

Department of Consumer and Regulatory Affairs

Building and Land Regulation Administration

941 North Capitol Street N.E. Room 2100

Washington D.C. 20002

Tel:(202) 442-4470

Fax:(202) 442-4862

B

Building Permit

THIS PERMIT IS VALID ONLY FOR THE PREMISES
OF THE PROJECT ADDRESS

PERMIT NO. 101301

DATE: 2/28/2007

ADDRESS OF PROJECT: 448 EMERSON ST NW		S S L: SQ: 3251 SX: LOT: 213 WARD: 4 ZONE r-3	
DESCRIPTION OF WORK: BUILDING PERMIT FOR A PROPOSED FRONT YARD EXCAVATION FOR BSMT ENTRANCE.			
PERMIT TYPE: ALTERATION AND REPAIR	PLANS (Y/N): Y	EXISTING USE: RESIDENTIAL-ONE/TWO FAMILY	PROPOSED USE: Residential-One/Two Family
PERMISSION IS HEREBY GRANTED TO OWNER: JOSE COURERAS		PERMIT FEE: \$130.00	
AGENT NAME: AZIZ AKAME 301-277-1661			
CONDITIONS / RESTRICTIONS: ALL CONSTRUCTION DONE ACCORDING TO THE CURRENT BUILDING CODES ; ALL CONSTRUCTION DONE ACCORDING TO THE CURRENT ZONING REGULATIONS ; TO REPORT WASTE, FRAUD OR ABUSE BY ANY D.C. GOVERNMENT OFFICIAL, CALL THE D.C. INSPECTOR GENERAL AT 1-800-521-1639 ; as per plans & app. Only TO REPORT WASTE, FRAUD OR ABUSE BY ANY D.C. GOVERNMENT OFFICIAL, CALL THE D.C. INSPECTOR GENERAL AT 1-800-521-1639:			
Interim DIRECTOR: Lisa M. Morgan	PERMIT CLERK: 		EXPIRATION DATE: 2/28/2008

CONDITIONS: As a condition precedent to the issuance of this permit, the owner agrees to conform with all conditions set forth herein, and to perform the work authorized hereby in accordance with the approved application and plans on file with the District Government and in accordance with all applicable laws and regulations of the District of Columbia. The District of Columbia has the right to enter upon the property and to inspect all the work authorized by this permit and to require any change in construction which may be necessary to insure compliance with the permit and with all the applicable regulations of the District of Columbia. Work authorized under the Permit must start within one (1) year of the date appearing on this permit or this permit is automatically void. If work is not started, any application for partial refund must be made within six months of the date appearing on this permit.

THIS PERMIT MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT ADDRESS OF WORK UNTIL WORK IS COMPLETED
NOTIFY THE BUILDING INSPECTOR THE DAY THE WORK STARTS. PHONE: (202) 442-4641 941 NORTH CAPITOL ST NE
WASHINGTON DC 20002.

A separate permit is required for all Plumbing, Refrigeration, Gas Fitting, and Electrical Work.

BOARD OF ZONING ADJUSTMENT
District of Columbia
CASE NO. 18495
EXHIBIT NO. 8

Department of Consumer and Regulatory Affairs
Building and Land Regulation Administration

941 North Capitol Street N.E. Room 2100

Washington D.C. 20002

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Fax:(202) 442-4862

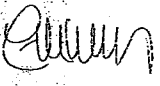
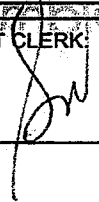
B

Building Permit

THIS PERMIT IS VALID ONLY FOR THE PREMISES
OF THE PROJECT ADDRESS

PERMIT NO. 97302

DATE: 1/18/2007

ADDRESS OF PROJECT: 448 EMERSON ST NW		S S L:	SQ: 3251	SX:	LOT: 213
		WARD:	4 ZONE r-3		
DESCRIPTION OF WORK: CONVERTING SFD TO A 2 FAMILY FLAT / INTERIOR RENOVATION AND CONVERSION INTO 2 SEPARATE UNITS INCLUDING ELECTRICAL					
PERMIT TYPE: USE CHANGE	PLANS (Y/N): Y	EXISTING USE: RESIDENTIAL-ONE/TWO FAMILY	PROPOSED USE: Residential-One/Two Family		
PERMISSION IS HEREBY GRANTED TO OWNER: JOSE COUTRARAS			PERMIT FEE: \$1,030.00		
AGENT NAME: AZIZ					
CONDITIONS / RESTRICTIONS: ALL CONSTRUCTION DONE ACCORDING TO THE CURRENT BUILDING CODES ; ALL CONSTRUCTION DONE ACCORDING TO THE CURRENT ZONING REGULATIONS ; SEPERATE ELECTRICAL, PLUMBING AND MECHANICAL INSTALLATION PERMITS ARE REQUIRED ; TO REPORT WASTE, FRAUD OR ABUSE BY ANY D.C. GOVERNMENT OFFICIAL, CALL THE D.C. INSPECTOR GENERAL AT 1-800-521-1639 ; as per app. Plans TO REPORT WASTE, FRAUD OR ABUSE BY ANY D.C. GOVERNMENT OFFICIAL, CALL THE D.C. INSPECTOR GENERAL AT 1-800-521-1639:					
Interim DIRECTOR:  Lisa M. Morgan		PERMIT CLERK: 		EXPIRATION DATE: 1/18/2008	

CONDITIONS: As a condition precedent to the issuance of this permit, the owner agrees to conform with all conditions set forth herein, and to perform the work authorized hereby in accordance with the approved application and plans on file with the District Government and in accordance with all applicable laws and regulations of the District of Columbia. The District of Columbia has the right to enter upon the property and to inspect all the work authorized by this permit and to require any change in construction which may be necessary to insure compliance with the permit and with all the applicable regulations of the District of Columbia. Work authorized under the Permit must start within one (1) year of the date appearing on this permit or this permit is automatically void. If work is not started, any application for partial refund must be made within six months of the date appearing on this permit.

THIS PERMIT MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT ADDRESS OF WORK UNTIL WORK IS COMPLETED.

NOTIFY THE BUILDING INSPECTOR THE DAY THE WORK STARTS. PHONE: (202)442-4641 941 NORTH CAPITOL ST NE WASHINGTON DC 20002.

A separate permit is required for all Plumbing, Refrigeration, Gas Fitting, and Electrical Work.

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2012/01/11 PM 12:15

Department of Consumer and Regulatory Affairs
Building and Land Regulation Administration

941 North Capitol Street N.E. Room 2100

Washington D.C. 20002

Tel:(202) 442-4470

Fax:(202) 442-4862

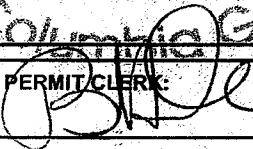
B

Building Permit

THIS PERMIT IS VALID ONLY FOR THE PREMISES
OF THE PROJECT ADDRESS

PERMIT NO. 83912

DATE: 12/7/2005

ADDRESS OF PROJECT: 448 EMERSON ST NW		SSL: SQ: 3251 WARD:	SX: LOT: 213 4 ZONE R3
DESCRIPTION OF WORK: REPLACE ALL WINDOWS, SIDING, FLOORING, SHEETING WINDOW HEADERS, OF EXISTING REAR ADDITION			
PERMIT TYPE: ALTERATION AND REPAIR	PLANS (Y/N): Y	EXISTING USE: RESIDENTIAL ONE/TWO FAMILY	PROPOSED USE: Residential One/Two Family
PERMISSION IS HEREBY GRANTED TO OWNER: JOSE GUTIERAS		PERMIT FEE: \$87000	
AGENT NAME: HUGO PALMA 703-380-0461			
CONDITIONS / RESTRICTIONS: NO GASFITTING ; NO PLUMBING ; MECHANICAL INSTALLATION PERMITS ARE REQUIRED.			
TO REPORT WASTE, FRAUD OR ABUSE BY ANY D.C. GOVERNMENT OFFICIAL, CALL THE D.C. INSPECTOR GENERAL AT 1-800-521-1639:			
DIRECTOR: Dr. Patrick Canavan, Psy. D.		PERMIT CLERK: 	EXPIRATION DATE: 12/7/2006

CONDITIONS: As a condition precedent to the issuance of this permit, the owner agrees to conform with all conditions set forth herein, and to perform the work authorized hereby in accordance with the approved application and plans on file with the District Government and in accordance with all applicable laws and regulations of the District of Columbia. The District of Columbia has the right to enter upon the property and to inspect all the work authorized by this permit and to require any change in construction which may be necessary to insure compliance with the permit and with all the applicable regulations of the District of Columbia. Work authorized under the Permit must start within one (1) year of the date appearing on this permit or this permit is automatically void. If work is not started, any application for partial refund must be made within six months of the date appearing on this permit.

THIS PERMIT MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT ADDRESS OF WORK UNTIL WORK IS COMPLETED.
NOTIFY THE BUILDING INSPECTOR THE DAY THE WORK STARTS. PHONE: (202)442-4641 941 NORTH CAPITOL ST NE WASHINGTON DC 20002.

A separate permit is required for all Plumbing, Refrigeration, Gas Fitting, and Electrical Work.

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E

ELECTRICAL PERMIT

BLDG PMT. B83912

PERMIT NO.

THIS PERMIT IS VALID ONLY FOR THE PREMISES
OF THE PROJECT ADDRESS

DATE : 2/10/2006

EL 113352

ADDRESS OF PROJECT:

PRCLID : 3251
(square)

-0000- 0213
(lot)

448 EMERSON ST NW

WARD: 4

ZONE : R3

OWNER'S NAME:

JOSE GUTRERAS

OWNER'S ADDRESS:

SAME

OWNER'S TELEPHONE NO.

CONTRACTOR'S NAME:

TDK CUSTOM WIRING

CONTRACTOR'S ADDRESS:

TDK CUSTOM WIRING, 4711 DEANWOOD DR, A
CAPITOL HEIGHTS
MD Zip : 20743 1128

CONTRACTOR'S PHONE NO.

BUS.

FAX.

MASTER ELECTRICIAN:

DAVID FARMER

LICENSE #

DM0000001090

PHONE NO.

☐ NEW ☐ REMODEL ☐ REPLACEMENT ☒ REPAIR

DESCRIPTION OF WORK:

1-400amp meter pack, 1-200amp cb panel, 1-50amp cb panel.

CURRENT USE:

R3 ONE & TWO FAMILY DWELLINGS

FLOOR NUMBERS:

3 Floor(s)

FEE:

\$155.00

15 OUTLETS

9 LIGHTS

1 SERVICE/METER 201 - 400 AMP

2 SERVICE/METER THRU 200 AMP

This permit authorizes the contractor to perform the work described herein at the address shown above, under the conditions stated on this permit. THIS PERMIT MUST ALWAYS
BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS OF WORK UNTIL WORK IS COMPLETED. For all electrical inspections, call 202-442-2643 or fax your request to 202-442-4863.

INTL. TRADE PROTECTION - PATENTS & COPYRIGHTS

Director

Patrick J. Canavan, Psy. D.
Patrick J. Canavan, Psy. D.

PERMIT CLERK:

D. MINOR

EXPIRATION DATE:

Feb - 10 - 2007

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4/14/06 - 1/11/12:16

E

ELECTRICAL PERMIT

BLDG PMT. B83912

PERMIT NO.

THIS PERMIT IS VALID ONLY FOR THE PREMISES
OF THE PROJECT ADDRESS

DATE : 2/15/2007

EL 137584

448 EMERSON ST NW

PRCLID : 3251
(square)

-0000-

0213
(lot)

WARD: 4

ZONE: R3

OWNER'S NAME:

JOSE GOUTERAS

OWNER'S ADDRESS:

SAME

OWNER'S TELEPHONE NO.

CONTRACTOR'S NAME:

TDK CUSTOM WIRING

CONTRACTOR'S ADDRESS:

TDK CUSTOM WIRING, 4711 DEANWOOD DR, A
CAPITOL HEIGHTS
MD Zip : 20743 1128

CONTRACTOR'S PHONE NO.

BUS.

FAX.

MASTER ELECTRICIAN:

DAVID FARMER

LICENSE #

DM0000001090

PHONE NO.

☐ NEW ☐ REMODEL ☐ REPLACEMENT ☒ REPAIR

CURRENT USE:

R3 ONE & TWO FAMILY DWELLINGS

PROPOSED USE:

R3 ONE & TWO FAMILY DWELLINGS

DESCRIPTION OF WORK:

FLOOR NUMBERS:

12 Floor(s)

FEE:

\$240.00

100 OUTLETS

50 LIGHTS

0

This permit authorizes the contractor to perform the work described herein at the address shown above, under the conditions stated on this permit. THIS PERMIT MUST ALWAYS
BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS OF WORK UNTIL WORK IS COMPLETED. For all electrical inspections, call 202-442-4643 or fax your request to 202-442-4863.

Interim
Director

Lisa M Morgan

PERMIT CLERK:

L. HACKNEY

EXPIRATION DATE:

Feb - 15 - 2008

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2017 NOV -1 PM 12:15

E

ELECTRICAL PERMIT

BLDG PMT. B83912

PERMIT NO.

EL 166945

THIS PERMIT IS VALID ONLY FOR THE PREMISES
OF THE PROJECT ADDRESS

DATE : 5/22/2008

ADDRESS OF PROJECT:

448 EMERSON ST NW

PRCLID :

3251

(square)

-0000-

0213

(lot)

WARD:

4

ZONE :

R3

OWNER'S NAME:

JOSE COUTRERAS

OWNER'S ADDRESS:

SAME

OWNER'S TELEPHONE NO.

CONTRACTOR'S NAME :

TDK CUSTOM WIRING

CONTRACTOR'S ADDRESS :

TDK CUSTOM WIRING, 4711 DEANWOOD DR, A
CAPITOL HEIGHTS
MD Zip : 20743 1128

CONTRACTOR'S PHONE NO.

BUS.

FAX.

MASTER ELECTRICIAN:

DAVID FARMER

LICENSE #

DM0000001090

PHONE NO.

☐ NEW

☐ REMODEL

☐ REPLACEMENT

☒ REPAIR

DESCRIPTION OF WORK:

EXTENSION TO PERMIT EL 137584

CURRENT USE:

R3 ONE & TWO FAMILY DWELLINGS

PROPOSED USE:

R3 ONE & TWO FAMILY DWELLINGS

FLOOR NUMBER:

FEE:

\$33.00

This permit authorizes the contractor to perform the work described herein at the address shown above, under the conditions stated on this permit. THIS PERMIT MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS OF WORK UNTIL WORK IS COMPLETED. For all electrical inspections, call 202-442-4843 or fax your request to 202-442-4883.

Director

Linda K. Argo

PERMIT CLERK:

L. HACKNEY

EXPIRATION DATE:

May - 22 - 2009

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4/11/09 - 1 PM 12:15

AC

AIR CONDITIONING PERMIT

PERMIT NO.

AC 116709

THIS PERMIT IS VALID ONLY FOR THE PREMISES
OF THE PROJECT ADDRESS

BLDG PMT. B

DATE : 4/28/2006

ADDRESS OF PROJECT :	PRCLID : 3251 (square)	-0000-	0213 (lot)
448 EMERSON ST NW	WARD : 4	ZONE : R3	
OWNER'S NAME:	OWNER'S ADDRESS:	OWNER'S TELEPHONE NO.:	
JOSE GUTERAS	SAME		
J. SAUNDERS	3918 S DAKOTA AVE NE		
CONTRACTOR'S NAME:	CONTRACTOR'S ADDRESS:	CONTRACTOR'S PHONE NO.	
JOHNSON HOME IMPROVEMENT	1139 OATES STREET NE WASHINGTON DC Zip : 20002	BUS: FAX:	

TYPE OF WORK:	REPLACEMENT	USE GROUP:	R4 DETACHED SINGLE FAMILY
EQUIPMENT TYPE:	REPLACEMENT		
(AIR CONDITIONING)			
EQUIPMENT MAKER:	COOLING METHOD	# TO BE INSTALLED : 0	REFRIGERANT EFFECT# NUMBER OF COMPRESSORS: REFRIG. EFFECT: 0 - 120000 BTU/hr: 2
DUCANE	☒ AIR	TYPE OF REFRIGERANT:	
EQUIPMENT MODEL:	☐ WATER	CONDENSER LOCATION:	
KLUC30	R-22	GROUND	
DESCRIPTION OF WORK:			
	\$92.00		

This permit authorizes the contractor to perform the work described herein at the address shown above, under the conditions stated on this permit. THIS PERMIT MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS OF WORK UNTIL WORK IS COMPLETED. For all inspections, call 202-442-4460 or fax your request to 202-442-4863.		
Patrick J. Canavan, Psy. D. DIRECTOR	PERMIT CLERK: DORIS MINOR	EXPIRATION DATE: Apr - 28 - 2007

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D.C. OFFICE OF ZONING
4/28/06 - 1 PM 12:10

AC

AIR CONDITIONING PERMIT

PERMIT NO.

AC 170430

THIS PERMIT IS VALID ONLY FOR THE PREMISES
OF THE PROJECT ADDRESS

BLDG PMT. B83912

DATE : 7/18/2008

ADDRESS OF PROJECT :		PRCLID :	3251 (square)	-0000-	0213 (lot)
448 EMERSON ST NW		WARD :	4	ZONE :	R3
OWNER'S NAME :		OWNER'S ADDRESS :		OWNER'S TELEPHONE NO.	
JOSE COUTERAS		SAME			
J. SAUNDERS		3918 S DAKOTA AVE NE			
CONTRACTOR'S NAME :		CONTRACTOR'S ADDRESS :		CONTRACTOR'S PHONE NO.	
TRUCO EXPRESS		209 WOODGREEN CTR FT WASHINGTON MD		BUS: (301)452-2078 x FAX:	
TYPE OF WORK :		USE GROUP :			
REPLACEMENT REPLACEMENT		R4 DETACHED SINGLE FAMILY R4 DETACHED SINGLE FAMILY			
EQUIPMENT TYPE :					
(AIR CONDITIONING)					
EQUIPMENT MAKER :		COOLING METHOD :		REFRIGERANT EFFECT/# NUMBER OF COMPRESSORS:	
DUCANE		☒ AIR		REFRIG. EFFECT: 0 - 120000 BTU/h: 2	
EQUIPMENT MODEL :		# TO BE INSTALLED : 0			
KLUC30		TYPE OF REFRIGERANT :		CONDENSER LOCATION :	
		R-22		REAR	
DESCRIPTION OF WORK :					
		FEE : \$92.00			
This permit authorizes the contractor to perform the work described herein at the address shown above, under the conditions stated on this permit. THIS PERMIT MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS OF WORK UNTIL WORK IS COMPLETED. For all inspections, call 202-442-4460 or fax your request to 202-442-4863.					
Director  Linda K. Argo		PERMIT CLERK: LUCRETIA HACKNEY		EXPIRATION DATE: Jul - 18 - 2009	

P**PLUMBING PERMIT**

BLDG PMT. 883912

THIS PERMIT IS VALID ONLY FOR THE PREMISES
OF THE PROJECT ADDRESS

DATE : 4/26/2006

PLBG 118576

ADDRESS OF PROJECT:

443 EMERSON ST NW

PROJECT: 3251 -0000- 0213

(square)

(lot)

WARD: 4

ZONE: R3

OWNER'S NAME:

JOSE GUTIERAS

OWNER'S ADDRESS:

SAME

OWNER'S TELEPHONE NO.

CONTRACTOR'S NAME:

DAVID HAHN

CONTRACTOR'S ADDRESS:

308 EAST CAPITOL ST
WASHINGTON
DC

CONTRACTOR'S PHONE NO.

BUS. (202)206-8585 x

FAX.

MASTER PLUMBER:

DAVID HAHN

LICENSE #

0000001311

3 SHOWERS

5 WATER CLOSETS

2 SINKS

5 BASINS

2 GARBAGE DISPOSAL

2 DISHWASHER

1 WATER HEATERS

1 GAS FURNACE

DESCRIPTION OF WORK:

FEE:

FEE:

\$392.00

ROPOSED USE:

4 DETACHED SINGLE FAMILY

TYPE OF WORK:

REMODEL

this permit authorizes the contractor to perform the work described herein at the address shown above, under the conditions stated on this permit. THIS PERMIT MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS OF WORK UNTIL WORK IS COMPLETED. For all plumbing inspections, call 202-442-4642 or fax your request to 202-442-4863.

Patrick J. Canavan, Psy. D.
DIRECTOR

PERMIT CLERK:

DORIS MINOR

EXPIRATION DATE:

Apr - 26 - 2007

Page 2 (PLBG 118576)

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P**PLBG 170431****PLUMBING PERMIT**THIS PERMIT IS VALID ONLY FOR THE PREMISES
OF THE PROJECT ADDRESS**BLDG PMT. B83912****DATE : 7/18/2008**

ADDRESS OF PROJECT:

448 EMERSON ST NWPRCLID : **3251 -0000- 0213**

(square)

(lot)

WARD: **4**ZONE : **R3**

OWNER'S NAME:

JOSE COUTRERAS

OWNER'S ADDRESS:

SAME

OWNER'S TELEPHONE NO.

CONTRACTOR'S NAME:

VALUE CARE MECH. INC.

CONTRACTOR'S ADDRESS:

**150 S. WASH. ST.
FALL CHURCH
VA**

CONTRACTOR'S PHONE NO.

BUS. (301)959-6784 x**FAX.**

MASTER PLUMBER:

PHILLIP B. MOBLEY

LICENSE #

0000001035**3 SHOWERS****3 WATER CLOSETS****1 WATER HEATERS****2 SINKS****5 BASINS****2 GARBAGE DISPOSAL****2 DISHWASHER****1 GAS FURNACE**

DESCRIPTION OF WORK:

FEE :**FEE :****\$352.00**

PROPOSED USE:

R4 DETACHED SINGLE FAMILY

TYPE OF WORK:

REMODEL

This permit authorizes the contractor to perform the work described herein at the address shown above, under the conditions stated on this permit. THIS PERMIT MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS OF WORK UNTIL WORK IS COMPLETED. For all plumbing inspections, call 202-442-4642 or fax your request to 202-442-4863.

Director


Linda K. Argo

PERMIT CLERK:


LUCRETIA HACKNEY

EXPIRATION DATE:

Jul - 18 - 2009

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St Name: EMERSON

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Address

St No: 448

St Name: EMERSON

Suffix: ST

Zip:

Square 3251

Suffix:

Lot 3:

Lot Ext:

Cluster:

Parcel Key:

Address: 448 EMERSON ST NW

Building Permit

Rec Type: BUILDING

App. Date:

Issued Date 01/18/2007

Bldg Permit No 97302

Permit Type: USE CHANGE

Flrs:

Use Group:

Use:

Permit Fee: 1030

Valuation: 50000

Filling Fee 0

Owner Name: JOSE COUTRARAS

Agent AZIZ

Address:

City:

Comments: CONVERTING SFD TO A 2 FAMILY FLAT / INTERIOR RENOVATION AND CONVERSION

Record No: 81476

Added By

Added Date:

Updated By:



DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS

Department of Consumer and Regulatory Affairs (DCRA)

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TERMINAL 0555846

901165396994
01/18/2007 16:07:40

V.S. XXXXXXXXXXXX0182
AUTH. TRANS. ID. 087018762558913
INVOICE 54017 H#2
AUTH. CODE 171704

SALE TOTAL	\$1030.00
TAX	\$0.00
TOTAL	\$1030.00

CUSTOMER COPY

Office of Finance
and Treasury

Date: 1/18/2007 4:09 PM
Office: 941Ncap Term:DFJPOLB1
Batch: 33 Batch Date:01/19/07
Cashier:ncap04
Trans #:89

DCRA

Comment/Document:

Rcpt: 00030705

Payment Total:

\$1,030.00

Payment Distribution:
9999 MISC

VS Tendered: \$1,030.00
\$1,030.00

Thank you for your payment.
Have a nice day!

2012 NOV -1 PM12:18

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