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FORM 1 APPLICATION FOR VARIANCE/SPECIAL EXCEPTION

Before completing this form, please review the instructions on the reverse side.
Print or type all information unless otherwise indicated. All information must be completely filled out.

Pursuant to §3103.2 – Area/Use Variance and/or §3104.1 - Special Exception of Title 11 DCMR- Zoning Regulations, an application is hereby made, the details of which are as follows:

Address(es)	Square	Lot No(s).	Zone District(s)	Type of Relief Being Sought: Area Variance / Use Variance / Special Exception	Type of Relief Being Sought: Section(s) of Title 11 DCMR - Zoning Regulations from which relief is being sought
641 "G" St., S.W. Washington, D.C. 20024	400	0212	R-3	Special Exception	202.2
			~~R-4~~ R-6		

Present use(s) of Property:	Residential and Oral Surgery (Dental) office
Proposed use(s) of Property:	Residential and Oral Surgery (Dental) office
Owner of Property:	Daniel N. Howard Jr.
Telephone No:	202-554-3000
Address of Owner:	641 "G" St., S.W. Washington, D.C. 20024
Single-Member Advisory Neighborhood Commission District(s):	6D02

Written paragraph specifically stating the "who, what, and where of the proposed action(s)". This will serve as the Public Hearing Notice:

To adequately or safely provide oral surgery care under general anesthesia. Three employees other than the surgeon is necessary. Those three employees would include front desk staff and two assistants. One assistant would provide anesthesia care.

EXPEDITED REVIEW REQUEST (If interested, please select the appropriate category)

I waive my right to a hearing, agree to the terms in Form 128 - Waiver of Hearing for Expedited Review, and hereby request that this case be placed on the Expedited Review Calendar, pursuant to §3118.2 (CHOOSE ONE):

- ○ A park, playground, swimming pool, or athletic field pursuant to §209.1, or
- ○ An addition to a one-family dwelling or flat or new or enlarged accessory structures pursuant to §223

I/We certify that the above information is true and correct to the best of my/our knowledge, information and belief. Any person(s) using a fictitious name or address and/or knowingly making any false statement on this application/petition is in violation of D.C. Law and subject to a fine of not more than $1,000 or 180 days imprisonment or both. (D.C. Official Code § 22 2405)

Date:	June 11, 2012	Signature*:	Daniel N. Howard Jr.

To be notified of hearing and decision (Owner or Authorized Agent*):

Name:	Daniel N. Howard	E-Mail:	dhowardoms@aol.com
Address:	641 "G" Street, S.W. Washington, D.C. 20024		
Phone No(s).:	202-554-3000	Fax No.:	

* *To be signed by the Owner of the Property for which this application is filed or his/her authorized agent. In the event an authorized agent files this application on behalf of the Owner, a letter signed by the Owner authorizing the agent to act on his/her behalf shall accompany this application.*

ANY APPLICATION THAT IS NOT COMPLETED IN ACCORDANCE WITH THE INSTRUCTIONS ON THE BACK OF THIS FORM WILL NOT BE ACCEPTED.

FOR OFFICIAL USE ONLY

Exhibit No. 1 **Case No. 18440**

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BOARD OF ZONING ADJUSTMENT
District of Columbia
CASE NO. 18440
EXHIBIT NO. 1

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Form 120- Application for Variance/Special Exception

Written paragraph Public Hearing Notice

To adequately and safely provide dental care under general anesthesia, THREE employees other than the dentist are necessary. Those three employees would include a front desk person an anesthesia assistant and a surgery assistant on assistant would provide anesthesia care and another would assist the doctor in the performance of surgery.

The building is 2400 square feet in total size and the first floor is used for office space. The first floor is around 800 square feet minus the square footage of the stairwell to the residence. A variance request is submitted considering office space to be slightly greater than 25%.