PRE-FILE NUMBERS		ZONING DISTRICT	FILE NUMBER	PERMIT NUMBER	
P.A.D.C. No.:	O.G. No.:	DCOR-5-B			By:
H.P.A. No.:	S.L. No.:	Ward No.:	Receipt No.:	Date:	Receipt No.:

★ ★ ★ GOVERNMENT OF THE DISTRICT OF COLUMBIA

B.L.R.A.-33 (Rev. 10/91)

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUILDING AND LAND REGULATION ADMINISTRATION: PERMIT PROCESSING DIVISION (727-7050)

APPLICATION FOR CONSTRUCTION PERMITS ON PRIVATE PROPERTY

(PRINT IN INK OR TYPE. DO NOT WRITE IN SHADED AREAS OR ON PAGE 4)

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 27

1. Address of Proposed Work:	Suite No.:	2. Lot:	3. Square:	4. Application Date:
2105 N Street, N.W.	—	214	69	11-9-2000

5. Owner of Building or Property:	6. Address: *(include Zip)*	7. Phone:
John S. Cogswell	2105 N. St. NW Washington DC 20037	Work: Home: (202) 296-5708
8. Agent for Owner: *(if applicable)*	**9. Address: *(include Zip)***	**10. Phone:**
Richard Van Os Keuls	1507 Gridley Lane Silver Spring, MD 20902	Work: — Home: 301-649-9854

11. Type of Proposed Work *(check all applicable boxes)*:

- ☐ New Building
- ☒ Addition
- ☐ Alteration and Repair
- ☐ Raze Building
- ☐ Retaining Wall
- ☐ Fence
- ☐ Shed
- ☐ Awning
- ☒ Garage
- ☐ Sign
- ☒ Other *(Specify)* ~~deck~~ deleted 12/12/00

12. Description of Proposed Work:

Build carport over existing car "pit" ~~and build deck between existing dwelling and carport~~, per ~~preliminary~~ plan dated ~~9-19-00~~, 11/29/00.

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
residential SFD	2	1	$
16. Proposed Use(s) of Building or Property:	**17. Prop. No. of Stories of Bldg.:**	**18. Prop. No. of Dwelling Units:**	By: Date:
residential same	2	1	

19. Starting Date of Work:	20. Completion Date of Work:	21. Method of Removing Construction Debris:	22. Does the proposed work involve **disturbing the earth** or razing a building?
~~December~~ 2000 2001 ?	~~April~~ 2001 ?	☒ Pick-up Truck ☐ Dumpster ☐ Other *(specify)*:	☒ Yes, answer q. 23 ☐ 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 of Columns:
☒ Yes, answer q. 24-25 ☐ No. SKIP q. 24-25	silt fence	none sq. ft.	2	4 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)

BZA Case No. 16228 Exhibit No. 4

OFFICIAL USE ONLY	R	P	H	A	
M					
P					
E					W ☐ Yes ☐ No
F					PLANS
S					☐ No ☐ Sm. ☐ Lg.

2.0307 wd-375

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

28. Architect's Name:	29. Lic. No.:	30. Architect's Address: *(include Zip)*	31. Phone:
32. Engineer's Name:	33. Lic. No.:	34. Engineer's Address: *(include Zip)*	35. Phone:
36. Building Contractor's Name:	36A. 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?**
sq. ft.	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 elev.:	58. Plans Certified by Engineer?
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes, answer **q. 57** ☐ No, SKIP **q. 57**		☐ Yes, cert. is attached ☐ No

59. Estimated Cost of Work:
(a) New/Add.: $ 5,500
(b) Alt/Rep.: $ _____
Total: $

60. Volume of New Bldg. or Addition: _____ cubic ft.

OFFICIAL USE ONLY

Alter/Repair FEE		New Const. FEE		Filing Fee		TOTAL PERMIT FEE	
$		$		$		$	
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)*	63. Phone:
64. Insurance Company:	65. Policy or Certif. No.: 66. Expir. 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. Lic. No.	76. Length: ft.	77. Width: ft.	78. Height: ft.	79. Volume: cu. ft.	80. Party Wall? ☐ Yes ☐ No

81. Asbestos in the Building? ☐ No ☐ Yes. Location _____

82. Raze Contractor Signature:

83. Owner's Signature:

OFFICIAL USE ONLY

FEE	By:	Date:
$		

(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: ft.	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: Work Home	
91. Address of Adjoining Owner:	92. Lot:	93. Square:

OFFICIAL USE ONLY

FEE	By:	Date:
$		

(E) FENCE (COMPLETE ITEMS 94 THRU 102)

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

94. Material and type:	95. Height:	96. Color:	97. Location:
	ft.		☐ 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.

98. Signature of Adjoining Owner:	99. Phone: Work / Home	OFFICIAL USE ONLY FEE	By:	Date:
100. Address of Adjoining Owner:	101. Lot:	102. Square:	$	

(F) SHED OR GARAGE (COMPLETE ITEMS 103 THRU 113)

103. Number:	104. Length:	105. Width:	106. Area:	107. Height:	108. Volume:	109. Estimated Cost of Work:
1	20 ft.	10 ft.	200 sq. ft.	9 ft.	1,800 cu. ft.	$ 5,500

OFFICIAL USE ONLY — FEE $ — By: — Date:

110. Material of Roof:	111. Material of Sides:	112. Wall thickness:	113. Color:
rubber membrane	wood	☒ External (4) inches ☐ Party ( ) inches	to be determined

(G) AWNING (COMPLETE ITEMS 114 THRU 123)

114. Number:	115. Color:	116. Type:	117. Projections:	118. Height of lowest part of awning:
		☐ Folding ☐ Fixed	Beyond bldg. line _____ in. Beyond pt. of attachm. _____ in.	(a) _____ ft above sidewalk (b) _____ ft above parking (c) _____ ft above grade

OFFICIAL USE ONLY — FEE $ — By: — Date:

119. Material of Frame:	120. Material of Covering:	121. Lettering on Awning?	122. Fixed posts?	123. Over sidewalk cafe?
		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

(H) SIGN (COMPLETE ITEMS 124 THRU 144)

124. Number:	125. Electric Signs?	126. Type:	127. Power	128. Electrical Contractor:
	☐ Yes, answer q. 126-132 ☐ No, SKIP q. 126-132	☐ Incandes. ☐ Fluoresc. ☐ Neon	_____ VA	Lic. No.:

129. Address of Electrical Contractor *(include Zip)*	130. Signature of Licensed Electrician:	131. Phone:	132. License No.:

133. Height relative to building and ground:	134. Material of Sign:	135. Type of Sign:	136. Color:
(a) _____ ft _____ in above sidewalk (b) _____ ft _____ in above roof (c) _____ ft _____ in is bldg height (d) _____ ft _____ in above projection or window (e) _____ ft _____ in from roof to sign's bottom			

137. Width:	138. Length:	139. Area of Sign:	140. Width of Business Frontage:
ft.	ft.	sq. ft.	ft.

141. C of O Number for Building:	142. Sign Contractor Lic. No.:

OFFICIAL USE ONLY

Sign FEE		Elect. FEE		Total FEE	
$		$		$	
By:	Date:	By:	Date:	BY:	Date:

143. Sign Contractor's Address:	144. Phone:

(I) 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; and 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: John S. Coogswell Address: 2105 N Street, N.W. Date: Oct. 10, 2000

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: [signature] Address: 1507 Gridley Lane Silver Spring, MD 20902 Date: 9-19-00

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

A. PERMIT CONTROL

- ☑ 1. Fine Arts by: not in jurisdiction Date: 11-9-00
- ☐ 2. Historic by: _____ Date: _____
- ☐ 3. PADC by: _____ Date: _____
- ☐ 4. Cap. Gateway by: _____ Date: _____
- ☐ 5. W.H./ Obs. Precinct by: _____ Date: _____
- ☐ 6. Flood Control by: _____ Date: _____
- ☐ 7. WMATA by: _____ Date: _____
- ☐ 8. Condem. by: _____ Date: _____
- ☐ 9. RLA by: _____ Date: _____
- ☐ 10. Rental Accom. by: _____ Date: _____
- ☐ 11. Chinatown Distr. by: _____ Date: _____
- ☐ 12. Utility Clearance by: _____ Date: _____
- ☐ 13. General Liability Ins. Policy Clearance by: _____ Date: _____

B. CLEARANCE TO FILE PLANS

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

Restrictions of the Permit:

No electrical work approved on this permit

SEPARATE ELECTRICAL, PLUMBING AND MECHANICAL INSTALLATION PERMITS ARE REQUIRED

C. PLANS AND APPLICATION APPROVAL

- ☐ 1. Information Counter by: AM Date: 11.9.00
- ☐ 2. Information Center by: AM Date: 12/4/00
  - ☐ (a) ABC Board 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: _____
- ☐ 4. DPW - Permit and Records Division/Deposit #
  Sidewalk Deposit $_____ Driveway Deposit $_____
  by: _____ Date: _____
- ☐ 5. Water/Sewer Design Branch
  Consumer Eng. by: N/A Date: _____
- ☐ 6. Environmental Regulation Administration
  - ☐ Environmental Policy Review
    Control No.: _____
    by: _____ Date: _____
  - ☐ Erosion Control by: _____ Date: _____
  - ☐ Storm Water Mgmt. by: _____ Date: _____
  - Plan No. _____
- ☐ 7. Mechanical Eng. Review by: _____ Date: _____
- ☐ 8. Plumbing Eng. Review by: _____ Date: _____
- ☐ 9. Electrical Eng. Review by: N/A Date: 11/9/00
- ☐ 10. Health Plan Review
  - ☐ (a) Food Plan Review by: _____ Date: _____
  - ☐ (b) Medical X-ray Plan Rev. by: _____ Date: _____
- ☐ 11. D.C. Fire Dept. (Fire Prevention Plan Review Section) by: _____ Date: _____
- ☐ 12. Elevator Plan Rev. Sec. by: _____ Date: _____
- ☐ 13. Plumbing Insp. Rev. by: _____ Date: _____
- ☐ 14. Construction Insp. Branch (Field Check) by: _____ Date: _____
- ☐ 15. Historic Pres. Div. by: _____ Date: _____
- ☐ 16. Structural Eng. by: _____ Date: _____
- ☐ 17. Permit and Certificate Issuance Counter By: _____ Date: _____
- ☐ 18. Q.C. By: _____ Date: _____

ZONING

C of O Number _____ Date _____

Existing Use(s) _____

☐ New bldg.
☐ P.O.D.
☐ File in room 320

Job No.: BZA Case No.: PUD Order No.:

DPW — PUBLIC SPACE

Street Name: _____
Street Width: _____
Road Width: _____
Sidewalk Width: _____
Parking: _____
Restrictions: _____

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
PERMIT SERVICE CENTER

BUILDING PERMIT CONTROL BATCH SHEET

Date: 11 / 9 /2000 **Intake Time:** 1283 ☐AM ☐PM

LOG NO. **00 -** 27963

Time At Engr.'s Counter: ☐AM ☐PM

Review Completion Due: ☐AM ☐PM

Address: 2105 N St NW

Time Review Completed: ☐AM ☐PM

REQUIRED REVIEWS (Checked boxes only)	REVIEWER	TIME	REVIEW STATUS	JOB SCREENED ?
☐ PUBLIC SPACE		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐Ref. to DPW ☐ Conf. w/ Applicant	
☑ ZONING	[illegible]	IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☒HFC ☐Ref. to BZA ☐Ref. to Zoning Administrator☐ ☐ Conf. w/ Applicant	
☐ SOIL EROSION ☐ STORMWATER MGMT.		IN ☐AM ☐PM OUT ☐AM ☐PM	☐Approved ☐HFC ☐Ref. to DOH ☐Conf. w/ Applicant	
☐ AIR QUALITY ☐ EIS		IN ☐AM ☐PM OUT ☐AM ☐PM	☐Approved ☐HFC ☐Ref. to DOH ☐Conf. w/ Applicant	
☐ WATER AND SEWER		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Ref. to WASA ☐ Conf. w/ Applicant ☐WASA Deposit Required	
☑ MECHANICAL/PLUMBING		IN ☐AM ☐PM OUT ☐AM ☐PM	☐Approved ☐HFC ☐ Conf. w/ Applicant	
☐ HEALTH (Food & Medical)		IN ☐AM ☐PM OUT ☐AM ☐PM	☐Approved ☐HFC ☐ Conf. w/ Applicant	
☑ ELECTRICAL N/A	[illegible]	IN 2:30 ☐AM ☐PM OUT 2:35 ☐AM ☐PM	☐Approved ☐HFC ☐ Conf. w/ Applicant	
☐ ELEVATOR		IN ☐AM ☐PM OUT ☐AM ☐PM	☐Approved ☐HFC ☐ Conf. w/ Applicant	
☐ FIRE PROTECTION		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	
☑ STRUCTURAL		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	

Remarks:

Zoning: Provide D.C. Surveyor's plats & build, survey

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
PERMIT SERVICE CENTER

Resubmittal

BUILDING PERMIT CONTROL BATCH SHEET

Date: 12/4/2000 Intake Time: 109 ☐AM ☐PM	LOG NO. **00 -** 29048 Time At Engr.'s Counter: ☐AM ☐PM	Review Completion Due: ☐AM ☐PM
Address: 2105 N St NW		Time Review Completed: ☐AM ☐PM

REQUIRED REVIEWS (Checked boxes only)	REVIEWER	TIME	REVIEW STATUS	JOB SCREENED ?
☐ PUBLIC SPACE		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐Ref. to DPW ☐ Conf. w/ Applicant	
☐ ZONING	MB	IN 2:49 ☐AM ☐PM OUT 2:50 ☐AM ☐PM	☐ Approved ☐HFC ☐Ref. to BZA ☐ Ref. to Zoning Administrator ☐ Conf. w/ Applicant	
☐ SOIL EROSION ☐ STORMWATER MGMT.		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐Ref. to DOH ☐ Conf. w/ Applicant	
☐ AIR QUALITY ☐ EIS		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐Ref. to DOH ☐ Conf. w/ Applicant	
☐ WATER AND SEWER		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Ref. to WASA ☐ Conf. w/ Applicant ☐ WASA Deposit Required	
☐ MECHANICAL/PLUMBING		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	
☐ HEALTH (Food & Medical)		IN ☐AM ☐PM OUT ☐AM ☐PM	☐Approved ☐HFC ☐ Conf. w/ Applicant	
☐ ELECTRICAL		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	
☐ ELEVATOR		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	
☐ FIRE PROTECTION		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	
☐ STRUCTURAL		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	

Remarks:

12/4/00 3:45 p.m.

Zoning: Builder plats are inadequate; deck not reflected on plats; Connection between deck, principal structure and accessory structure may require BZA approval

Applicant is n't available

Mr. Bello
442-4674

Result. N 6

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
PERMIT SERVICE CENTER

BUILDING PERMIT CONTROL BATCH SHEET

Date: 12/14/2000 Intake Time: 2:44 ☐AM ☐PM

LOG NO. 00 - 29523

Time At Engr.'s Counter: ☐AM ☐PM

Review Completion Due: ☐AM ☐PM

Time Review Completed: ☐AM ☐PM

Address: 2105 N St NW

REQUIRED REVIEWS (Checked boxes only)	REVIEWER	TIME	REVIEW STATUS	JOB SCREENED ?
☐ PUBLIC SPACE		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Ref. to DPW ☐ Conf. w/ Applicant	
☐ ZONING	[illegible]	IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐Ref. to BZA ☐ Ref. to Zoning Administrator ☐ ☐ Conf. w/ Applicant	
☐ SOIL EROSION ☐ STORMWATER MGMT.		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐Ref. to DOH ☐ Conf. w/ Applicant	
☐ AIR QUALITY ☐ EIS		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐Ref. to DOH ☐ Conf. w/ Applicant	
☒ WATER AND SEWER	N/A	IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Ref. to WASA ☐ Conf. w/ Applicant ☐ WASA Deposit Required	N/A
☐ MECHANICAL/PLUMBING		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	
☐ HEALTH (Food & Medical)		IN ☐AM ☐PM OUT ☐AM ☐PM	☐Approved ☐HFC ☐ Conf. w/ Applicant	
☐ ELECTRICAL	N/A	IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	
☐ ELEVATOR		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	
☐ FIRE PROTECTION		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	
☐ STRUCTURAL		IN ☐AM ☐PM OUT ☐AM ☐PM	☐ Approved ☐HFC ☐ Conf. w/ Applicant	

Remarks:

Proposal Proposal exceeds permitted % of lot occupancy

BZA ONLY

BZA

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
ENVIRONMENTAL REGULATION ADMINISTRATION
BUILDING PERMIT APPLICATION SUPPLEMENTAL FORM - ENVIRONMENTAL QUESTIONNAIRE

PROJECT ADDRESS: 205 N St. NW LOT 214 SQUARE 69

NOTE: PLEASE ANSWER ALL 12 QUESTIONS IN THIS QUESTIONNAIRE. BY CHECKING EITHER COLUMN "YES" OR "NO" FOR EACH QUESTION. IF YOU ANSWER "YES" TO ANY OF THE QUESTIONS, YOU SHOULD CONTACT THE CORRESPONDING OFFICE(S) INDICATED IN COLUMN "CONTACT PERSON/OFFICE", AS SOON AS POSSIBLE. UNTIL THIS APPLICATION IS REVIEWED AND APPROVED BY THE CONCERNED OFFICE(S), THE PERMIT WILL NOT BE ISSUED.

	SCOPE OF PROJECT	Y	N	CONTACT PERSON/ OFFICE	OFFICE USE
1.	Does the total cost of the project exceed $1 million? This does not apply if project is for internal (tenant space) renovation only and there will be no change in use of the building.		✓	(202) 645-6617, EIS Coordinator, Office of the Administrator, Environmental Regulation Administration (ERA)	
2.	Will the work to be performed involve the installation, removal, abandonment, or repair of underground storage tank (UST) systems?		✓	(202) 645-6080, Branch Chief, Underground Storage Tank Branch, Pesticides, Hazardous Waste and Underground Storage Tank Division (PHWUSTD), ERA	
3.	Will the work to be performed involve the assessment or clean-up of soils associated with the release of materials from an underground storage tank (UST)?		✓	(202) 645-6080, Branch Chief, Underground Storage Tank Branch, PHWUSTD, ERA (202) 645-6093, Branch Chief, Engineering and Planning Branch, Air Resources Management Division (ARMD), ERA	
4.	Will the work to be performed involve the assessment or clean-up of groundwater associated with the release of materials from an underground storage tank (UST)?		✓	(202) 645-6080, Branch Chief, Underground Storage Tank Branch, PHWUSTD, ERA (202) 645-6093, Branch Chief, Engineering and Planning Branch, ARMD, ERA (202) 645-6601, Branch Chief, Water Quality Control Branch, Water Resources Management Division (WRMD), ERA	
5.	Will the proposed project involve the installation or drilling of wells other than for the purposes stated in questions 3 and 4?		✓	(202) 645-6601, Branch Chief, Water Quality Control Branch, WRMD, ERA (202) 645-6093, Branch Chief, Engineering and Planning Branch, ARMD, ERA	
6.	Will the proposed project involve the generation, treatment, storage, disposal or transportation of chemicals or other substances which may be considered hazardous?		✓	(202) 645-6080, Branch Chief, Hazardous Waste Management Branch, PHWUSTD, ERA	

Continued on Reverse Side

	SCOPE OF PROJECT	Y	N	CONTACT PERSON/ OFFICE	OFFICE USE
7.	Will the proposed project involve construction which will disturb the sediment in rivers, streams or wetlands?		✓	(202) 645-6601, Branch Chief, Water Quality Control Branch, WRMD, ERA	
8.	Will the proposed use involve the construction of a facility for the handling, transfer, storage, disposal or treatment of solid waste, medical waste, or recyclable materials?		✓	(202) 645-6617, EIS Coordinator, Office of the Administrator, ERA	
9.	Will the proposed project result in the discharge into the air of gases, dust, or the creation of any objectionable odors?		✓	(202) 645-6093, Branch Chief, Engineering and Planning Branch, ARMD, ERA	
10.	Will the proposed project involve the construction of a parking lot or garage with a capacity of greater than 50 vehicles?		✓	(202) 645-6093, Branch Chief, Engineering and Planning Branch, ARMD, ERA	
11.	Will the proposed project result in an increase in vehicular traffic in the area surrounding the project?		✓	(202) 645-6093, Branch Chief, Engineering and Planning Branch, ARMD, ERA	
12.	Will the proposed project result in the discharge of chemicals into the sanitary sewer system?		✓	(202) 767-7642, Chief, Pretreatment Division, Department of Public Works	

AFFIDAVIT

I hereby certify that I have the authority of the owner of the property to make this application. I declare that the answers to the twelve questions in this Questionnaire are complete and correct to the best of my knowledge.

Signature Richard Van Os Kevels Name (please print) Richard Van Os Kevels

Address 1507 Gridley Lane Date 9-19-00

Silver Spring, MD 20902 Phone 301-649-9854

OFFICIAL USE ONLY

ERA APPROVAL BY _____ Date _____

Name (Print) _____ Contact Number (202) 645-

COMMENTS AND PERMIT RESTRICTIONS: _____

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUILDING AND LAND REGULATION ADMINISTRATION
941 NORTH CAPITOL STREET NE, ROOM 2000, WASHINGTON, DC 20002
Telephone 442-4460 Fax 442-4865

FILED JOB NOTIFICATION

BLRA 59 - Rev. 10/99

Applicant	File Job # 1133-D
Job Address 2105 N ST. NW	Date Filed 12/[illegible]/10
Mailing Address	

This is to inform you that review of the above referenced application for a building permit will be completed on _____. For information on the review status of your project, you may call 442-4547. Please reference the job number noted above to assure that you receive accurate information.

Preliminary screening of your application indicates that:

- ☐ Board of Zoning Adjustment relief is required. (Contact Zoning Division at 442-4560 for direct filing or letter of referral)
- ☐ No additional information is required to be submitted at this time.
- ☐ You must submit the items checked on this form in order to complete the review of your application. Please bring the requested documents to the Plans File Room (Room 2224).

ZONING - Phone # 442-4560	WATER AND SEWER (WASA) - Phone # 442-4648
☐ Two (2) sets of preliminary architectural plans ☐ Two (2) original DC Surveyor's plats ☐ Two (2) sets of roof structure plans ☐ Completed Roof Structure Data Sheet (form appended) ☐ Two (2) topographic site plans indicating grading, ingress/egress routes and surface parking ☐ Completed "Antenna Data Sheet" (form appended) ☐ Completed Zoning Design Data Sheet (standard format appended) ☐ Other _____	☐ One (1) site plan showing at least the following: 1. Water lateral from building to point of connection, meter pit or meter vault, and backflow preventer. 2. Sewer lateral and point of connection, with clean-out or manhole at the property line. 3. Sewer invert elevation at clean-out and at point of connection. ☐ Completed Wastewater Discharge Questionnaire (form appended) ☐ Proof of water meter approval (Call 612-3500 for information) ☐ Other _____ N/A
ENVIRONMENTAL REVIEW - Phone # 442-9518	**PUBLIC SPACE - Phone # 442-4670**
☐ One (1) set of plans for erosion and sediment showing total square footage of disturbed earth ☐ One (1) set of plans for storm water management ☐ Soils report (unstable soils) ☐ Completed Site Development Submittal Information (form appended) ☐ Completed Environmental Questionnaire ☐ Completed Environmental Impact Screening Form (EISF) ☐ Other _____	Driveway ☐ Eight (8) site plans, showing dimensions from intersection to driveway, and length and width of driveway Trees ☐ Four (4) site plans, showing dimensions from curb to tree space, and the type and number of trees New Sidewalk Construction ☐ Four (4) site plans, showing the dimensions from curb to property line, the length and width of the sidewalk, and the name and type of brick or cement ☐ Other _____

ENGINEERING - phone # 442-4460

General

☐ Building Code design data (standard format appended)

☐ Professional Engineer's stamp and signature on the following submitted plans:

☐ mechanical ☐ electrical

☐ plumbing ☐ structural

☐ Structural certification (standard form appended)

☐ Key plan of whole floor showing location of exits

☐ Copy of previously approved plans

☐ Utility Easement covenant

☐ Covenant for opening on property line

☐ Building plat showing recorded lot (call Surveyor's Office at 442-4690)

Electrical

☐ Electrical legend and notes

☐ Electrical equipment schedule

☐ Lighting and power floor plans

☐ Power riser diagram

Fire Protection

☐ Floor plans with fire alarm device locations and types

☐ Fire alarm riser diagram

☐ Floor plans with sprinkler locations, device types and locations

☐ Key plan showing existing and proposed standpipe locations

☐ Fire Alarm annunciator panel layout

☐ Site plan showing Fire Protection features (e.g., fire service, fire hydrants, fire department connection, fire pump), as applicable

☐ Plans with fire protection features related to elevators (e.g., sprinklers, valves, heat detectors, smoke detectors) at top and bottom of shaft and in the EMR, as applicable.

☐ Door and door hardware schedule

☐ Details of fire-resistive protection of structural columns, beams and floors (e.g., materials, thicknesses, arrangement, UL numbers)

Projections

☐ One (1) mylar and two (2) blueprints for the projections into public space

☐ Projection modification covenant

Mechanical

☐ Mechanical floor plans showing system layout and equipment specifications

☐ Risers of mechanical ventilation and/or exhaust systems, with dampers

☐ Mechanical equipment schedule with capacities

☐ Plans showing following data:

☐ Venting and safety provisions for machinery room(s)

☐ Parking garage ventilation

Plumbing

☐ Plumbing floor plans with layout of following systems:

☐ sanitary ☐ storm

☐ water ☐ gas

☐ Plumbing riser diagrams for following systems:

☐ sanitary ☐ storm

☐ water ☐ gas

☐ Site utility plan with building sewer and water service

☐ Water and Sewer Availability slip

Health

☐ Food service equipment plans with equipment schedule

☐ DC Health Notes (standard format appended) on food service equipment plans

Structural

☐ Exterior elevations of the building

☐ Cross sections of the building with wall thicknesses and floor to floor dimensions

☐ Details of structural columns, beams and walls (materials and dimensions)

☐ Details of footings and/or foundations, as applicable

☐ Schedule of UL design numbers for walls, floors, roof, columns and beams, as applicable.

☐ Interior layout of the building partitions

☐ **Other** _____

_____

_____

_____

_____

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