Exhibit 4

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

B

BUILDING PERMIT

THIS PERMIT MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS OF WORK
UNTIL WORK IS COMPLETED AND APPROVED

Issue Date: 06/13/2012

PERMIT NO. B1210085

Expiration Date: 06/13/2013

Address of Project:	Zone:	Ward:	Square:	Suffix:	Lot:
1501 U ST NW		1	0189		0059

Description Of Work:

Install ANSUL R-102 3-gallon commercial kitchen hood fire suppression system in existing hood - 24 Seven

Permission Is Hereby Granted To:	Owner Address:	PERMIT FEE:
1501 U St Nw		$94.98

Permit Type:	Existing Use:	Proposed Use:	Plans:
Alteration and Repair	Restaurant	Restaurant	Yes

Agent Name:	Agent Address:	Existing Dwell Units:	Proposed Dwell Units:	No. of Stories:	Floor(s) Involved:
Guardian Fire Protection Services, Llc	7668 Standish Place, Rockville, MD 20855	0	0	4	1

Conditions/ Restrictions:

Interior Work Only. Approval does not extend to any exterior work, including but not limited to alteration, replacement or installation of windows, doors, signs, vents, utility meters, mechanical units or other exterior features.
This Permit Expires if no Construction Is Started Within 1 Year or if the Inspection is Over 1 Year.
All Construction Done According To The Current Building Codes And Zoning Regulations;
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 work authorized by this permit and to require any change in construction which may be necessary to ensure compliance with the permit and with all the applicable regulations of the District of Columbia. Work authorized under this Permit must start within one(1) year of the date appearing on this permit or the permit is automatically void. If work is started, any application for partial refund must be made within six months of the date appearing on this permit.
Lead Paint Abatement
Whenever any such work related to this Permit could result in the disturbance of lead based paint, the permit holder shall abide by all applicable paint activities provisions of the 'Lead Hazard Prevention and Elimination Act of 2008' and the EPA 'Lead Renovation, Repair and Painting rule' regarding lead-based include adherence to lead-safe work practices. For more information, go to http://ddoe.dc.gov, Lead and Healthy Housing.

Director:	Permit Clerk
Nicholas A. Majett	Stacie Williams

TO REPORT WASTE, FRAUD OR ABUSE BY ANY DC GOVERNMENT OFFICIAL, CALL THE DC INSPECTOR GENERAL AT 1-800-521-1639
FOR CONSTRUCTION INSPECTION INQUIRIES CALL (202) 442-9557
TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442-9557.

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Remittance Source Document

OFFICE OF FINANCE AND TREASURY
6/13/2012 9:50 AM
Date:
Office: DCRA Term: WFE-25\VK9
Batch: 16139 Batch Date 6/13/2012
Cashier: OFT02
Trans #: 14
DCRA Rcpt: 01031235
Comment/Document: B1210085
Payment Total: $94.98
Payment Distribution:

2103	CR0 (3012)	10001 Build		$4.15
2103	CR0 (3012)	10001 Build		$41.45
2103	CR0 (3012)	10001 Build		$41.45
2103	CR0 (3012)	10001 Build		$4.15
6710	CR0 (3012)	60300-ops20		$0.34
6710	CR0 (3012)	60300-ops20		$3.44
			CK Tendered:	$279.18

INVOICE

Date: June 13, 2012

Invoice Number: 1032250

Customer:

Mailing Address:

Address of Work: 1501 U ST NW
Washington, DC 20009

Permit: B1210085

Type of Permit: Alteration and Repair

Acct Code:	Fees:	Description:
3012-3012-1000-2103	$4.15	Enhanced Service Fee - Filing Fee
3012-3012-1000-2103	$41.45	Alteration & Repair Permit Fee
3012-3012-6030-6710	$0.34	Enhanced Service Fee - Green Building
3012-3012-6030-6710	$3.44	Green Building Fee
3012-3012-1000-2103	$41.45	Addition/Alteration/Repair - Filing Fee
3012-3012-1000-2103	$4.15	Enhanced Services Fee - Permit Fee
Invoice Total:	**$94.98**	

Created By: Stacie Williams

Department of Consumer and Regulatory Affairs

Permit Operations Division
1100 4th Street SW
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Received: Plans: Application

Date: 6/12/2012

Applicant/Agent: Phone No.:

Engineering Coordinator: Aaron Easterling

Job Classification: Job No:

Address of Project:

1501 U ST NW

B1210085

Existing Use: Restaurant

Proposed Use: Restaurant

Permit Type: Alteration and Repair

Existing No. of Stories: 4

Prop no of Stories: 1

SSL: 0189 0059

Description of Work:

Install ANSUL R-102 3-gallon commercial kitchen hood fire suppression system in existing hood - 24 Seven

Required Reviews: (Checked boxes only)	Reviewer:	Completion Time:	Review Status:
☐ Fine Arts:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☑ Historic:	[signature]	☐ AM ☑ PM	☑ Approved ☐ HFC ☐ Conf. w/Applicant
☐ Public Space/DDOT:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☐ Zoning:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☐ Soil Erosion/DDOE:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☐ DC Water:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☐ Mechanical:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☐ Plumbing:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☐ Health/DOH:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☐ Electrical:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☐ Elevator:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☑ Fire Protection:	AB 6/12/12	☐ AM ☐ PM	☑ Approved ☐ HFC ☐ Conf. w/Applicant
☑ Structural:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☐ Green Review:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant
☐ Chinatown Review:		☐ AM ☐ PM	☐ Approved ☐ HFC ☐ Conf. w/Applicant

PRE-FILE NUMBERS		ZONING DISTRICT	FILE NUMBER	PERMIT NUMBER	
N.C.P.C. No:	O.G. No:	R-5-B		B1210085	By:
H.P.A. No:	S.S.L. No: 0189 0059	Ward No: 1	Receipt No:	Date:	Receipt No:

GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUILDING AND LAND REGULATION ADMINISTRATION PERMIT SERVICE CENTER
dcra.dc.gov

FJ-14868459

BLRA-33
(Rev.10/2011)

APPLICATION FOR CONSTRUCTION PERMITS ON PRIVATE PROPERTY

(PRINT IN INK OR TYPE, DO NOT WRITE IN SHADED AREAS)

CLEARANCE TO FILE
By_____Date_____

ERASING, CROSSING OUT, WHITING OUT, OR OTHERWISE ALTERING ANY ENTERED INFORMATION WILL VOID THIS APPLICATION

(A) ALL APPLICANTS MUST COMPLETE ITEMS 1 THRU 32

1 Address of Proposed Work:	Suite No.	2. Lot	3. Square	4. Application Date
1501 U STREET NW		0059	0189	6/8/2012

5 Owner of Building or Property	6 Address (*include Zip Code*)	7 Phone
William G Basiliko Trustee	1804 11th St., N.W., Washington, DC 20001	202-232-7108

8 Agent for Owner: (*if applicable*)	9. Address (*include Zip Code*)	10. Phone
Guardian Fire Protection Services, LLC	7668 Standish Place, Rockville, MD 20855	301-840-7100

11. Type of Proposed Work (Select only one) ALL APPLICANTS MUST COMPLETE SECTIONS AF AND AG

- [ ] New Building(B)
- [ ] Addition(B)
- [ ] Addition Alteration Repair(B)
- [x] Alteration and Repair(B)
- [ ] Raze Building(C)
- [ ] Retaining Wall(D)
- [ ] Fence(E)
- [ ] Shed(F)
- [ ] Garage(F)
- [ ] Awning(G)
- [ ] Sign(H)
- [ ] After Hours(I)
- [ ] Demolition(J)
- [ ] Blasting Operations(K)
- [ ] Christmas Tree Stand(L)
- [ ] Fireworks Stand(L)
- [ ] Exterior Cleaning Information(M)
- [ ] Capacity Placard(N)
- [ ] Fire Retardant Paint(O)
- [ ] Flag Pole(P)
- [ ] Observation Stand(Q)
- [ ] Scaffolding Information (R)
- [ ] Soil Boring(S)
- [ ] Tower Crane(T)
- [ ] Foundation Only(U)
- [ ] Underground Storage Tank(V)
- [ ] Water And Damp Proofing(W)
- [ ] Sheeting and Shoring(X)
- [ ] Tenant Layout(Y)
- [ ] Swimming Pool(Z)
- [ ] Special Sign(AA)
- [ ] Projection(AB)
- [ ] Excavation only (AC)
- [ ] Tent(AD)
- [ ] Antenna (AE)

12. Description of Proposed Work
Install ANSUL R-102 3-gallon commercial kitchen hood fire suppression system in existing hood - 24 Seven

13 Existing Use(s) of Building or Property	14 Ex. No of Stories of Bldg	15 Ex. No of Dwelling Units	Official Use Only Miscellaneous FEE
Restaurant	4	0	$
16 Proposed Use(s) of Building or Property	**17 Prop. No of Stories of Bldg**	**18 Prop. No of Dwelling Units**	**By: / Date:**
Restaurant	4	0	

19 Starting Date	20 Completion Date of work	21 Method of Removing Construction Debris	22 Does the proposed work involve **disturbing the earth** or razing a building?
		[ ] Pick-up Truck [ ] Dumpster [ ] Other (*specify*)	[ ] Yes, answer q. 23 [x] No, SKIP q. 23-27

23. Is the area of disturbed earth more than 50 sq. ft?	24. Soil Erosion Control Methods	25. Area of Offsite Drainage	26. No of Footings or Columns	27 Size of Footings or Columns
Yes, answer **q. 24-25** No, SKIP **q. 24-25**		sq. ft		

ALWAYS SIGN THE APPLICATION ON PAGE 3 (SECTION I)

Complete Section B if the proposed work is **new building, addition or alteration.** (Page 2)
Complete Section C if the proposed work is **razing a building.** (Page 2)
Complete Section D if the proposed work is a **retaining wall.** (Page 2)
Complete Section E if the proposed work is a **fence.** (Page 3)
Complete Section F if the proposed work is a **shed/garage.** (Page 3)
Complete Section G if the proposed work is an **awning.** (Page 3)
Complete Section H if the proposed work is a **sign.** (Page 3)

OFFICIAL USE ONLY

	R	P	H	A	
M					
P					
E					W Yes No
F					PLANS
S					No Sm Lg

28. Existing Stories Plus:	29. Proposed Stories Plus:	30. Existing Stories Penthouse: [ ] Yes [✓] No	31. Proposed Stories Penthouse: [ ] Yes [✓] No	32. Is this related to a Stop Work order: [ ] Yes [✓] No

(B) NEW BUILDING ,ADDITION, & ALTERATION (COMPLETE ITEMS B-1 THRU B-37)

B-1. Architect's Name:	B-2. D.C. Lic. No.:	B-3. Architect's Address: (include Zip Code)	B-4. Phone:
B-5. Engineer's Name:	B-6. D.C. Lic. No.:	B-7. Engineer's Address: (include Zip Code)	B-8. Phone:
B-9. Building Contractor's Name: Guardian Fire Protection Services, LLC	B-10. D.C. Lic. No.:	B-11. Contractor's Address: 7668 Standish Place, Rockville, MD 20855	B-12. Phone: 301-840-7100

B-13. Type of Construction:	B-14. Fire Suppression:	B-15. Booster Pump:	B-16. Total Lot Area :	B-18. Present Gross Floor Area of Bldg.:	B-17. Breakdown of Lot Area (=100%)		
[✓] Masonry [ ] Steel [ ] Wood [ ] Other [ ] Concrete	[ ] Fully Sprinklered [ ] Partially Sprinklered [ ] Standpipe System [✓] None [ ] Other	[ ] New [ ] Existing [✓] None	1200.00 Sq. ft	4206.00	a. building		%
					b. paved area		%
					c. greenery		%

B-19. Proposed Gross floor Area of Bldg.:	B-20. Length:	B-21. Width:	B-22.Height:	B-23. Floors involved in this permit:	B-24. Projection beyond building line?
4206.00	0.00	0.00	0.00	[ ] All [✓] Floors 1	[ ] Yes, Answer q. B-23 to B-27 [✓] No. SKIP q. B-23 to B-27

B-25. Number and type of projection:	B-26. Distance of Projection: ft.	B-27. Width of Projection: Ft.	B-28. Width of Building frontage: Ft	B-29. Signature of Owner (projection only):

B-30. Water or Sewer Excavation:	B-31. Driveway Construction:	B-32.Sheeting/Shoring Necessary:	B-33. Elevators Involved:	B-34. No. and Type of Elevator:	B-35. Plans Certified by Engineer:
[ ] Yes [✓] No	[ ] Yes [✓] No	[ ] Yes [✓] No	[ ] Yes, Answer B-34. [✓] No		[✓] Yes, Cert. Attached [ ] No

B-36. Estimated Cost of Work
(a) New/Add.: $ 0.00
(b) Alt/Repair $ 2645.00
Total $ 2645.00

OFFICIAL USE ONLY

Alter/Repair FEE	New Const. FEE	Filing Fee	TOTAL PERMIT FEE
$	$	$	$

B-37. Volume of New Bldg. or Addition	By:	Date:	By:	Date:	By:	Date:	By:	Date:
0.00 Cubic ft.								

(C) RAZING A BUILDING (COMPLETE ITEMS C-1 THRU C-18)

C-1. Insurance Company:	C-2. Policy or Cert. No.:	C-3. Policy Expiration Date:	C-4. Raze Method:

C-5. Building Material:	C-6. Raze Entire Building:	C-7. Building is Condemned:	C-8. Building is Vacant:	C-9. Building has Vault:	C-10. Disconnect Utilities :
	[ ] Yes [ ] No	[ ] Yes [ ] No	[ ] Yes [ ] No	[ ] Yes [ ] No	[ ] Yes [ ] No

C-11. Length:	C-12. Width:	C-13. Height:	C-14. Volume:	OFFICIAL USE ONLY		
				Fee:$	By:	Date :

C-15. Is Building an Accessory Structure:	C-16. Asbestos in the building?	C-17. Party Wall:	C-18.Owners Notified:
[ ] Yes [ ] No	[ ] No [ ] Yes,location	[ ] Yes [ ] No	[ ] Yes [ ] No

(D) RETAINING WALL (COMPLETE ITEMS D-1 to D-6)

The retaining wall will not obstruct any accessible parking required by D.C. Zoning Regulations

D-1. Cost of work,$:	D-2. Material:	D-3. Height:	D-4. Color:	D-5. Location:
				[ ] Entirely on Owner's Land [ ] Party Line with Adjacent Neighboring Land *

*If party wall , the owner of the adjoining property must agree to the erection of the retaining wall and this application

D-6. Address of Adjoining Owner:	OFFICIAL USE ONLY		
	Fee: $	By:	Date:

(E) FENCE (COMPLETE ITEMS E-1 THRU E-5)

E-1. Material and Type:	E-2.Height	E-3.Color:	E-4. Location: ☐ Entirely on Owner's Land ☐ Party Line with Adjacent Neighboring Land*

*If party fence, the owner of the adjoining property must agree to the erection of the fence and this application

E-5. Address of Adjoining Owner:	OFFICIAL USE ONLY		
	Fee: $	By:	Date:

(F) SHED OR GARAGE (COMPLETE ITEMS F-1 THRU F-9)

F-1. Number:	F-2. Length: Ft.	F-3. Width: Ft.	F-4. Area: Sq. ft	F-5. Height : Ft.	F-6.Volume: cu. ft	OFFICIAL USE ONLY Fees:

F-7. Est. Cost of work: $	F-8. Material of sides	F-9. Color:	By:	Date:

(G) AWNING (COMPLETE ITEMS G-1 THRU G-10

G-1. Number:	G-2. Color:	G-3. Type ☐ Folding ☐ Fixed:	G-4. Projections: Beyond Bldg. Line_____ in. Beyond pt of attachment_____ in.	G-5. Height of Lowest Part of awning: (a)_____ft Above sidewalk (b) _____ft Above parking (c) _____ft Above grade	OFFICIAL USE ONLY Fees:

G-6. Material of Frame:	G-7. Material of Covering:	G-8. Lettering on awning ☐ Yes ☐ No	G-9. Fixed Posts: ☐ Yes ☐ No	G-10. Over Side-Walk café: ☐ Yes ☐ No	By:	Date:

(H) SIGN (COMPLETE ITEMS H-1 THRU H-20)

H-1. Number:	H-2. Electric Signs: ☐ Yes, Answer q. H-3 to H-8 ☐ No, SKIP q. H-3 to H-8	H-3. Type: ☐ Incandes ☐ Fluoresc ☐ Neon	H-4. Power: VA	H-5. Electrical Contractor: Business License Number:

H-5. Address of Electrical Contractor: (include zip)	H-6. Signature of Licensed Electrician :	H-7. Phone No.	H-8. License No.

H-9. Height relative to building and ground	H-10. Material of Sign:	H-11. Type of Sign:	H-12. Color:
(a) _____ft_____ in above sidewalk (b)_____ft_____ in above roof (c)_____ft_____ in is building height (d)_____ft_____ in above projection of Window (e) _____ft_____ in from roof to sign's bottom			

H-13. Width: Ft.	H-14. Length: Ft.	H-15. Area of Sign: Sq. ft	H-16. Width of Business frontage: Ft.

H-17. C of O No for Bldg.:	H-18. Sign Contractor Name:	OFFICIAL USE ONLY				
		Sign FEE		Elect. FEE		Total FEE
H-19. Sign Contractor's Address:	H-20. Phone:	$		$		$
		By:	Date:	By:	Date:	By: Date:

(I) AFTER HOURS (COMPLETE ITEMS I-1 THRU I-8)

I-1.Type of permit:	I-2. Existing Permit No:	I-3. Date of Operation From:	I-4. Date of Operation To:	OFFICIAL USE ONLY Fee:	
I-5. Hours of Operation From:	I-6. Hours of Operation To:	I-7. 500 ft from Residential Zone/Hotel: ☐ Yes ☐ No	I-8. Located in Residential Zone: ☐ Yes ☐ No	By:	Date:

(J) DEMOLITION (COMPLETE ITEMS J-1 THRU J-5)

J-1. Type of Demolition:	J-2. Type of Walls	J-4. Roof Remain: ☐ Yes ☐ No	OFFICIAL USE ONLY Fee:	
J-3. Number of Exterior Walls Removed	J-5. Are Walls Load-Bearing: ☐ Yes ☐ No		By:	Date:

(K) BLASTING OPERATIONS (COMPLETE ITEM K-1)

K-1.Type of structure:	OFFICIAL USE ONLY		
	Fee:	By:	Date:

(L) CHRISTMAS TREE STAND OR FIREWORKS STAND (COMPLETE ITEMS L-1 THRU L-10)

L-1. No. of Stands:	L-2. Stand Location:	L-3. Electrical Permit No.:		OFFICIAL USE ONLY Fee:
L-4. Electrical Use: ☐ Yes ☐ No	L-5. Letter of Authorization: ☐ Yes ☐ No	L-6. Starting Date:		By:
L-7. Expiration Date:	L-8. Power Requirements:	L-9. Site Plan: ☐ Yes ☐ No	L-10. Surveyors Plat: ☐ Yes ☐ No	Date:

(M) EXTERIOR CLEANING INFORMATION (COMPLETE ITEMS M-1 THRU M-4)

M-1. Exterior Cleaned:	M-2. Material Used:	OFFICIAL USE ONLY Fee:	
M-3. Scaffolding: ☐ Yes ☐ No	M-4. Location of Scaffold:	By:	Date:

(N) CAPACITY PLACARD (COMPLETE ITEMS N-1 THRU N-13)

N-1. Name:	N-2. Max Occupancy Load:	N-3. Location:	N-4. Sprinkler: ☐ Yes ☐ No	N-5. Bathroom Requirements satisfied: ☐ Yes ☐ No	N-6. Exit Requirements Satisfied: ☐ Yes ☐ No

N-7.Room	N-8. Name of Area	N-9. Floor Location:	N-10. Type of Seating:	N-11.Net Square ft:	N-12.Capacity Use:	N-13. Max Allowable Capacity:
N-7A.	N-8A.	N-9A.	N-10A.	N-11A.	N-12A.	N-13A.
N-7B.	N-8B.	N-9B.	N-10B.	N-11B.	N-12B.	N-13B.
N-7C.	N-8 C.	N-9 C.	N-10 C.	N-11 C.	N-12 C.	N-13C.

OFFICIAL USE ONLY		
Fee:	By:	Date:

(O) FIRE RETARDANT PAINT (COMPLETE ITEMS O-1 THRU O-4)

O-1. Quantity of Paint(Gallons):	O-2. Painted Surfaces:	OFFICIAL USE ONLY Fee:	
O-3. Painted surfaces Location:	O-4. Sq. Footage Painted:	By:	Date:

(P) FLAG POLE (COMPLETE ITEMS P-1 THRU P-5)

P-1. Pole Location:	P-2. Site Location:		OFFICIAL USE ONLY	
			Fee:	
P-3. Pole Height:	P-4. Projection Distance:	P-5. Attached to Building: ☐ Yes ☐ No	By:	Date:

(Q) OBSERVATION STAND (COMPLETE ITEMS Q-1 THRU Q-5)

Q-1. Name of Function:	Q-2. Starting Date:		OFFICIAL USE ONLY	
			Fee:	
Q-3. Ending Date:	Q-4. Hours of Use From:	Q-5. Hours of Use To:	By:	Date:

(R) SCAFFOLDING INFORMATION (COMPLETE ITEMS R-1 THRU R-5)

R-1. No. of Stories:	R-2. Engineer of Record:	R-4. Location of Scaffold:	OFFICIAL USE ONLY	
			Fee:	
R-3. Building Permit No.:	R-5. Engineer Signature: ☐ Yes ☐ No		By:	Date:

(S) SOIL BORING (COMPLETE ITEMS S-1 THRU S-3)

S-1. No. of Bores:	S-2. Location of Bores:	S-3. Site Plan: ☐ Yes ☐ No	OFFICIAL USE ONLY		
			Fee:	By:	Date:

(T) TOWER CRANE (COMPLETE ITEMS T-1 THRU T-5)

T-1. Crane Location:	T-3. Duration Date From:	T-4. Duration Date To:	OFFICIAL USE ONLY	
			Fee:	
	T-2. Crane Pad Approved: ☐ Yes ☐ No	T-5. Site Plan: ☐ Yes ☐ No	By:	Date:

(U) FOUNDATION ONLY (COMPLETE ITEMS U-1 THRU U-5)

U-1. Type of Foundation	U-5. Total Cubic Feet:		OFFICIAL USE ONLY	
			Fee:	
U-2. Removal of Trees: ☐ Yes ☐ No	U-3. Underpinning Required: ☐ Yes ☐ No	U-4. Required Notification to Adjacent Property Owner: ☐ Yes ☐ No	By:	Date:

(V) UNDER GROUND STORAGE TANK (COMPLETE ITEMS V-1 THRU V-2)

V-1. Size of Tank: Gallons	OFFICIAL USE ONLY		
	Fee:	By:	Date:
V-2. Location of Tank:			

(W) WATER AND DAMP PROOFING (COMPLETE ITEMS W-1 THRU W-2)

W-1. Sq feet Affected:	OFFICIAL USE ONLY		
	Fee:	By:	Date:
W-2. Location:			

(X) SHEETING AND SHORING (COMPLETE ITEMS X-1 THRU X-7)

X-1. Removal of Trees: ☐ Yes ☐ No	X-2. Underpinning Required: ☐ Yes ☐ No	X-3. Required Notification to adjacent property owner: ☐ Yes ☐ No	OFFICIAL USE ONLY Fee:	
X-4. Tiebacks: ☐ Yes ☐ No	X-5. DC Surveyors Plat Submitted: ☐ Yes ☐ No	X-6. Plans Certified by D.C. Licensed Engineer: ☐ Yes ☐ No	X-7. No. of Cubic ft Removed:	By: / Date:

(Y) TENANT LAYOUT (COMPLETE ITEMS Y-1 THRU Y-3)

Y-1. First Occupant in Space: ☐ Yes ☐ No	Y-3. Type of Tenant Layout:	OFFICIAL USE ONLY Fee:	
Y-2. Floor Location of Tenant Layout:		By:	Date:

(Z) SWIMMING POOL (COMPLETE ITEMS Z-1 THRU Z-12)

Z-1. Type of Swimming Pool:	Z-3. Fence: ☐ Yes ☐ No	Z-5. Pool Cover: ☐ Yes ☐ No	Z-6. D.C. Surveyor's Plat Submitted: ☐ Yes ☐ No	Z-9. Pool Type:	OFFICIAL USE ONLY Fee:	
Z-2. No. of Gallons:	Z-4. Height of Fence:	Z-7. Depth of Pool at High End:	Z-8. Depth of Pool at Lower End:	Z-10. Length:	Z-11. Width	Z-12. Area:	By: / Date:

(AA) SPECIAL SIGN (COMPLETE ITEMS AA-1 THRU AA-11)

AA-1. Application Change of Special Sign Artwork and copy:	AA-2. Existing Permit No.:	AA-5. Is the Applicant Seeking a "Temporary Permit":	AA-6. Face Direction of the Wall at St Frontage

AA-3. Is the Proposed Special Sign Located in a Residential Zoned Area: ☐ Yes ☐ No	AA-4. Is the Proposed Special Sign Wall Part of a Historic Building or a Historic District : ☐ Yes ☐ No	AA-7. Has the Applicant Completed an Affidavit that is in Compliance with the D.C."Clean Hands Act": ☐ Yes ☐ No	OFFICIAL USE ONLY Fee:	
AA-8. Is the Applicant Registered with the District of Columbia Office of Tax and Revenue : ☐ Yes ☐ No	AA-9. Does the Applicant have a Valid D.C Certificate of Good Standing : ☐ Yes ☐ No	AA-10. Proposed Dimensions of the Special Sign (Width): / AA-11. Proposed Dimensions of the Special Sign (Height):	By:	Date:

(AB) PROJECTION (COMPLETE ITEMS AB-1 THRU AB-12)

AB-1. Type of Projection:	AB-2. Is Projection Beyond Building Line: ☐ Yes ☐ No	AB-3. Number of Projections:	AB-4. Distance of Projection:	OFFICIAL USE ONLY
AB-5. Width of Projection	AB-6. Width of Building Frontage:	AB-7. Signature of owner: ☐ Yes ☐ No	AB-8. Street Name:	Fee:
AB-9. Street Width: Ft.	AB-10. Road Width: Ft.	AB-11. Sidewalk Width: Ft.	AB-12. Parking Restrictions:	By: / Date:

(AC) EXCAVATION ONLY (COMPLETE ITEM AC-1)

AC-1. No. of Cubic Feet Removed:	OFFICIAL USE ONLY		
	Fee:	By:	Date:

(AD) TENT (COMPLETE ITEMS AD-1 THRU AD-9)

AD-1. Total No. of Tents:	AD-2. Event Date From:	AD-3. Event Date To:	AD-4. Special Event Name:	AD-5. Certificate of Flame Resistance: ☐ Yes ☐ No	AD-6. Site Plan: ☐ Yes ☐ No

AD-7. Number of Tents:	AD-8. Length of Tent:	AD-9. Width of Tent:	OFFICIAL USE ONLY		
			Fee:	By:	Date:
AD-7A.	AD-8A.	AD-9A.			
AD-7B.	AD-8B.	AD-9B.			
AD-7C.	AD-8C.	AD-9C			

(AE) ANTENNA(COMPLETE ITEMS AE-1 THRU AE-20)

AE-1. Type of Antenna Proposed:	AE-2. Number of Existing Antennas on Site:	AE-3. Number of Proposed Antennas on Site:	AE-4. Replacement Antenna: ☐ Yes ☐ No	AE-5. Mount Type:	AE-6. Accessory Equipment Location:
AE-7. Existing and/or Proposed Equipment Cabinet Height:	AE-8. Existing and/or Proposed Equipment Platform Height:	AE-9. Existing and/or Screening Provided Height:	AE-10 Height of Building from the Grade to Roof:	**OFFICIAL USE ONLY** Fee:	
AE-11. Height of Building from the curb to Roof:	AE-12. Height of Proposed Antennas from the Grade to Roof:	AE-13. Height of Proposed Antennas from the Curb to Roof:	AE-14. Fully Mounted height of all Antennas and Equipment from the Roof and /or Parapet:	By:	Date:

AE-15. Office of Planning Recommendation Letter: ☐ Yes ☐ No	AE-16. Radio Frequency Letter: ☐ Yes ☐ No	AE-17. Scaled D.C. Surveyor's Plats: ☐ Yes ☐ No	AE-18. Scaled Plans Elevations and the Sheet Location within the Plans: ☐ Yes ☐ No	AE-19. Structural Certification: ☐ Yes ☐ No	AE-20. Screening Provided: ☐ Yes ☐ No

(AF) LEAD ABATEMENT (COMPLETE ITEMS AF-1 THRU AF-2)

AF-1. Was the structure Built before 1978: ☑ Yes [ ] No	AF-2. Removing more than 2 Sq Ft. of Lead Paint: [ ] Yes ☑ No	**OFFICIAL USE ONLY** Fee:	By:	Date:

(AG) GREEN BUILDING (COMPLETE ITEMS AG-1 THRU AG-13)

AG-1. Green Building: [ ] Yes ☑ No	AG-2. LEED Certificate Level :	AG-3. Owner :	AG-4. Scope of Project:	AG-5. Project Type:

AG-6. Green Building Standards:	AG-7. Other Standard:	AG-8. Energy Star Rating:	AG-9. Total Area for Green Building Fee:

AG-11. LEED Scorecard Provided: [ ] Yes [ ] No	AG-12. Green Communities Check List : [ ] Yes [ ] No	AG-13. Public Financing greater than 15%: [ ] Yes [ ] No	**OFFICIAL USE ONLY** Fee: By: Date:

AG-10. Green Design Elements:

- [ ] Cool Roof
- [ ] Energy Efficient HVAC System
- [ ] Energy Efficient Lighting
- [ ] Green Roof
- [ ] Greywater
- [ ] Geothermal System
- [ ] Hazard Reducing Product
- [ ] Hydro Power
- [ ] Low Emitting Windows
- [ ] Low Flush Toilets
- [ ] Low Flow Shower Heads
- [ ] Local Regional Building Materials
- [ ] Passive Solar Energy
- [ ] Permeable Concrete
- [ ] Plant Building Material
- [ ] Recycled Building Materials
- [ ] Wind Power Energy

(AH) APPLICANT'S SIGNATURE

A. OWNER: I hereby certify that I am the owner of the property, that the application and plans are complete and correct to the best of my knowledge, that if a permit (or permits) is issued, the construction will conform to the D.C. Construction Codes, the Zoning Regulations, and other applicable laws and regulations of the District of Columbia.

Signature of Owner_____ Address_____ Date_____

B. AGENT: I hereby certify that I have the authority of the owner to make this application. I declare that the application and plans are complete and correct to the best of my knowledge. The owner has assured me that if a permit (or Permits) is issued, the construction will conform to the D.C. Construction Codes, the Zoning Regulations, and other applicable laws and regulations of the District of Columbia

Signature of Agent_____ Address_____ Date_____

(AI) APPROVALS (DO NOT WRITE ON THIS PAGE; OFFICIAL USE ONLY):

A. PERMIT CONTROL

- ☐ 1. Fine Arts by: _____ Date: _____
- ☐ 2. Historic by: _____ Date: 6/12/12
- ☐ 3. Cap. Gateway by: _____ Date: _____
- ☐ 4. NCPC: _____ Date: _____
- ☐ 5. W.H./Obs. Precinct by: _____ Date: _____
- ☐ 6. Flood Control by: _____ Date: _____
- ☐ 7. WMATA by: _____ Date: _____
- ☐ 8. Condem. by: _____ Date: _____
- ☐ 9. Rental Accom. by: _____ Date: _____
- ☐ 10. Chinatown Distr. by: _____ Date: _____
- ☐ 11. Utility Clearance by: _____ Date: _____
- ☐ 12. General Liability Ins. Policy Clearance by: _____ Date: _____

B. CLEARANCE TO FILE PLANS

- ☐ 1. Zoning by: _____ Date: _____
- ☐ 2. DDOT – Permit and Records Division
  Access to Parking Street ☐ Street ☐ Alley
  Cleared by: _____ Date: _____
- ☐ 3. DDOT – Consumer Engineer
  Cleared by: _____ Date: _____
- ☐ 4. ERA – Erosion Control
  Cleared by: _____ Date: _____

Restrictions of the Permit: Historic Preservation Clearance for Interior Work Only. Approval does not extend to any exterior work, including alteration, replacement or installation of windows, doors, utility meters or other exterior features.

Signature and date: _____ 6/12/12

TO REPORT WASTE, FRAUD, OR ABUSE BY ANY D.C. GOVERNMENT OFFICIAL, CALL THE D.C. INSPECTOR GENERAL AT 1-800-521-1639

C. PLANS AND APPLICATION APPROVAL

- ☐ 1. Information Counter by: _____ Date: _____
- ☐ 2. Information Center by: _____ Date: _____
- ☐ (a) ABRA by: _____ Date: _____
- ☐ (b) Noise Control by: _____ Date: _____
- ☐ (c) Industrial Safety by: _____ Date: _____
- ☐ (d) Vector Control by: _____ Date: _____
- ☐ (e) D.C. Animal by: _____ Date: _____
- ☐ (f) Police Dept. by: _____ Date: _____
- ☐ 3. Zoning by: _____ Date: _____
  Zoning Update by: _____ Date: _____
  Zoning Overlay approval by : _____ Date: _____
- ☐ 4. DDOT – Permit and Records Division/Deposit #
  Sidewalk Deposit $ _____ Driveway Deposit $ _____
  by _____ Date _____
- ☐ 5. Water/Sewer Design Branch
  Consumer Eng. by: _____ Date _____
- ☐ 6. Environmental Regulation Administration
  - ☐ Environmental Policy Review
    Control No. _____
    by _____ Date _____
  - ☐ Erosion Control by: _____ Date _____
  - ☐ Storm Water Mgmt. by: _____ Date _____
    Plan No _____
  - ☐ Air Quality by: _____ Date _____
  - ☐ Underground Storage by: _____ Date _____
- ☐ 7. Mechanical Eng. Review by: _____ Date _____
- ☐ 8. Plumbing Eng. Review by _____ Date _____
- ☐ 9. Electrical Eng. Review by: _____ Date _____
- ☐ 10. Health Plan Review
  - ☐ (a) Food Plan Review by: _____ Date _____
  - ☐ (b) Medical X-Ray Plan Rev. by: _____ Date _____
- ☐ 11. Fire Protection Plan Review by: _____ Date 6/12/12
- ☐ 12. D.C. Fire Dept. (Fire Prevention Plan Review Section) by: _____ Date _____
- ☐ 13. Elevator Plan Rev. Sec. by: _____ Date _____
- ☐ 14. Plumbing Insp Rev. by: _____ Date _____
- ☐ 15. Construction Insp. Branch (Field Check) by: _____ Date _____
- ☐ 16. Historic Pres. Div. by: _____ Date _____
- ☐ 17. EISF: _____ Date 6/12/12
- ☐ 18. Structural Eng. by: _____ Date _____
- ☐ 19. Permit and Certificate Issuance Counter by: _____ Date _____
- ☐ 20. QC By: _____ Date 6-13-12

ZONING

C of O Number _____ Date _____

Existing Use(s) _____

Proposed Use _____

☐ New Bldg
☐ P.O.D.
☐ File in room 2124

Job No. B1200085 | BZA Case No | PUD Order No.

DDOT – PUBLIC SPACE

Street Name: _____

Street Width: _____

Road Width: _____

Sidewalk Width: _____

Parking: _____

Restrictions:

(B) NEW BUILDING, ADDITION, & ALTERATION (COMPLETE ITEMS 28 THRU 60)

28. Architect's Name:	29. D.C. Lic. No.:	30. Architect's Address: *(include Zip Code)*	31. Phone:
Bill Maiden	3656	4930 Wisconsin Ave NW 20016	
32. Engineer's Name:	33. D.C. Lic. No.:	34. Engineer's Address: *(include Zip Code)*	35. Phone
36. Building Contractor's Name:	36A. D.C. Lic. No.	37. Contractor's Address	38. Phone:

39. Type of Construction	40. Fire Suppression:	41. Booster Pump	42. Total Lot Area	43. Breakdown of Lot Area (= 100 %)	
☒ Masonry ☐ Steel ☒ Wood ☐ Other ☒ Concrete	☐ Fully Sprinklered ☐ Standpipe System ☐ Partially Sprinklered ☒ None ☐ Other _____	☐ New ☐ Existing ☒ None	sq. ft.	a. building	%
				b. paved area	%
				c. greenery	%

44. Present Gross Floor Area of Bldg.	45. Proposed Gross Floor Area of Bldg.	46. Floors involved in this permit	47. Projection beyond building line?
700 sq. ft	700 sq. ft.	☒ All ☐ Floors _____	☐ Yes, Answer q. 48 -52 ☒ No. SKIP q. 48-52

48. Number and type of projection:	49. Distance of projection:	50. Width of projection:	51. Width of building frontage ft. 52. Signature of Owner (projection only):

53. Water or Sewer Excavation?	54. Driveway Construction?	55. Sheeting/Shoring Necessary?	56. Elevators Involved?	57. No and type of elevator	58. Plans Certified by Engineer?
☒ Yes ☐ No	☐ Yes ☒ No	☒ Yes ☐ No	☐ Yes, answer q. 57 ☒ No	N/A	☐ Yes, cert. attached ☐ No

59. Estimated Cost of Work	OFFICIAL USE ONLY							
(a) New/Add.: $ _____ (b) Alt/ Repair $ 40,000 Total $ 40000	Alter/Repair FEE		New Const. FEE		Filing Fee		TOTAL PERMIT FEE	
	$		$		$		$	
60. Volume of New Bldg. or Addition cubic ft.	By:	Date:	By:	Date:	By:	Date:	By:	Date:

(C) RAZING A BUILDING (COMPLETE ITEMS 61 THRU 83)

61. Raze Contractor's Name:	62. Contractor's Address: *(include Zip Code)*	63. Phone:

64. Insurance Company	65. Policy or Cert. Number	66. Expiration Date	67. Raze Method

68. Building Material	69. Raze Entire Building?	70. Building Condemned?	70A. Building Vacant?	71. Public Space Vault?	72. Disconnect Water and/or Sewer?	73. Size of Water Connection
	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	in.

74. Plumber's Name:	75. D.C. Lic. No.	76. Length	77. Width	78. Height	79. Volume	80. Party Wall?
		ft.	ft.	ft.	ft.	☐ Yes ☐ No

81. Asbestos in the Building?	82. Raze Contractor Signature	OFFICIAL USE ONLY		
No ☐ Yes, location _____		FEE	By:	Date:
	83. Owner's Signature	$		

(D) RETAINING WALL (COMPLETE ITEMS 84 THRU 93) The retaining wall will not obstruct any accessible parking required by D.C. Zoning Regulations

84. Cost of Work $	85. Material:	86. Height	87. Color	88. Location: ☐ Entirely on Owner's Land Party Line with Adjacent Neighboring Land *

* If party wall, the owner of the adjoining property must agree to the erection of the retaining wall and this application

89. Signature of Adjoining Owner:	90. Phone: Home Work	OFFICIAL USE ONLY		
		FEE	By:	Date:
91. Address of Adjoining Owner:	92. Lot:	93. Square:	$		