

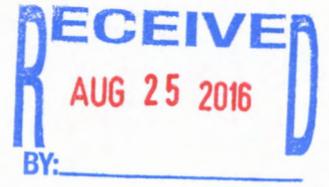
Application Date	STATUS	ID	Address	Description of Work	DCRA NOTICE DATE	ANC EXPIRATION DATE	PER SUB TYPE	SSL	Ward	ANC	Zoning	Applicant	Owner Name
8/8/2016	Application Accepted	R1600212	2100 L ST NW, WASHINGTON, DC 20037	RAZE A 5 STORY CONCRETE OFFICE BUILDING	August 29, 2016	October 12, 2016	Raze	0073 0858	2	2A	C-3-C	GIUSEPPE	HUMANE SOCIETY OF THE UNITED STATES
8/5/2016	Application Accepted	R1600208	4840 QUEBEC ST NW, WASHINGTON, DC 20016	2 story frame single family dwelling with lower level	August 29, 2016	October 12, 2016	Raze	1507 0019	3	3D	R-1-A	CAS	STEPHEN E WIGGINS
8/16/2016	Application Accepted	R1600215	55 OBSERVATORY CIR NW, WASHINGTON, DC 20008	RAZE OF DETACHED GARAGE 21FTX11FTX12FT.	August 29, 2016	October 12, 2016	Raze	1937 0005	3	3C	NOPD/R-1-B		WAYNE G VROMAN
7/29/2016	Application Accepted	R1600202	1250 TAYLOR ST NW, WASHINGTON, DC 20011	RAZE A ONE STORY CONCRETE MASONRY STRUCTURE WITH A BASEMENT	August 29, 2016	October 12, 2016	Raze	2908 0835	4	4C	C-M-1	DANIEL	DANIEL SOKOLOWSKI
8/19/2016	Application Accepted	R1600217	5241 BROAD BRANCH RD NW, WASHINGTON, DC 20015	Raze a Former Atomic Physics Observatory	August 29, 2016	October 12, 2016	Raze	2288 0813	4	3G	R-1-A		CARNEGIE INSTITUTION OF WASHINGTON
8/1/2016	Application Accepted	R1600207	3111 10TH ST NE, WASHINGTON, DC 20017	RAZE A METAL SHED	August 29, 2016	October 12, 2016	Raze	3877 0806	5	5B	R-2	STAFFONE	THELMA W ANDERSON
8/12/2016	Application Accepted	R1600214	8 P ST NE, WASHINGTON, DC 20002	RAZE A 1 STORY BRICK STRUCTURE	August 29, 2016	October 12, 2016	Raze	0668 0014	5	5E	C-3-C	DIXON	MEHDI YOUSEFI
8/1/2016	Application Accepted	R1600204	1433 PENNSYLVANIA AVE SE, WASHINGTON, DC 20003	RAZE TWO STORY BRICK COMMERCIAL BUILDING	August 29, 2016	October 12, 2016	Raze	1065 0820	6	6B	C-2-A	LOONEY	J RIVER 1433 PENNSYLVANIA AVENUE LLC
8/1/2016	Application Accepted	R1600205	1401 PENNSYLVANIA AVE SE, WASHINGTON, DC 20003	RAZE 1 STORY PIZZA RESTAURANT	August 29, 2016	October 12, 2016	Raze	1065 0142	6	6B	C-2-A	LOONEY	AMERICA SECURITY & TRUST
8/10/2016	Application Accepted	R1600213	680 I ST SW, WASHINGTON, DC 20024	TO RAZE A CHURCH SINGLE STORY ABOVE GRADE AND ONE PARTIAL BASEMENT	August 29, 2016	October 12, 2016	Raze	0472 0127	6	6D	R-5-B	MEILSSA DIAZ	RIVERSIDE BAPTIST CHURCH
8/26/2016	Application Accepted	R1600197	112 49TH ST SE, WASHINGTON, DC 20019	Demolition of existing 1 story single family dwelling with stucco material	August 29, 2016	October 12, 2016	Raze	5332 0802	7	7E		WILLIAM PHILPOT	William Philpot
8/5/2016	Application Accepted	R1600210	3605 MINNESOTA AVE SE, WASHINGTON, DC 20019	RAZE A THREE STORY BRICK APARTMENT BUILDING-9 UNITS	August 29, 2016	October 12, 2016	Raze	5410 0800	7	7F	R-5-A	FONTANA	GREENWAY APARTMENTS LP
8/5/2016	Application Accepted	R1600211	3615 MINNESOTA AVE SE, WASHINGTON, DC 20019	RAZE A 3 STORY BRICK APARTMENT BUILDING- 9 UNITS	August 29, 2016	October 12, 2016	Raze	5410 0800	7	7F	R-5-A	FONTANA	GREENWAY APARTMENTS LP
7/29/2016	Application Accepted	R1600203	2701 ROBINSON PL SE, WASHINGTON, DC 20020	RAZE THREE ABANDON APARTMENT BUILDINGS - 2701,2703 AND 2705 ROBINSON PLACE SE	August 29, 2016	October 12, 2016	Raze	5875 0038	8	8E		SHUTTLE CONSTR	PARKWAY OVERLOOK LP



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 08, 2016

Cap Id: R1600212

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:
2100 L ST NW

LOT: **0858** SQUARE: **0073** 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) _____

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
APPLICATION FOR
RAZE PERMIT AND/OR SUPPLEMENTAL RAZING OPERATIONS PERMIT**

Please type or print legibly in ink. Provide *detailed information*. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whitening out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature. Applicable code sections are in the 2003 DC Building Code Supplement Chapter I § 107.2.4 107.2.10 (5), and 110.1.

Application Date: 8/1/2016

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
2100 L Street NW, Washington, DC 20037	NW	2A	73		858

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Stevens Investors, LLC	601 13th St. NW, Suite 300N Washington, DC 20005	202-853-0417 202-674-8613	dpettway@akridge.com
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
John G. Giuseppe N/A	3900 Serrano Ave NW N/A PAIR FAX VA	703 9266733 N/A	Ramco dc CAOI.com N/A

3. TYPE OF PERMIT

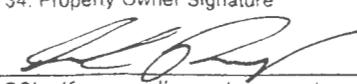
14. Check all that apply: Raze Permit Supplemental Razing Operations Permit

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:	
5-story concrete office building		5	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
Office		Concrete, precast, glass	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
57	75	70.3	300,532.50

OFFICIAL USE ONLY

SECTION A. RAZE PERMIT

23. Raze Contractor's Name TBO		24. Contractor's Address (including zip code) TBO		25. Contractor's Phone TBO	
26. Historic District? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		27. Fine Arts District? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		33. Raze Contractor Signature N/A	
28. Raze Entire Building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		29. Building Condemned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
30a. Party Wall? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		31. Building Vacant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		34. Property Owner Signature 	
32. Public Space Vault? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		30b. If yes, adjacent property owner signature is required. _____		Building must be vacant before Supplemental Raze Operations Permit issuance.	
Official Use Only					
		Fee		By	
				Date	

SECTION B. SUPPLEMENTAL RAZE OPERATIONS PERMIT

35 Raze Contractor's Name TBO		36 Contractor's Address (including zip code) TBO		37. Contractor's Phone TBO	
38 Plumber's Name TBO		39. Plumber's License Number TBO		40. Raze Method (ball, bulldozer, by hand, etc.) TBO	

1. You must submit a Certificate of Insurance covering the raze operation/contractor- unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story wholly detached from any other building on the same or adjoining premises.

2. The Certificate should:

- Show the holder of the insurance as: Deputy Director, Permit Division, 941 North Capitol St NE, Washington, DC 20002
- Include a 30-day advance notice cancellation clause.
- Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.
- State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.
- If the insurance is for one specific address only state that: "Razing Operations at _____
(address of raze operation)"

41 Insurance Company		42 Policy or Certificate No		43 Expiration Date	
44. Historic District? <input type="checkbox"/> Yes <input type="checkbox"/> No		45. Fine Arts District? <input type="checkbox"/> Yes <input type="checkbox"/> No		52 Raze Contractor Signature	
46. Raze Entire Building? <input type="checkbox"/> Yes <input type="checkbox"/> No		47. Building Condemned? <input type="checkbox"/> Yes <input type="checkbox"/> No			
48a. Party Wall? <input type="checkbox"/> Yes <input type="checkbox"/> No		49. Building Vacant? <input type="checkbox"/> Yes <input type="checkbox"/> No		53 Property Owner Signature	
48b. If you answer yes, adjacent property owner must sign here. _____		50. Public Space Vault? <input type="checkbox"/> Yes <input type="checkbox"/> No		47c. Any raze permit application for a building(s) involving party walls must include 2 copies of a plan that shows how the party wall(s) will be protected.	
51. Asbestos in Building? If yes, indicate location:		51. Asbestos in Building? <input type="checkbox"/> Yes <input type="checkbox"/> No		Official Use Only	
		Fee		By	
				Date	

2100 L ST NW
NE Elev 21st + 4



2100 L ST NW
EAST Side. @ 21st ST

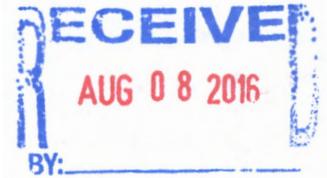




Government of the District of Columbia
Department of Consumer and Regulatory Affairs

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 05, 2016

Cap Id: R1600208

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:
4840 QUEBEC ST NW

LOT: 0019 SQUARE: 1507 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, whitening out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

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

R/16 00 208

Application Date: 6/21/2016

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
4840 Quebec Street	NW	Three	1507		19

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
4840 Quebec St LLC	7929 Sandhollow Drive Potomac, MD 20854	301-943-5996	barrowood@clivedengroup
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
Phillip Long, CAS Engineering	1001 Conn Ave, NW, #401, 20036	202-393-7200	dcpermits@casengineering

3. TYPE OF PERMIT

14. Check all that apply:
 Raze Permit

4. DESCRIPTION OF BUILDING

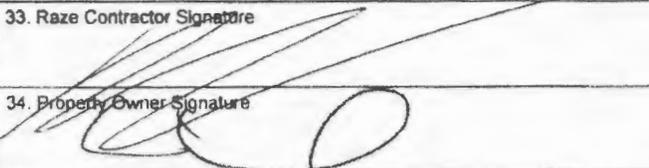
15. Description of Building to be Razed (e.g., two story brick single family dwelling)		16. Existing Number of Stories of Bldg:	
2-story frame single-family dwelling with lower level		2	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
Single-family residential		Frame/wood/brick	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
32.73	47.07	25.0	38,515

OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

SECTION A. RAZE PERMIT

23. Raze Contractor's Name Mauck Zantzinger & Associates	24. Contractor's Address (including zip code) 5141 MacArthur Blvd, NW	25. Contractor's Phone 202-437-2752
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26. Historic District? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature 
27. CFA? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
28. Raze Entire Building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

29. Building Condemned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	34. Property Owner Signature 
30a. Party Wall? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	30b. If yes, adjacent property owner signature is required.

31. Building Vacant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected.
32. Public Space Vault? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Building must be vacant before Raze Permit issuance.
Official Use Only	
Fee	By
	Date

33. Plumber's Name MIKE JOHNSON / PIPE DETAILS	34. Plumber's License Number # 1202	35. Raze Method (ball, bulldozer, by hand, etc.) EXCAVATE
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1. You must submit a Certificate of Insurance covering the raze operation/contractor— unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story, wholly detached from any other building on the same or adjoining premises.

2. The Certificate should:

- Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024
- Include a 30-day advance notice cancellation clause
- Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.
- State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the Insurance is for blanket coverage.
- If the insurance is for one specific address only, state that, "Razing Operations at _____ (address of raze operation)"

36. Insurance Company SELECTIVE WAY INS.	37. Policy or Certificate No. 51980873	38. Expiration Date 01/01/2017
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39. Asbestos in Building? If yes, indicate location: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Official Use Only	
	Fee	By
		Date







1507 0019 10/04/2004



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 16, 2016

Cap Id: R1600215

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:
55 OBSERVATORY CIR NW

LOT: 0005 SQUARE: 1937 TYPE: Other (Specify) VACANT:

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

CLEARANCE

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

Date: _____ Signature: _____

Name of releasing HPO Official. (print) _____



APPLICATION FOR RAZE PERMIT

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

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

R 1600215

Application Date: _____

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
55 OBSERVATORY Circle N.W		3	1937		5

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
WAYNE ROMAN	55 OBSERVATORY Circle N.W WASH DC 20008	202-945-5891	WROMAN@URBAN.ORG
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:
<input checked="" type="checkbox"/> Raze Permit

4. DESCRIPTION OF BUILDING

15. Description of Building to be Razed (e.g., two story brick single family dwelling)		16. Existing Number of Stories of Bldg:	
1 STORY SINGLE CAR GARAGE		1	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
Single Family Home		Brick / Wood	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
21 21'	11 11'	12 12'	231 1111

OFFICIAL USE ONLY

CONDITIONS/COMMENTS

SECTION A. RAZE PERMIT

23. Raze Contractor's Name <i>Brown Mertz Homes</i>		24. Contractor's Address (including zip code) <i>14501 Caledonia Rd Rockville MD 20857</i>	25. Contractor's Phone <i>301-529-6070</i>						
26. Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature <i>Brown Mertz</i>							
27. CFA?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	34. Property Owner Signature <i>Wayne Vroman</i>							
28. Raze Entire Building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	30b. If yes, adjacent property owner signature is required.							
29. Building Condemned?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected.							
30a. Party Wall?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Building must be vacant before Raze Permit issuance.							
31. Building Vacant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p align="center">Official Use Only</p> <table border="1"> <tr> <td>Fee</td> <td>By</td> <td>Date</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>		Fee	By	Date			
Fee	By			Date					
32. Public Space Vault?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								

33. Plumber's Name <i>[Signature]</i>	34. Plumber's License Number <i>[Signature]</i>	35. Raze Method (ball, bulldozer, by hand, etc.) <i>By Hand</i>
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1. You must submit a Certificate of Insurance covering the raze operation/contractor - unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story, wholly detached from any other building on the same or adjoining premises.

2. The Certificate should:

- Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024
- Include a 30-day advance notice cancellation clause.
- Include these amounts of insurance coverage: Bodily Injury: \$100,000, Aggregate: \$300,000, and Property Damage: \$100,000
- State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.
- If the insurance is for one specific address only, state that, "Razing Operations at _____ (address of raze operation)"

36. Insurance Company <i>[Signature]</i>	37. Policy or Certificate No. <i>[Signature]</i>	38. Expiration Date <i>[Signature]</i>
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39. Asbestos in Building? If yes, indicate location:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<p align="center">Official Use Only</p> <table border="1"> <tr> <td>Fee</td> <td>By</td> <td>Date</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>			Fee	By	Date			
Fee	By	Date								







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 29, 2016

Cap Id: R1600202

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:
1250 TAYLOR ST NW

LOT: **0835** SQUARE: **2908** 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 FOR RAZE PERMIT

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

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

R1600 202

Application Date: July 28, 2016

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
1250 Taylor Street	NW	Four	2908		0835,0840

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Daniel Sokolowski	14722 Carson Dr, Burtonsville, MD 20814	301-873-6720	danny@precisioncabinets.com
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
1250 Taylor St, LLC	1501 11th St NW, Washington, DC 20004	202-670-1360	David@lock7.com

3. TYPE OF PERMIT

14. Check all that apply:
 Raze Permit

4. DESCRIPTION OF BUILDING

15. Description of Building to be Razed (e.g., two story brick single family dwelling)			16. Existing Number of Stories of Bldg:
One story concrete and masonry structure with basement.			1
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
First floor, office use. Basement level, casework fabrication.		Concrete and masonry	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
125	86	10	107,500

OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

SECTION A RAZE PERMIT

23. Raze Contractor's Name David E. Gorman		24. Contractor's Address (including zip code) 1501 11th St NW, Washington, DC 20001		25. Contractor's Phone 202-670-1360	
26. Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature			
27. CFA?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
28. Raze Entire Building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	34. Property Owner Signature <i>Donald E. Kinser</i>			
29. Building Condemned?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
30a. Party Wall?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	30b. If yes, adjacent property owner signature is required. <i>Donald E. Kinser</i>			
		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.			
31. Building Vacant?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Building must be vacant before Raze Permit issuance.			
32. Public Space Vault?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Official Use Only			
		Fee	By	Date	

33. Plumber's Name <i>HCC / RICHARD PLUMLEY</i>		34. Plumber's License Number <i>NO: 699</i>		35. Raze Method (ball, bulldozer, by hand, etc.) Trackhoe excavator	
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1. You must submit a Certificate of Insurance covering the raze operation/contractor— unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story, wholly detached from any other building on the same or adjoining premises.

2. The Certificate should:

- Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024
- Include a 30-day advance notice cancellation clause.
- Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.
- State that the insurance covers "Razing Operations in the District of Columbia," If the scope of the insurance is for blanket coverage.
- If the insurance is for one specific address only, state that, "Razing Operations at _____"
(address of raze operation)

36. Insurance Company <i>HARFORD MUTUAL</i>		37. Policy or Certificate No. <i>9148230</i>		38. Expiration Date <i>1/1/2017</i>	
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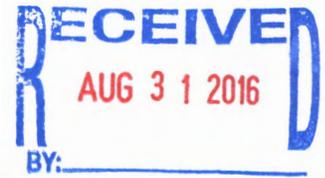
39. Asbestos in Building? If yes, indicate location:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Official Use Only			
		Fee	By	Date	



2908 0835 08/18/2004



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 19, 2016

Cap Id: R1600217

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:
5241 BROAD BRANCH RD NW

LOT: **0813** SQUARE: **2288** 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 FOR RAZE PERMIT

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

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

R1600217

Application Date: August 18, 2016

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
5241 Broad Branch Rd. 20015	N.W.		2288		813

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Carnegie Institution of Washington	1530 P st. N.W. 20005	202-510-8577	gbors@Carnegiescience.edu
10. Agent/Contractor for Owner (if applicable) Rapid Permits	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
DAVID CUNNINGHAM	Landover Hills, Md. 20784	301-731-4767	dcunningham@rapidpermits.com

3. TYPE OF PERMIT

14. Check all that apply:
<input checked="" type="checkbox"/> 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:	
Former Atomic Physics Observatory		N/A	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
Defunct Scientific equipment		Steel and Brick	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
37' Diameter	37' Diameter	55'	75295 58k cf

OFFICIAL USE ONLY

CONDITIONS/COMMENTS:

SECTION A. RAZE PERMIT

23. Raze Contractor's Name <p align="center">N/A</p>		24. Contractor's Address (including zip code) <p align="center">N/A</p>		25. Contractor's Phone <p align="center">N/A</p>	
26. Historic District? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		33. Raze Contractor Signature <p align="center">N/A</p>			
27. CFA? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
28. Raze Entire Building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		34. Property Owner Signature			
29. Building Condemned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
30a. Party Wall? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		30b. If yes, adjacent property owner signature is required.			
		30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected.			
31. Building Vacant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Building must be vacant before Raze Permit issuance.			
32. Public Space Vault? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Official Use Only			
		Fee		By	
				Date	

33. Plumber's Name <p align="center">N/A</p>		34. Plumber's License Number <p align="center">N/A</p>		35. Raze Method (ball, bulldozer, by hand, etc.) <p align="center">N/A</p>	
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1. You must submit a Certificate of Insurance covering the raze operation/contractor-- unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story, wholly detached from any other building on the same or adjoining premises.

2. The Certificate should:

- Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024
- Include a 30-day advance notice cancellation clause.
- Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.
- State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.
- If the insurance is for one specific address only, state that, "Razing Operations at _____"

(address of raze operation)

36. Insurance Company <p align="center">N/A</p>		37. Policy or Certificate No. <p align="center">N/A</p>		38. Expiration Date <p align="center">N/A</p>	
39. Asbestos in Building? If yes, indicate location:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Official Use Only	
				Fee	
				By	
				Date	

Gary Bors

August 17, 2016 at 4:20 PM

Gary Bors

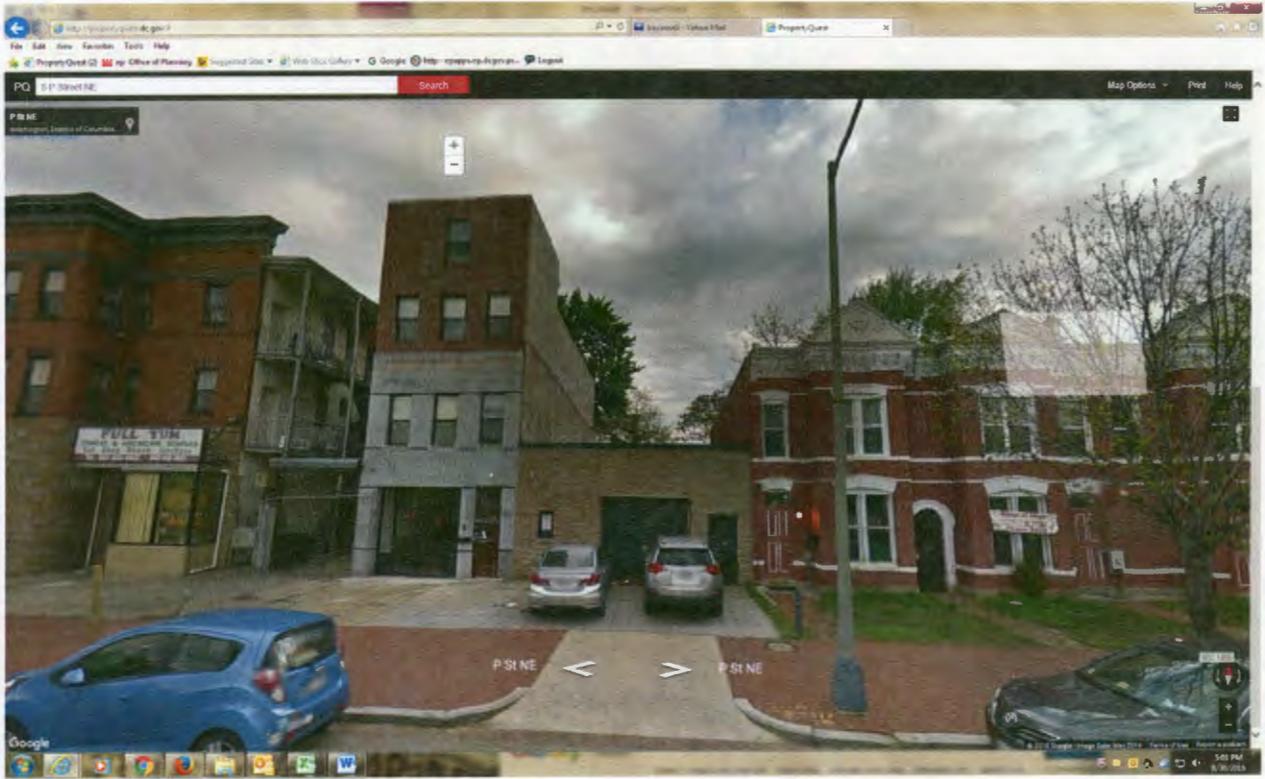


Gary Bors

August 17, 2016 at 4 17 PM

Gary Bors





8 P Street NE

One Story Brick Structure

1433 Pennsylvania Avenue SE

Raze #1600204

Previously submitted and cleared by HPO under Raze #1600116 on May 24, 2016



1065 0820 09/02/2004

1401 Pennsylvania Avenue SE

Raze #1600205

Previously submitted and cleared by HPO under Raze #1600117 on May 24, 2016



1065 0142 09/02/2004

680 I Street SW







5332 0802 08/25/2004



5410 0004 10/10/2004

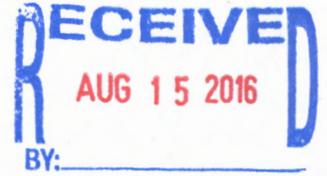


5410 0005 10/10/2004



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 29, 2016

Cap Id: R1600203

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:
2701 ROBINSON PLACE

LOT: 0038 SQUARE: 5875 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 2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

Application Date:

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
2701, 2703, 2705 Robinson Place SE	SE	Eight	5875		38

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
Parkway Overlook LP	1133 North Capitol Street NE Washington, DC 20002	202-535-2813	
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
Ulliman Schutte Construction, LLC	7615 Standish Place Rockville MD 20855	301-545-0750	mphilips@ullimanschutte.com

3. TYPE OF PERMIT

14. Check all that apply:
 Raze Permit

4. DESCRIPTION OF BUILDING

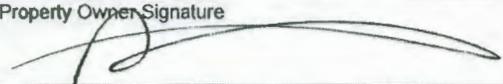
15. Description of Building to be Razed (e.g., two story brick single family dwelling)		16. Existing Number of Stories of Bldg:	
Three abandoned apartment buildings, four stories each		4 stories each	
17. Use(s) of Property (specifically indicate if any use is residential.)		18. Materials of Building (brick, wood, etc.)	
Abandoned apartment buildings		Brick	
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
2701 and 2705: 58'; 2703: 76'	2701 and 2705: 76'; 2703: 52'	38' each	485,184 cu ft total

OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

SECTION A. RAZE PERMIT

23. Raze Contractor's Name Demolition Services, Inc.	24. Contractor's Address (including zip code) 16377 Bennett Road Culpeper VA 22701	25. Contractor's Phone 540-825-4321
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26. Historic District? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature
27. CFA? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
28. Raze Entire Building? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	34. Property Owner Signature 
29. Building Condemned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
30a. Party Wall? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	30b. If yes, adjacent property owner signature is required.
31. Building Vacant? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected.
32. Public Space Vault? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Building must be vacant before Raze Permit issuance.
Official Use Only	
Fee	By
	Date

33. Plumber's Name Magnolia Plumbing, Inc.	34. Plumber's License Number #1000297	35. Raze Method (ball, bulldozer, by hand, etc.) Excavators with Demolition attachments
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1. You must submit a Certificate of Insurance covering the raze operation/contractor-- unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story, wholly detached from any other building on the same or adjoining premises.

2. The Certificate should:

- Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024
- Include a 30-day advance notice cancellation clause.
- Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.
- State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.
- If the insurance is for one specific address only, state that, "Razing Operations at _____ (address of raze operation)"

36. Insurance Company Preferred Insurance Services	37. Policy or Certificate No. ECP2015868-10	38. Expiration Date 9/26/2016
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39. Asbestos in Building? If yes, indicate location:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Floor tile and mastic Exterior wall caulk Duct insulation Joint compound	Official Use Only	
	Fee	By	Date

St. Elizabeths Water Tower Project
2705 Robinson Place SE



Photograph 3

Overview of 2705 Robinson Place SE south wall

2705 Robinson Place SE is depicted within the red rectangle and excludes the buildings outside the confines of the red rectangle



Photograph 4

Overview of 2705 Robinson Place SE west wall

2705 Robinson Place SE is depicted within the red rectangle and excludes the buildings outside the confines of the red rectangle

St. Elizabeths Water Tower Project
2705 Robinson Place SE



Photograph 1

Overview of 2705 Robinson Place SE north wall



Photograph 2

Overview of 2705 Robinson Place SE east wall

St. Elizabeths Water Tower Project
2703 Robinson Place SE



Photograph 3

Overview of 2703 Robinson Place SE south wall

2703 Robinson Place SE is depicted within the red rectangle and excludes the buildings outside the confines of the red rectangle



Photograph 4

Overview of 2703 Robinson Place SE west wall

2703 Robinson Place SE is depicted within the red rectangle and excludes the buildings outside the confines of the red rectangle

St. Elizabeths Water Tower Project
2703 Robinson Place SE



Photograph 1

Overview of 2703 Robinson Place SE north wall

2703 Robinson Place SE is depicted within the red rectangle and excludes the buildings outside the confines of the red rectangle



Photograph 2

Overview of 2703 Robinson Place SE east wall

2703 Robinson Place SE is depicted within the red rectangle and excludes the buildings outside the confines of the red rectangle

St. Elizabeths Water Tower Project
2701 Robinson Place SE



Photograph 3

Overview of 2701 Robinson Place SE south wall

2701 Robinson Place SE is depicted within the red rectangle and excludes the buildings outside the confines of the red rectangle



Photograph 4

Overview of 2701 Robinson Place SE west wall

St. Elizabeths Water Tower Project
2701 Robinson Place SE



Photograph 1

Overview of 2701 Robinson Place SE north wall

2701 Robinson Place SE is depicted within the red rectangle and excludes the buildings outside the confines of the red rectangle



Photograph 2

Overview of 2701 Robinson Place SE east wall

2701 Robinson Place SE is depicted within the red rectangle and excludes the buildings outside the confines of the red rectangle