



ZONING SELF-CERTIFICATION FORM



Project Address(es)	Square	Lot(s)	Zone District(s)	ANC(s)/Single Member
1122 East Capitol St. NE	0988	0069	R-4	6A
1122 East Capitol St. NE				
1122 East Capitol St. NE				

CERTIFICATION

The undersigned agent hereby certifies that the following zoning relief is required from the Board of Zoning Adjustment in this matter pursuant to:

Relief Sought	☐	§3103.2 - Use Variance	☐	§3103.2 - Area Variance	☒	§3104.1-Special Exception
Pursuant to Subsections						

Pursuant to 11 DCMR §3113.2, the undersigned agent certifies that:

- (1) the agent is duly licensed to practice law or architecture in the District of Columbia;
- (2) the agent is currently in good standing and otherwise entitled to practice law or architecture in the District of Columbia; and
- (3) the applicant is entitled to apply for the variance or special exception sought for the reasons stated in the application.

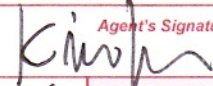
The undersigned agent and owner acknowledge that they are assuming the risk that the owner may require additional or different zoning relief from that which is self-certified in order to obtain, for the above-referenced project, any building permit, certificate of occupancy, or other administrative determination based upon the Zoning Regulations and Map. Any approval of the application by the Board of Zoning Adjustment (BZA) does not constitute a Board finding that the relief sought is the relief required to obtain such permit, certification, or determination.

The undersigned agent and owner further acknowledge that any person aggrieved by the issuance of any permit, certificate, or determination for which the requested zoning relief is a prerequisite may appeal that permit, certificate, or determination on the grounds that additional or different zoning relief is required.

The undersigned agent and owner hereby hold the District of Columbia Office of Zoning and Department of Consumer and Regulatory Affairs harmless from any liability for failure of the undersigned to seek complete and proper zoning relief from the BZA.

The undersigned owner hereby authorizes the undersigned agent to act on the owner's behalf in this matter.

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)

 Owner's Signature		Owner's Name (Please Print) Christopher Cushman	
 Agent's Signature		Agent's Name (Please Print) Kim Jones	
Date	7-2-14	D.C. Bar No.	
or	Architect Registration No.	ARC100353	

OFFICE OF ZONING DETERMINATION

(11 DCMR §3113.2)

Based upon review of the application and self-certification, this application is

☐	Accepted for filing.
☐	Referred to the Office of the Zoning Administrator, Department of Consumer and Regulatory Affairs, for determination of proper zoning relief required.
☐	Rejected for failure to comply with the provisions of
☐	11 DCMR §3113.2; or ☐ 11 DCMR - Zoning Regulations.
Explanation _____	

Signature		Date	
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