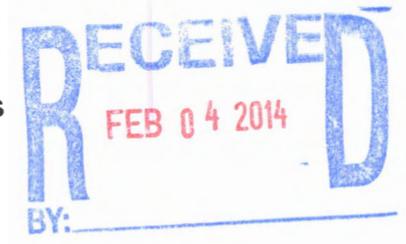


Government of the District of Columbia
Department of Consumer and Regulatory Affairs

Permit Operations Division
1100 4th Street SW
Washington DC 20024

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



Date: January 17, 2014

Cap Id: R1400062

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:
2250 RAILROAD AVE SE

LOT: 0898 SQUARE: 5784 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 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/40062

Application Date: _____

1. INFORMATION ON PROPERTY

1. Address of Proposed Work <i>2250 Railroad AVE SE 20020</i>	2. Quad <i>SE</i>	3. Ward <i>8</i>	4a. Square <i>5784</i>	4b. Suffix	5. Lot <i>0898</i>
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2. APPLICANT INFORMATION

6. Property Owner <i>Curtis Properties, Inc.</i>	7. Complete mailing address (include zip) <i>5620 Linda Lane Camp Springs, MD 20748</i>	8. Phone Number(s) <i>703-606-2971</i>	9. Email <i>svoudrie@fourpointsllc.com</i>
10. Agent/Contractor for Owner (if applicable) <i>Kim Mitchell - CDKM Consulting</i>	11. Complete mailing address (include zip) <i>1250 24th St NW #300 Washington, DC 20037</i>	12. Phone Number(s) <i>202-420-0091</i>	13. Email <i>kim@cdkmcconsulting.com</i>

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) <i>Two story metal framed w/masonry facade warehouse</i>		16. Existing Number of Stories of Bldg: <i>2</i>	
17. Use(s) of Property (specifically indicate if any use is residential.) <i>Warehouse</i>		18. Materials of Building (brick, wood, etc.) <i>Brick, cmu, steel</i>	
19. Bldg Length (ft) <i>163</i>	20. Bldg Width (ft) <i>245</i>	21. Bldg Height (ft) <i>33</i>	22. Bldg Volume (cu ft) (L x W x H) <i>1,317,855</i>

OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

SECTION A. RAZE PERMIT

23. Raze Contractor's Name		24. Contractor's Address (including zip code)		25. Contractor's Phone	
26. Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature			
27. Fine Arts District?	<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	Building must be vacant before Supplemental Raze Operations Permit issuance.			
32. Public Space Vault?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Official Use Only			
		Fee	By	Date	

SECTION B. SUPPLEMENTAL RAZE OPERATIONS PERMIT

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

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

2. The Certificate should:

- 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 checked="" type="checkbox"/> No	52. Raze Contractor Signature			
45. Fine Arts District?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
46. Raze Entire Building?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
47. Building Condemned?	<input type="checkbox"/> Yes <input type="checkbox"/> No	53. Property Owner Signature			
48a. Party Wall?	<input type="checkbox"/> Yes <input type="checkbox"/> No	47b. If you answer yes, adjacent property owner must sign here. _____			
		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.			
49. Building Vacant?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Building must be vacant before Supplemental Raze Operations Permit issuance.			
50. Public Space Vault?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Official Use Only			
51. Asbestos in Building? If yes, indicate location:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Fee	By	Date	



DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS

GOVERNMENT OF THE DISTRICT OF COLUMBIA
CERTIFICATION FOR RAZE PERMIT APPLICATION

This certifies that CURTIS PROPERTIES INC. (referred to as Owner) owns the property at 2235 SHANNON PL. SE 20020 and that the person signing below has the legal authority to execute this Certification

and to make the representations and certifications below, on behalf of the Owner:
I am applying for a Raze Permit and intend to apply for a Supplemental Razing Operations Permit.
I understand that the Raze Permit does not authorize any raze activity on the Property and that DCRA must grant me a Supplemental Razing Operations Permit before I can start any raze activity or operations.
I understand that a Raze Permit merely allows me to go to the next step in the raze process -- to get the required clearances and releases for a Supplemental Razing Operations Permit.
If I do not have a Raze Permit and a Razing Operations Permit before I start any activity or operations to raze the structure, I will be subject to criminal or civil penalties under District of Columbia laws.
SV (Initial here to certify that you have read and understand this paragraph)

A. Use of Property as Housing Accommodation

I hereby certify that the structure to be razed IS NOT a housing accommodation. (is/is not)

If the structure is a housing accommodation, complete Section B. If the structure is not a housing accommodation, skip to Section C and the signature block.

B. Additional Provisions Applicable to Razing of "Housing Accommodations"

I agree, in accordance with DC Official Code (DCOC) §§ 42-3506.02(a)-(b) and 14 DCMR § 4400.2, not to use the permits to:
Demolish any housing accommodation or rental unit for the purpose of constructing or expanding a hotel, motel, inn, or other transient residential accommodation.
Construct or expand a hotel, motel, inn, or other transient residential occupancy on the site of a housing accommodation or rental unit demolished after July 17, 1985.
SV (Initial here to certify that you have read and understand this paragraph)

I acknowledge that I must comply with the requirements in the "Tenants Opportunity to Purchase Act," codified in DCOC § 42-3404.02, et seq., and in subchapter VII of the "Rental Housing Act," codified in DCOC §§ 42-3507.01 to 42-3507.03 with implementing regulations in 14 DCMR § 4401. These requirements include, but are not limited to:
Providing tenants with an opportunity to purchase the housing accommodation, via a written copy of an offer for sale, before issuing a Notice to Vacate for purposes of demolition or discontinuance of housing use.
Providing tenants with a 180-day Notice to Vacate that complies with and notifies each tenant of his/her potential right to relocation assistance.
SV (Initial here to certify that you have read and understand this paragraph)

C. Execution and Certification Applicable to All Applicants

I certify that I have read and understand the requirements in this certification and that any representations I made here are true and accurate to the best of my knowledge. If I fail to follow the above requirements, I acknowledge that this application, and any permits issued as a result of it, may be revoked under DCRA's authority and discretion. I acknowledge that I have been advised that failure to get a Supplemental Razing Operations Permit before I start operations to raze the structure may subject me to criminal and/or civil penalties.

Name of Owner: Stan Vourdie (Print Name of Owner)
Name of Agent: Kim Mitchell (Print Name of Authorized Agent)

Signature: Stan Vourdie
Signature: Kim Mitchell

I, _____, a Notary Public in and for the District of Columbia, do hereby certify that _____ (Signatory) whose name is signed to this Certification with the date of the ___ day of ___, 20___, personally appeared before me in the District, the said Signatory is personally well known to me as the person who executed the said Certification, and acknowledged the same to be his act and deed. The Signatory did make oath that he carefully read and fully understand the same; his execution was voluntary.

Given under my hand and official seal this ___ day of ___, 20___.

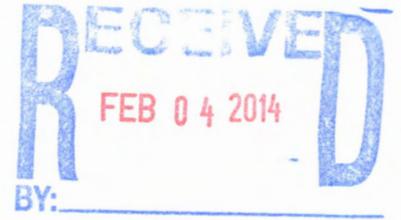
NOTARY PUBLIC



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

Permit Operations Division
1100 4th Street SW
Washington DC 20024

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



Date: January 30, 2014

Cap Id: R1400065

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:
1028 BLADENSBURG RD NE

LOT: 0140 SQUARE: 4074 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 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.

R14 000 65

Application Date: 1.30.14

1. INFORMATION ON PROPERTY

1. Address of Proposed Work	2. Quad	3. Ward	4a. Square	4b. Suffix	5. Lot
1028 BLADENSBURG RD, NE					

2. APPLICANT INFORMATION

6. Property Owner	7. Complete mailing address (include zip)	8. Phone Number(s)	9. Email
57TH STREET MENS. POC	3203 SHORTRIDGE LN MITCHELLVILLE, MD 20721	240 832 4315	DEMURENTA@COMCAST.NET
10. Agent/Contractor for Owner (if applicable)	11. Complete mailing address (include zip)	12. Phone Number(s)	13. Email
OUSMANE BA.	1928 15 th ST NW DC	202-538 0025	

3. TYPE OF PERMIT

14. Check all that apply:
<input checked="" type="checkbox"/> Raze Permit

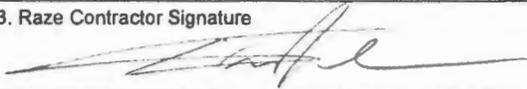
4. DESCRIPTION OF BUILDING

15. Description of Building to be Razed (e.g., two story brick single family dwelling)	16. Existing Number of Stories of Bldg:		
SINGLE FAMILY TWO STORY BRICK COMMERCIAL BUILDING.	2 stories		
17. Use(s) of Property (specifically indicate if any use is residential.)	18. Materials of Building (brick, wood, etc.)		
COMMERCIAL	BRICK, WOOD, DRY WALL, CARPET		
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)	22. Bldg Volume (cu ft) (L x W x H)
49 ft	16.10 ft	24 ft	18,933.60

OFFICIAL USE ONLY

CONDITIONS/ COMMENTS

SECTION A. RAZE PERMIT

23. Raze Contractor's Name <i>57th Street Mews, LLC</i>		24. Contractor's Address (including zip code) <i>3703 SHONKIRIDGE LN MITCHELLVILLE, MD 20721</i>		25. Contractor's Phone <i>240 832 4315</i>	
26. Historic District?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Raze Contractor Signature 			
27. CFA?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
28. Raze Entire Building?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	34. Property Owner Signature 			
29. Building Condemned?	<input 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 <i>MAJOR PLUMBING</i>	34. Plumber's License Number <i>1182</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>SCOTTSDALE</i>	37. Policy or Certificate No. <i>19854100</i>	38. Expiration Date <i>01/13/2015</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

GOVERNMENT OF THE DISTRICT OF COLUMBIA
**CERTIFICATION FOR
RAZE PERMIT APPLICATION**

This certifies that 57TH STREET MENS, INC (referred to as Owner) owns the property at
1028 BLADENSBURG RD, NE and that the person signing below has the legal authority to execute this Certification
(Legal Name of Property Owner)
(Property Address)

and to make the representations and certifications below, on behalf of the Owner:

I am applying for a Raze Permit for the subject property.

I understand that the Raze Permit must be issued prior to any raze activity or operations.

If I do not have a Raze Permit before I start any activity or operations to raze the structure, I will be subject to criminal or civil penalties under District of Columbia laws.

[Signature] (Initial here to certify that you have read and understand this paragraph)

A. Use of Property as Housing Accommodation

I hereby certify that the structure to be razed IS NOT a housing accommodation.
(is/is not)

If the structure is a housing accommodation, complete Section B. If the structure is *not* a housing accommodation, skip to Section C and the signature block.

B. Additional Provisions Applicable to Razing of "Housing Accommodations"

I agree, in accordance with DC Official Code (DCOC) §§ 42-3506.02(a)-(b) and 14 DCMR § 4400.2, not to use the permits to:

Demolish any housing accommodation or rental unit for the purpose of constructing or expanding a hotel, motel, inn, or other transient residential accommodation.

Construct or expand a hotel, motel, inn, or other transient residential occupancy on the site of a housing accommodation or rental unit demolished after July 17, 1985.

_____ (Initial here to certify that you have read and understand this paragraph)

I acknowledge that I must comply with the requirements in the "Tenants Opportunity to Purchase Act," codified in DCOC § 42-3404.02, *et seq.*, and in subchapter VII of the "Rental Housing Act," codified in DCOC §§ 42-3507.01 to 42-3507.03 with implementing regulations in 14 DCMR § 4401. These requirements include, but are not limited to:

Providing tenants with an opportunity to purchase the housing accommodation, via a written copy of an offer for sale, **before** issuing a Notice to Vacate for purposes of demolition or discontinuance of housing use.

Providing tenants with a 180-day Notice to Vacate that complies with and notifies each tenant of his/her potential right to relocation assistance.

_____ (Initial here to certify that you have read and understand this paragraph)

C. Execution and Certification Applicable to All Applicants

I certify that I have read and understand the requirements in this certification and that any representations I made here are true and accurate to the best of my knowledge. If I fail to follow the above requirements, I acknowledge that this application, and any permits issued as a result of it, may be revoked under DCRA's authority and discretion. I acknowledge that I have been advised that failure to get a Raze Permit before I start operations to raze the structure may subject me to criminal and/or civil penalties.

Name of Owner: 57TH STREET MENS, INC
(Print Name of Owner)

Signature: [Signature]

Name of Agent: JATWU DZMURKIN (PRINTED)
(Print Name of Authorized Agent)

Signature: _____



2250 Railroad Avenue SE



4074 0140 08/03/2004

1028 Bladensburg Road NE