFORM	The Party of the P	ROPE d 3. V	10000	40.00		
63 Q Street		sw	Six	VBIO	4a. Square 0656	4b. Suffix	5. Lat
	2. APPLIC	CANT INFO	MAT	ON	VELUE	III SALA	
6. Property Owner	7. Complete mailing ad	ddress (include	zip)	8, Pho	one Number(s)	9. Email	
63 Q ST SW LLC	711 Park Avenue, Falls Chu				868-1184	mike@202	2development.co
10. Agent/Contractor for Owner (if applicable)	(e) 11. Complete maring (	address (includ	e zip)	12. P	hone Number(s)	13. Email	
	3. TY	PE OF PER	MIT		MI CON		
14. Check all that apply:   Raze F			AN POST OF	Т			
	4 DESCRI	PTION OF	BUILD	ING	DE STORE STATE	1500	TO THESE
15. Description of Building to be Razed (e.	g., two story brick single fam	nily dwelling)			16	Existing Number	or of Stories of Bldg:
Townhome					2		
17. Use(s) of Property (specifically indicate	if any use is residential.)		18. Ma	iterials	of Building (brick.	wood, etc.)	
Vacant			Brick				
19. Bldg Length (ft) 20.	Bidg Width (ft)	21 Bi	21. Bidg Height (ft)			22. Bidg Volume (cu ft) (L x W x t	
17.5		20	20			12,250	
NEW TONE HAND THE	OFFI	CIAL USE O	NLY			Calling .	
17.5 35  CONDITIONS/COMMENTS:	OFFI	CIAL USE O	NLY			12,250	





## Department of Consumer and Regulatory Affairs CCCC Permit Operations Division 1100 4th Street Street



Washington DC 20024 Tel. (202) 442 - 4589 Fax (202) 442 - 4862 TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

Date:	July 24, 2018	_	Cap Id	R1800235
1100 40	listoric Preservati th Street S.W. , Rm agton, DC 20024	The state of the s		
		premises subject to razing op	perations	
this date	e with the Permit Ope property. We are here	tructure identified below, lo cretions Division. Our record by requesting confirmation	ds do not reveal any kind	of conservation holds
Address	5			
63 Q S	ST SW			
LOT: 00	040 SQUARE: 0656	TYPE:	v	ACANT: Yes
the clear	notify our office of the rance section below et S.W Washington	ne satisfactory completion of and returning this form to the D.C. 20024.	f your inspection of the pr he D.C.R.A. Permit Opera	emises, by filling out tions Division, 1100
		CLEARAN	CE	
		e researched our records con ding with the proposed razin		ified above and we
Date: _		Signature:		
Name o	f releasing HPO Off	ficial. (print)		





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

Permit Operations Division 1100 4th Street 5W Washington DC 20024 Tel. (202) 442 - 4589 Fax (202) 442 - 4862 TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9557

Date: July 24, 20	018	Cap ld:	R1800236
D.C. Historic Pres 1100 4th Street S.W	20 100 000 000 000 000 000 000 000 000 0		
Washington, DC 20	024		
Re: Request for clears	nce of premises subject to razing o	perations	
this date with the Peri	e the structure identified below, lo mit Operations Division. Our recon are hereby requesting confirmation	rds do not reveal any kind o	f conservation holds
Address:			
65 QSTSW			
LOT: 0041 SQUARE	E: 0656 TYPE:	V	ACANT: Yes
	ce of the satisfactory completion of below and returning this form to thington D.C. 20024.		THE GROUP OF RESIDENCE SHEET AND A SHEET AND A SHEET
	CLEARAN	ICE	
and the control of th	that we researched our records co- proceeding with the proposed raz		ified above and we
Date:	Signature:		



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

					Appli	ication Date: 7/1	1/2018	
	45.5	1. INFORM	ATION ON	ROP	ERTY		NAME OF TAXABLE	
1. Address of Proposed Work		A-010410-0010	2. Qui	d 3, V	Vard	4a. Square	4b. Suffix	5. Lot
65 Q Street			sw	Six		0656		0041
	501		CANT INFO				N. T. O.	E V
6. Property Owner		7. Complete mailing a	iddress (include	zip)	8. Ph	one Number(s)	9 Email	
65 Q ST SW LLC	711 Park Avenue, Falls Chur			A 22	703-	868-1184	mike@20	2development.com
10. Agent/Contractor for Owner (if appl	icable)	11. Complete mailing	address (includ	e zip)	12.P	hone Number(s)	13. Email	
		3.71	YPE OF PER	MIT		_		
14. Check all that apply:	ro Does	nic						
M Naz	ze Pell			TOWN				
15. Description of Building to be Razed	d (e.g., tv	and the second s	IPTION OF	BUILC	ING	110	5. Existing Numb	er of Stories of Bldg
Townhome		ARABAR HESTON BON				2	//	
17. Use(s) of Property (specifically indi	cate if a	ny use is residential.)		18, M	aterials	of Building (brici	k, wood, etc.)	
Vacant				Brick	ķ.			
19. Bldg Length (ft)	20. Bid	Width (ft)	21. Bi	dg Heig	ht (ft)		22. Bldg Volum	ne (cu ft) (L x W x H)
17.5	35		20	20			12,250	
		0FF1	CIAL USE	NLY			THE RE	ACT TO THE
CONDITIONS/COMMENTS:								

ACECO, LLC  26. Historic District?  27. CFA?  28. Raze Entire Building?  29. Building Condemned?  30a. Party Wall?	□Yes □Yes □Yes	⊠No ⊠No □No	33. Raze/Contractor 34. Property Owner	Signature	301-588-070	7
27. CFA? 28. Raze Entire Building? 29. Building Condemned?	□ Yes □ Yes □ Yes	⊠ No □ No	ble	K	li	
28. Raze Entire Building? 29. Building Condemned?	⊠Yes □Yes	□No	34. Property Owner	-	1e	
29. Building Condemned?	□Yes		34, Property Owner	Cinciplina		F
		EII No		e-griature		
30a. Party Wall?						
	[K] Yes	□No	Notification Form 30c. Any raze perr	which s	afeguards dur on for a building(	will need to sign the ing construction s) involving party walls must be rty wall(s) will be protected.
31, Building Vacant?	<b>⊠</b> Yes	□No	Building must be va	ant before	Raze Permit Issu	ance,
32. Public Space Vault?	□Yes	⊠ No			Official Use O	
			Fee	В		Date
33. Plumber's Name		34, Plumbi	er's License Number		35. Raze Metho	od (ball, buildozer, by hand, etc.
Daniel Narh		1239			Excavator w/	
. You must submit a Certificate of Insu square feet or less in area and not more than the Certificate should:  Show the holder of the Insu Include a 30-day advance or Include these amounts of in State that the insurance co	ore than one trance as: Do notice cancel isurance cov vers "Razing	story, wholly eputy Directo lation clause erage: Bodil Operations	r, Permit Division, 1100 4t c, Permit Division, 1100 4t division, \$100,000; Aggreg in the District of Columbia,	building or h St SW, V ate, \$300,0 if the sco	the same or adjo Vashington, DC 2 200; and Property pe of the insurance	oining premises. 0024 Damage, \$100,000. ce is for blanket coverage.
36, Insurance Company		37. Polic	y or Certificate No.		38. Expiration	f raze operation)
Arch Specialty Insurance Co.	-	57080509			6/30/2019	
39. Asbestos in Building? If yes, indicate location:	Yes			C	official Use Or	aly
			Fee	Ву		Date



0656 0042 09/27/2004

65 and 67 Q Street SW



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



1100 4th Street SW

Washington DC 20024

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

TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9567

n Office 650 remises subject to razing		
2650		
remises subject to razing		
remises subject to razing		
SCHOOL STORES STORES SOUTH	operations	
rations Division. Our rec	ords do not reveal any kind o	of conservation holds
TYPE:	· ·	ACANT: Yes
and returning this form to		
CLEARA	INCE	
		ified above and we
_ Signature:		4-0
icial. (print)		
	TYPE: e satisfactory completion and returning this form to D C 20024.  CLEARA researched our records of	c satisfactory completion of your inspection of the print returning this form to the D.C.R.A. Permit Opera D.C. 20024.  CLEARANCE  researched our records concerning the structure identifying with the proposed razing of said structure.  Signature:



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 13					Appi	ication Date: 7/1	1/2018	
		1. INFORMAT	ION ON F	ROPE	ERTY			
Address of Proposed Work			2 Qua	d 3 V	Vard	4a. Square	4b. Suffix	5. Lot
67 O Street			sw	Six		0656		0042
		2. APPLICA	Market Street, Square Street, Square,	Name and Address of the Owner, where				and the same
5. Property Owner	7.	Complete mailing address	ess (include	zip)	8. Ph	ione Number(s)	9. Email	
67 Q ST SW LLC	7	11 Park Avenue, Falls	Church, V	A 220	703	868-1184	mike@202	2development.co
10. Agent/Contractor for Owner (if applica	able) 1	Complete mailing add	iress (includ	e zip)	12. P	hone Number(s)	13. Email	
		3. TYPE	OF PER	MIT	_	70000		Ula Hora
14. Check all that apply:	Permit		0.000					
	10.0	4. DESCRIPT	TON OF	UILE	ING		4772	TANKEN II
15. Description of Building to be Razed (	e.g., two	story brick single family	dwelling)		-	16	Existing Number	or of Stories of Bidg:
Townhome						2		
17. Use(s) of Property (specifically indica	te if any	use is residential.)		18. M	aterials	s of Building (brick	wood, etc.)	
Vacant				Brick				
19. Bidg Length (ft) 2	O. Bldg V	Midth (ft)	21. Bis	21. Bidg Height (ft)			22. Bldg Volume (cu ft) (L x W x H	
17.5	5		20	20			12,250	
		OFFICI	AL USE O	NLY				Resident.
CONDITIONS/COMMENTS:								

23. Raze Contractor's Name			tor's Address (including z		25. Contracto	r's Phone
ACECO, LLC		901 Stode	lard Pl., Silver Spring, I	MD 20910	301-588-07	07
26. Historic District?	□Yes	⊠No	33. Raze/Contract	er Signature	1.	
27. CFA?	□Yes	⊠ No	Tal	in	le	_
28. Raze Entire Building?	⊠Yes	□No	34. Property Owne	r Signature		
29. Building Condemned?	□Yes	⊠ No				
30a. Party Wall?	⊠Yes	□No	Notification For 30c. Any raze pe	m which a	afeguards du	) will need to sign the uring construction g(s) involving party walls must be larty wall(s) will be protected.
31. Building Vacant?	⊠Yes	□No	Building must be v	THE PARTY OF THE PARTY.	A CONTRACTOR OF THE PARTY OF TH	The state of the s
32. Public Space Vault?	□Yes	⊠ No	New York		Official Use	Only
	1 531 00-00	22/20/2007	Fee	By		Date
33. Plumber's Name		34, Plumb	er's License Number		35. Raze Met	hod (ball, buildozer, by hand, etc.)
Daniel Narh		1239			Excavator w	
You must submit a Certificate of Ins square feet or less in area and not of the certificate should:  Show the holder of the insert include a 30-day advance include these amounts of State that the insurance of the insurance is for one	surance as: Do notice cancel insurance cov overs "Razing	eputy Directo lation clause verage: Bodil Operations	or, Permit Division, 1100 or, but, Permit Division, 1100 or, but, y Injury, \$100,000; Aggre in the District of Columbi	er building on 4th St SW, V rgate, \$300,0 a," If the sco	the same or ac Vashington, DC 200; and Proper pe of the insuran	djoining premises.  20024  ty Damage, \$100,000.  nce is for blanket coverage.
36, Insurance Company		37. Polic	y or Certificate No.		38. Expirat	of raze operation)
Arch Specialty Insurance Co.		57080509	Ben and the second of the second		6/30/2019	TOTAL CONTRACTOR OF THE PARTY O
39. Asbestos in Bullding? If yes, indicate location:	Yes		4,0300	0	official Use C	Only
			Fee	Ву		Date





# Government of the District of Columbia Department of Consumer and Regulatory Affairs Permit Operations Division 1100 4th Street SW



Washington DC 20024 Tel. (202) 442 - 4589 Fax (202) 442 - 4862 TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 - 9567

Date:	July 24, 2018	Cap to	R1800237
D.C.	Historic Preservation Office		
1100 4	4th Street S.W., Rm E650		
Wash	ington, DC 20024		
Re: Re	equest for clearance of premises subject to razi	ng operations	
this da	plication to raze the structure identified below the with the Permit Operations Division. Our of s property. We are hereby requesting confirmation.	records do not reveal any kin	d of conservation holds
Addres	SS.		
69 Q	ST SW		
LOT: 0	0043 SQUARE: 0656 TYPE:		VACANT: Yes
the cle	notify our office of the satisfactory completi carance section below and returning this form reet S.W., Washington D.C., 20024.		
	CLEAN	RANCE	
	s to inform you that we researched our record to objections to proceeding with the proposed		entified above and we
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.

105.1.7.1.2, 105.1.7.2, and Se					Appli	cation Date:	/11/2	2018	
ERS FRANCE OF		1. INFORMAT	ION ON P	ROPE	RTY	×		9-9-1	
1. Address of Proposed Work			2. Quad	3. W	Vard	4a. Square	_ 4	4b. Suffix	5. Lot
69 Q Street			SW	Six		0656			0043
		2. APPLICA	NT INFOR	MAT	ON				- Valor
6. Property Owner		7. Complete mailing addre	ess (include i	zip)	8. Ph	one Number(s	)	9. Email	
O ST SW LLC		711 Park Avenue, Falls	Church, V	rch, VA 221 703-868-1184			mike@202development.co		
10. Agent/Contractor for Owner	(if applicable)	11. Complete mailing add	ress (include	zip)	12. P	hone Number	(s)	13. Email	
		2 7000	OF PERI	ALT	_				
15. Description of Building to be Townhome  17. Use(s) of Property (specific Vacant  19. Bidg Length (ft)	ally indicate if a	4. DESCRIPT wo story brick single family	dwelling)	18. M. Brick	utorials	s of Building (b	2 rick, w	ood, etc.)	e (cu ft) (L x W x H)
1000000		OFFICI	AL USE O	NLY	The co	THE STATE OF			and the last
CONDITIONS/COMMENTS.									

23. Raze Contractor's Name			TION A. RAZE PERMIT			THE PART OF THE PA		
100 100 100 100 100 100 100 100 100 100			24. Contractor's Address (including zip code)			25. Contractor's Phone		
ACECO, LLC 901 Sto			lard PL, Silver Spring, MD 20	910	301-588-0707			
26. Historic District?	□ Yes	⊠No	o 33. Raza Contractor Signature					
27. CFA?	No Blike			le				
28. Raze Entire Building? ☑ Yes ☐ N			34. Property Owner Signature					
29. Building Condemned?	⊠No	Z No						
30a. Party Wall?	No	Notification Form which safeg			ty owner(s) will need to sign the eguards during construction for a building(s) involving party walls must be			
	-		include 2 copies of a pla	n that	show how the	e party wall(s) will be protected.		
31. Building Vacant?	▼Yes	□ No	Building must be vacent	before	Raze Permit	issuance.		
32. Public Space Vault?	□Yes	I No			Official Us			
		Fee By			Date :			
33. Plumber's Name	34. Plumb	er's License Number	_	35. Raze Method (ball, bulldozer, by hand, et-				
Daniel Narh		1239	Excavator w/			r w/ thumb		
<ul> <li>Include a 30-day advance</li> <li>Include these amounts of</li> <li>State that the insurance or</li> </ul>	nore than one surance as: D notice cance insurance co overs "Razing	e story, wholi eputy Directo flation clause verage: Bodil g Operations	y detached from any other build or, Permit Division, 1100 4th St.	SW, W	the same or lashington, D	adjoining premises. OC 20024 perty Damage, \$100,000.		
A CONTRACTOR OF THE PARTY OF TH	3000 magnet	especiences i	entre de la constitución de la c			ss of raze operation)		
36. Insurance Company		1	cy or Certificate No.		38. Expiration Date			
Arch Specialty Insurance Co. 5708050			6/30/2019					
39. Asbestos in Building? If yes, indicate location:	□Yes	□ No	Official Use Only			Only		
			Fee	By	NA PERSON	Date		
					1 000	TVN C S		



0656 0043 09/27/2004

69 Q Street SW



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



Date: July 23, 2	018	Cap ld:	R1800229
D.C. Historic Pres 1100 4th Street S.W Washington, DC 20	., Rm E650		
Re: Request for clear	ance of premises subject to razing op	erations	
this date with the Per	re the structure identified below, lo mit Operations Division. Our recor are hereby requesting confirmation	ds do not reveal any kind o	of conservation holds
Address: 1535 HALF ST SW			
LOT: 0035 SQUAR	E: 0656 TYPE:	V	ACANT: Yes
the clearance section	fice of the satisfactory completion of below and returning this form to the shington D.C. 20024.	of your inspection of the pr the D.C.R.A. Permit Opera	emises, by filling ou tions Division, 1100
	CLEARAN	ICE	
This is to inform you have no objections to	u that we researched our records cor o proceeding with the proposed razi	ncerning the structure iden ing of said structure.	tified above and we
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 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. 7/11/2018 Application Date: 1. INFORMATION ON PROPERTY 1. Address of Proposed Work 2. Quad 3. Ward 4a. Square 4b. Suffix 5. Lot SW Six 0656 1535 Half Street, SW 0035 2. APPLICANT INFORMATION 6. Property Owner 7. Complete mailing address (include zip) B. Phone Number(s) 9. Email Barbara Schauer 1504 Vermont Avenue, NW, Washing 202-255-4538 10. Agent/Contractor for Owner (if applicable) 11. Complete mailing address (include zip) 12. Phone Number(s) 13. Email 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 building 17. Use(s) of Property (specifically indicate if any use is residential.) 18. Materials of Building (brick, wood, etc.) Vacant Brick 20. Bldg Width (ft) 22. Bldg Valume (cu ft) (L x W x H) 19. Bldg Length (ft) 21. Bldg Height (ft) 19 65 20 24,700 OFFICIAL USE ONLY CONDITIONS/ COMMENTS

23. Raze Contractor's Name		24. Contrac	tor's Address (including zip code)	25. Contractor's Phone					
ACECO, LLC		901 Stodd	lard PL, Silver Spring, MD 20910	301-588-0707					
26. Historic District?	26. Historic District? ☐Yes ⊠No			33. Raza Contractor Signature					
27. CFA?	□Yes	I No	Blike	le					
28. Raze Entire Building?	☑Yes	□ No	34. Property Owner Signature						
29. Building Condemned?	□Yes	⊠No	⊠ No						
30a. Party Wall?	⊠ Yes	No No	30b. If yes, edjacent pro Notification Form which 30c. Any raze permit applica include 2 copies of a plan tha	ring construction (s) involving party walks must be					
31. Building Vacant?	<b>⊠</b> Yes	□ No	Building must be vacant befor						
32. Public Space Vault?	□Yes	⊠ No	V=10725 - 1/18	Official Use Only					
			Fee	7	Date				
					COLUMN TO SERVICE AND ADDRESS OF THE PARTY O				
33. Plumber's Name		34. Plumbe	er's License Number	35. Raze Meth	od (bell, buildozer, by hand, etc.				
Daniel Narh		1239		Excavator w	thumb				
Daniel Narh  You must submit a Certificate of in square feet or less in area and not. The Certificate should:  Show the holder of the ir include a 30-day advance include these amounts of State that the insurance	more than one esurance as: D e notice cance f insurance co- covers "Razing	ing the raze of a story, wholly eputy Directo dation clause verage: Bodil operations	operation/contractor- unless the building of the detached from any other building or Permit Division, 1100 4th St SW,	Excavator warding you plan to re in the same or adj Washington, DC 2 ,000; and Propertope of the insurance	thumb size is an accessory building 50 oining premises. 20024 y Damage, \$100,000, ce is for blanket coverage.				
You must submit a Certificate of in square feet or less in area and not	more than one esurance as: D e notice cance f insurance co- covers "Razing	ing the raze of a story, wholly eputy Directo dation clause verage: Bodil g Operations ess only, stab	operation/contractor- unless the builty detached from any other building our, Permit Division, 1100 4th St SW, i. y Injury, \$100,000; Aggregate, \$300 in the District of Columbia," if the so e that, "Razing Operations at	Excavator walding you plan to re in the same or adjusted with the same of the insurance (address of	ize is an accessory building 50 oning premises. 20024 y Damage, \$100,000, ce is for blanket coverage.				
Daniel Narh  You must submit a Certificate of In square feet or less in area and not. The Certificate should:  Show the holder of the in Include a 30-day advance include these amounts or State that the insurance If the insurance is for one	more than one esurance as: D e notice cance f insurance co- covers "Razing	ing the raze of a story, wholly eputy Director (lation clause verage: Bodil (Operations ess only, state 37. Police	operation/contractor—unless the builty detached from any other building our, Permit Division, 1100 4th St SW, and the District of Columbia, "if the sole that, "Razing Operations at my or Certificate No.	Excavator walding you plan to re in the same or adj Washington, DC 2,000; and Propertope of the insuran (address of 38. Expiration)	thumb size is an accessory building 50 oining premises. 20024 y Damage, \$100,000. ce is for blanket coverage.				
Daniel Narh  You must submit a Certificate of in square feet or less in area and not. The Certificate should:  Show the holder of the in include a 30-day advance include these amounts or State that the insurance if the insurance is for one 36. Insurance Company  Arch Specialty Insurance Co.	more than on surance as: D e notice cance f insurance co- covers "Razing e specific addre	ing the raze of a story, wholly eputy Directo station clause verage. Bodil operations assonly, stations of the story, stations of the st	operation/contractor—unless the build of detached from any other building of the property of t	Excavator walding you plan to re in the same or adjusted with the same	thumb size is an accessory building 50 oning premises. 20024 y Damage, \$100,000, ce is for blanket coverage. If naze operation) on Date				
2. The Certificate should:  Show the holder of the ir Include a 30-day advance Include these amounts of State that the insurance	more than one esurance as: D e notice cance f insurance co- covers "Razing	ing the raze of a story, wholly eputy Directo station clause verage. Bodil operations assonly, stations of the story, stations of the st	operation/contractor—unless the build of detached from any other building of the property of t	Excavator walding you plan to re in the same or adj Washington, DC 2,000; and Propertope of the insuran (address of 38. Expiration)	thumb size is an accessory building 50 onling premises. 20024 y Damage, \$100,000, ce is for blanket coverage. If naze operation) on Date				



0656 0035 09/27/2004

1535 Half Street SW



5127 Nannie Helen Burroughs Avenue 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: July 24, 20	18	Cap Id: R1800239
D.C. Historic Preso	ervation Office	BE
1100 4th Street S.W.	, Rm E650	DE.
Washington, DC 200	24	KA
Re: Request for cleara	nce of premises subject to razing operations	BY:
this date with the Perr	the structure identified below, located in nit Operations Division. Our records do no are hereby requesting confirmation from yo	ot reveal any kind of conservation holds
Address:		
4656 LIVINGSTON	RD SE	
LOT: 0023 SQUARE	: 6242 TYPE: Other (Specify)	VACANT: Yes
Please notify our offic the clearance section 4th Street S.W. Wash	ce of the satisfactory completion of your in below and returning this form to the D.C. sington D.C. 20024	nspection of the premises, by filling ou R.A. Permit Operations Division, 1100
	CLEARANCE	
	that we researched our records concerning proceeding with the proposed razing of sa	
Date:	Signature:	





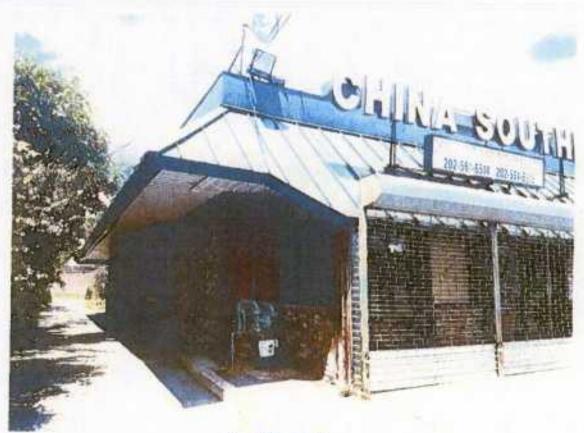
#### **APPLICATION FOR RAZE PERMIT**

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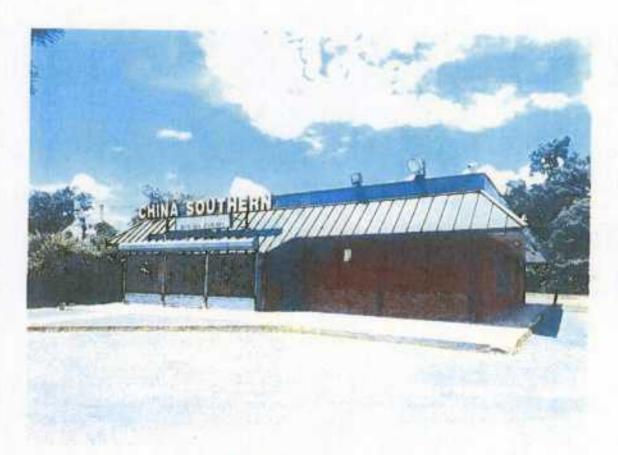
Applicable code sections are in the 2013 DCMR 12 Building Code Supplement Chapter 16 105 1 7 1

R1800239				Аррії	cation Date:	7/2	23/18		
	1. INFORMATIO	ON ON P	ROPE	HTY		- 111			
Address of Proposed Work		2. Quad	3. W	Vard	4a Square	42	s. Suffix	5 Lot	
4656 Livingston Road		SE	Eig	ht	6242			23 & 22	
I - November 1 - N	2. APPLICAN	T INFOR	MATI	MON			-		
5. Property Owner					one Number(s)		9: Email		
Southern Avenue Owner, LLC	701 Lamont St NW suits	e 11 Was	hing	202-	588-0622		eugene@	dantespartners.	
10. Agent/Contractor for Owner (if applicable)	11, Complete mailing addre	ss (include	z/p)	12. P	hone Number(s	i)	13 Email		
CDKM Consulting, LLC	1331 H St NW suite 975	Washing	ton	202-	332-0090		kim@cdk	mcansulting.co	
	3. TYPE	OF PERI	ATT		1 - 1 - 1				
14. Check all that apply:		STATISTICAL AND ADDRESS OF THE PARTY OF THE							
Ej Raze Pen			-	*****					
15. Description of Building to be Razed (e.g., ty	4. DESCRIPTION STORY BY A		UILD	ING		16.50	a Sana Manada	ad Disease at Disease	
Single story commercial brick building		-canage	_			10. Ex	surig Number	of Stories of Bldg	
17. Use(s) of Property (specifically indicate if ar		-					32/62		
Chinese restaurant and takeout	ny tanà is residerata.)	1/2	5,300	nenais	of Building (br	ck, woo	od. etc.)		
			Brick						
	Water (ft)	21. Bldg	1. Bidg Height (ft)			22	22. Bldg Volume (cu ft) (L x W x H		
50		12	12			360	36000		
	OFFICIAL	USE ON	(LY						
CONDITIONS/ COMMENTS:	OFFICIAL	1	ILY			360	000		

The second second		and the local division in which the	CTION A RAZE PERMI	Contract of the Contract of th	and the second		
23. Raze Contractor's Name	24. Contractor's Address (including zip code)			25. Contractor's Phone			
TBD		TBD			TBD		
26. Historic District?	□Yes	No 33. Raze Contractor Signature					
27. CFA?	s⊠ No						
28. Raze Entire Building?	No 34. Property Owner Signature						
29. Building Condemned?	No.			· onen			
30a. Party Wall?	⊠ No	Notification Form which safegu			guards during construction or a building(s) involving party walls must b		
31. Building Vacant?	⊠ Yes	No	Building must be vaca	nt before	Raze Permit is	isuance.	
32. Public Space Vault?	ПҮе	No No			Official Use		
			Fee	8	By Date		
33. Plumber's Name		34. Plumb	ser's License Number 35. Raze Method (ball, buildo:			thod (ball, buildozer, by hand, etc.	
TBD		TBD			TBD		
<ul> <li>Include a 30-day advance</li> <li>Include these amounts of</li> <li>State that the insurance of</li> </ul>	nore than on surance as. D notice cance insurance co overs "Razing	e story, wholi eputy Directi slation clause verage: Bodi g Operations	ly detached from any other but or, Fermit Division, 1100 4th 5	e, \$300, the sco	n the same or a Nashington, DC 000; and Propo pe of the insura	20024 crty Damage, \$100,000.	
36. Insurance Company	37. Policy or Certificate No.			38, Expiration Date			
			THE STATE OF THE PARTY OF THE P			TBD	
39. Asbestos in Building? If yes, indicate location.	⊠Yes	□ No		(	Official Use Only		
if yes, indicate location.		ci.	Fee	By		Date	



Left side



FROUT