BEFORE THE BOARD OF ZONING ADJUSTMENT
DISTRICT OF COLUMBIA

FORM 135 – ZONING SELF-CERTIFICATION

Project Address(es)	Square	Lot(s)	Zone District(s)
1020 F St NE	0960	0043	R4

Single-Member Advisory Neighborhood Commission District(s): ANC6A

CERTIFICATION

The undersigned agent hereby certifies that the following zoning relief is requested 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			11-403.2, 11-404.1, 11-2001.3

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 form 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	Jennifer Gode	Owner's Name (Please Print)	Gunnar Gode / JENNIFER GODE		
Agent's Signature		Agent's Name (Please Print)	Jonathan Kuhn		
Date	11/12/14	D.C. Bar No.		or Architect Registration No.	ARC101029

FOR OFFICIAL USE ONLY

Based upon review of the application and self-certification, the Office of Zoning determines, pursuant to 11 DCMR §3113.2, this application is

☐	Accepted for filing.
☐	Referred to the Office of the Zoning Administrator within DCRA, 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 _____

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

Board of Zoning Adjustment
District of Columbia
CASE NO.18933
EXHIBIT NO.6

Case No. _____