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

★ ★ ★ GOVERNMENT OF THE DISTRICT OF COLUMBIA

BLRA-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: |
|---|---|---|---|---|
| 1828 WISCONSIN AVENUE, NW | | 826 | 1298 | 7.16.01 |

| 5. Owner of Building or Property: | 6. Address: *(include Zip)* | 7. Phone: |
|---|---|---|
| CAVIT OZTURK | 6809 LUMSDEN ST. MCLEAN VA 22101 | Work: 703 863 1530<br>Home: 703 556 9836 |
| 8. Agent for Owner: *(if applicable)* | 9. Address: *(include Zip)* | 10. Phone:<br>Work:<br>Home: |

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)* INTERIOR DESIGN WORK

12. Description of Proposed Work:

CONVERTING EXISTING APARTMENT FLOORS INTO AN INN. ALL HVAC, MECHANICAL AND ELECTRICAL WORK COMPLETED UNDER A SEPARATE PERMIT FOR THE APARTMENTS. THIS PHASE INVOLVES INTERIOR DESIGN WORK ONLY.

| 13. Existing Use(s) of Building or Property: | 14. Ex. No. of Stories of Bldg.: | 15. Ex. No. of Dwelling Units: | Official Use Only<br>Miscellaneous FEE<br>$ |
|---|---|---|---|
| FIRST FLOOR: RESTAURANT & RETAIL<br>2ND & 3RD FLOORS: RESIDENTIAL | BSMT + 3 FLS | 8 | By: Date: |
| **16. Proposed Use(s) of Building or Property:** | **17. Prop. No. of Stories of Bldg.:** | **18. Prop. No. of Dwelling Units:** | |
| FIRST FLOOR: RESTAURANT & RETAIL<br>2ND & 3RD FLOORS: INN | NO CHANGE | 8 ROOMS | |

| 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? |
|---|---|---|---|
| OCT' 2001 | DEC' 2001 | ☐ Pick-up Truck ☐ Dumpster<br>☐ Other *(specify)*: NONE | ☐ Yes, answer **q. 23**<br>☑ 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**<br>☐ No, SKIP **q. 24-25** | | sq. ft. | | 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)

2-0307 wd-375

**OFFICIAL USE ONLY**

| | R | P | H | A | |
|---|---|---|---|---|---|
| M | | | | | |
| P | | | | | |
| E | | | | | W ☐ Yes ☐ No |
| F | | | | | PLANS |
| S | | | | | ☐ No<br>☐ Sm. ☐ Lg. |

BZA Case No. 16797 Exhibit No. 9

Board of Zoning Adjustment District of Columbia CASE NO.16797 EXHIBIT NO.9

## (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: |
|---|---|---|---|
| MURAY ANAHTAR, AIA | 5373 | 7925 GLENBROOK RD. SUITE 9C BETHESDA MD 20814 | 3019517933 |
| 32. Engineer's Name: | 33. Lic. No.: | 34. Engineer's Address: *(include Zip)* | 35. Phone: |
| N/A | | | |
| 36. Building Contractor's Name: | 36A. Lic. No.: | 37. Contractor's Address: | 38. Phone: |
| SELF | | | |

| 39. Type of Construction | 40. Fire Suppression: | 41. Booster Pump: | 42. Total Lot Area: | 43. Breakdown of Lot Area (= 100%): |
|---|---|---|---|---|
| ☑ Masonry ☐ Steel<br>☐ Wood ☐ Other:<br>☐ Concrete | ☐ Fully Sprinklered ☐ Standpipe System<br>☐ Partially Sprinklered ☑ None<br>☐ Other: | ☐ New<br>☐ Existing<br>☑ None | 2832 sq. ft. | a. Building: 2832 %<br>b. Paved Area: 0 %<br>c. Greenery: 0 % |

| 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?** |
|---|---|---|---|
| 7285 sq. ft. | 7285 sq. ft. | ☐ All ☑ Floors 2ND & 3RD | ☐ Yes, answer **q. 48-52**<br>☑ 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<br>☑ No | ☐ Yes<br>☑ No | ☐ Yes<br>☑ No | ☐ Yes, answer **q. 57**<br>☑ No, SKIP **q. 57** | | ☐ Yes, cert. is attached<br>☑ No |

59. Estimated Cost of Work:
(a) New/Add.: $ 0
(b) Alt/Rep.: $ 0
Total: $ 0

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: | 77. Width: | 78. Height: | 79. Volume: | 80. Party Wall? |
|---|---|---|---|---|---|---|
| | | ft. | ft. | ft. | cu. ft. | ☐ Yes ☐ No |

| 81. Asbestos in the Building? | 82. Raze Contractor Signature: | **OFFICIAL USE ONLY** |
|---|---|---|
| ☐ No ☐ Yes, Location _____ | 83. Owner's Signature: | $ 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: | 87. Color: | 88. Location: |
|---|---|---|---|---|
| $ | | ft. | | ☐ Entirely on Owner's Land<br>☐ 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 | **OFFICIAL USE ONLY** |
|---|---|---|
| 91. Address of Adjoining Owner: | 92. Lot: 93. Square: | $ 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: ft. | 96. Color: | 97. 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.

| 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: ft. | 105. Width: ft. | 106. Area: sq. ft. | 107. Height: ft. | 108. Volume: cu. ft. | 109. Estimated Cost of Work: $ | OFFICIAL USE ONLY: FEE $ By: Date: |
|---|---|---|---|---|---|---|---|
| 110. Material of Roof: | 111. Material of Sides: | 112. Wall thickness:: ☐ External ( ) inches ☐ Party ( ) inches | | | | 113. Color: | |

## (G) AWNING (COMPLETE ITEMS 114 THRU 123)

| 114. Number: | 115. Color: | 116. Type: ☐ Folding ☐ Fixed | 117. Projections: Beyond bldg. line ____ in. Beyond pt. of attachm. ____ in. | 118. Height of lowest part of awning: (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? ☐ Yes ☐ No | 122. Fixed posts? ☐ Yes ☐ No | 123. Over sidewalk cafe? ☐ Yes ☐ No |
|---|---|---|---|---|
| ✓ | | | | |

## (H) SIGN (COMPLETE ITEMS 124 THRU 144)

| 124. Number: | 125. Electric Signs? ☐ Yes, answer **q. 126-132** ☐ No, SKIP **q. 126-132** | 126. Type: ☐ Incandes. ☐ Fluoresc. ☐ Neon | 127. Power ____ VA | 128. Electrical Contractor: 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: (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 | 134. Material of Sign: | 135. Type of Sign: | 136. Color: |
|---|---|---|---|

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

| 141. C of O Number for Building: | 142. Sign Contractor Lic. No.: | OFFICIAL USE ONLY: Sign FEE $ By: Date: | Elect. FEE $ By: Date: | Total FEE $ 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:_____ 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:_____

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

### A. PERMIT CONTROL

- ☐ 1. Fine Arts by: _____ Date: _____
- ☐ 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:

### C. PLANS AND APPLICATION APPROVAL

- ☐ 1. Information Counter by: _____ Date: _____
- ☐ 2. Information Center by: _____ Date: _____
  - ☐ (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: _____ 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: _____ Date: _____
- ☐ 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: _____

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

### ZONING

C of O Number _____ Date _____
Existing Use(s) _____

☐ New bldg.
☐ P.O.D.
☐ File in room 329

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

### DPW — PUBLIC SPACE

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

**DEPARTMENT OF HEALTH**
**ENVIRONMENTAL HEALTH ADMINISTRATION**

# LEAD HAZARD CONTROL PERMIT QUESTIONNAIRE AND EXEMPTION FORM

Project Address: 1832 WISCONSIN AVE, NW

Name of Owner(s): CAVIT OZTURK Name of Contractor: SELF

Phone Number: 703 863 1530 Square #: 826 Lot #: 1298 Ward #: ____

Project Start Date: OCT '2001 Project End Date: DEC '2001

Building Type:

| | | | | |
|---|---|---|---|---|
| Commercial - | | Government - | | FIRST FLOOR: RESTAURANT & RETAIL |
| Office | ☐ | Federal | ☐ | |
| Mixed Use (Explain) | ✓ | District | ☐ | |
| Residential - | | Institutional - | | |
| Multi-family | ☐ | Hospital | ☐ | 2ND & 3RD FLRS: INN |
| Single-Family | ☐ | Museum | ☐ | |
| Elderly or handicapped | ☐ | School/Child Development | ☐ | |

1. **Is the project planned in response to a child being identified as lead poisoned? YES ☐ NO ☑**

2. **Is the project designed to eliminate or reduce lead-based paint hazards in a pre-1978 building or structure? YES ☐ NO ☐**

**If you answer "YES'**, contact the Lead Division at 51 N Street, N.E., 3rd Floor (202) 535-2637 for a lead-based paint control permit application and notification form, unless an exemption listed below applies. **If you answer "NO"**, a permit is not required, but you are required to answer the following questions:

| SCOPE OF PROJECT | YES | NO | COMMENTS |
|---|---|---|---|
| 1. Is the project disturbing deteriorated lead based paint on surfaces totaling more than 2 square feet per room, or 20 square feet on exterior surfaces, or 10% of a building component with a small surface (such as a small painted window frame) involving the following: | | | |
| A. Removal and replacement of lead-based paint components, e.g. windows, doors and baseboards? | | | |
| B. Onsite stripping and removal of lead-based paint? | | | |
| C. Partial demolition or gutting of building? | | | |
| 2. Does the project involve the removal and covering of lead-contaminated soil? | | | |

## EXEMPTIONS

Please indicate the applicable exemption from the following list:

- ☐ Individuals who perform lead-based paint activities at residences which they own, unless the residence is occupied by a person or persons other than the owner or the owner's immediate family; unless any child under the age of 8 years resides, is expected to reside in, or regularly visits such housing.
- ☐ Housing for the elderly or persons with disabilities; unless any child under the age of 8 years resides, is expected to reside in, or regularly visits such housing.
- ☐ Any (0)-bedroom unit, such as an efficiency apartment.

## AFFIDAVIT

I declare that the information provided is accurate, true and complete to the best of my knowledge and belief, and/or I have the authority to represent the owner of the property to answer this application and sign on behalf of the company and/or persons listed as owners. I understand that if such information contained in this application false, I am subject to the penalty provisions of D.C. Law 11-221. Any fraud or misrepresentation on an application shall be grounds for automatic rejection and/or civil administrative penalties. I understand that failure to provide full disclosure of any of the requested or required information may result in rejection of this application for approval.

Cavit

SIGNATURE

7.16.01

DATE

Cavit Ozturk

PRINT NAME

**For Official Government Use Only**

PERMIT REQUIRED YES ☐ NO ☐ Reviewed By: Date

ENVIRONMENTAL HEALTH ADMINISTRATION
CONSTRUCTION PERMIT APPLICATION – SUPPLEMENTAL FORM – ENVIRONMENTAL QUESTIONNAIRE

PROJECT ADDRESS: 1832 WISCONSIN AVE, NW LOT: 826 SQUARE: 1298
PROJECT DESCRIPTION: CONVERTING EXISTING APARTMENT LEVELS INTO AN INN – INTERIOR DESIGN WORK ONLY

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 | YES | NO | CONTACT PERSON/OFFICE | OFFICE USE (Initial/Date) |
|---|---|---|---|---|
| 1. 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) 535-2289, EIS Coordinator, EHA | |
| 2. 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) 535-2525, Underground Storage Tank Division, EHA<br>(202) 535-2250, Air Quality Division, EHA | |
| 3. 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) 535-2525, Underground Storage Tank Division, EHA<br>(202) 535-2190, Water Quality Division, EHA<br>(202) 535-2250 Air Quality Division, EHA | |
| 4. Will the proposed project involve the installation or drilling of wells other than for the purposes stated in questions 3 and 4? | | ✓ | (202) 535-2190, Water Quality Division, EHA | |
| 5. Will the proposed project involve the generation, treatment, storage, disposal or transportation of chemicals or other substances which may be considered hazardous? | | ✓ | (202) 535-2290, Hazardous Waste Division, EHA | |
| 6. Will the proposed project involve construction that will disturb the sediment in rivers, streams or wetlands? | | ✓ | (202) 535-2190, Water Quality Division, EHA | |
| 7. Will the work to be performed involve the installation, removal, abandonment, or repair of an underground storage tank (UST) system? | | ✓ | (202) 535-2525, Underground Storage Tank Division, EHA | |
| 8. Will the proposed project result in the discharge into the air of gases, dust, or the creation of any objectionable odors? | | ✓ | (202) 535-2250, Air Quality Division, EHA | |
| 9. Will the proposed project involve the removal, handling, transportation, disposal, or encapsulation of asbestos?<br>**Please bring with you a copy of your asbestos survey, ten-day notification form, and asbestos abatement permit fee | | ✓ | (202) 535-2250, Air Quality Division, EHA | |
| 10. Was the building built before 1978? (Lead paint may be present.) | ✓ | | If you answer "Yes" to this question, please answer the questions and follow the instructions on the "Lead Hazard Control Questionnaire" to determine if you need a permit to conduct a Lead Abatement Project | |

**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 above questions in this Questionnaire are complete and correct to the best of my knowledge.

Signature [signature] Name (print) Carit eztunk

Address 6809 Lemsdon st mclean VA 22101 Date 7-16-01 Phone 7038631530

OFFICE USE ONLY

COMMENTS AND PERMIT RESTRICTIONS:

(USE REVERSE IF NECES

EHA Form # 99-1300 – Revise

DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS
Building and Land Regulation Administration
941 North Capitol Street NE, Suite 2000
Washington DC 20002
(202) 442-9557

# ENVIRONMENTAL INTAKE FORM

| Project Name: | Project Address: 1832 Wisconsen Ave NW 20007 Lot: 826 Square: 1298 |
|---|---|
| Filed Job Application # (if applicable): | Project Description: |

Owner: Cavit oztuerk Date: 7-16-01

Owner's address and phone #: 6809 Lumsden st mclean VA 22101 703 8631530

Authorized agent: _____

Address and Phone # of authorized agent: _____

| Scope of the Project | Yes | No | Instructions |
|---|---|---|---|
| 1. Is this project a residential structure within the R-1 through R-5-A zoning districts? | | ✓ | If yes, project is exempt. Skip to signature line. |
| 2. Is this project a single-family structure that is not in conjunction with the building of two or more units? | | ✓ | If yes, project is exempt. Skip to signature line. |
| 3. Is this project an accessory structure such as a garage, patio, swimming pool or fence? | | ✓ | If yes, project is exempt. Skip to signature line. |
| 4. Is the project solely an interior renovation with no change in the use of the building? | ✓ | | If yes, project is exempt. Skip to signature line. |
| 5. Is the project located in an Economic Development Zone, as defined in DC Law 7-177? | | ✓ | If yes, project is exempt. Skip to signature line. |
| 6. Is the project located within the Central Employment Area as defined in DC Zoning Regulations? (DCMR 11) | | ✓ | If yes, project is exempt. Skip to signature line. |
| 7. Does the total cost of the project exceed $1.38 million, including site preparation and construction? | | ✓ | If yes, and no exemption claimed, Environmental Impact Screening Form (EISF) required. |
| 8. Is the cost of this project $1.38 million or less? If yes, please answer all of the following questions: | ✓ | | If yes, complete A through G |
| A. Does the project site contain any species of plant or animal that is identified as threatened or endangered? | | ✓ | If yes, EISF required |
| B. Are any streams, lakes, ponds, springs or wetlands within or contiguous to the project site? | | ✓ | If yes, EISF required |
| C. Will the project result in an emission of odorous or other air pollutants from any source? | | ✓ | If yes, EISF required |
| D. Will any mature trees be removed from the site? | | ✓ | If yes, EISF required |
| E. Will construction be on land where the depth to the water table is less than 3 feet? | | ✓ | If yes, EISF required |
| F. Will blasting occur as part of the project? | | ✓ | If yes, EISF required |
| G. Will the project generate medical, infectious, radioactive or hazardous waste? | | ✓ | If yes, EISF required |

(over)

| Scope of the Project | Yes | No | Instructions |
|---|---|---|---|
| 9. Has an Environmental Impact Statement (EIS) been prepared pursuant to the National Environmental Policy Act of 1969 (NEPA), or a determination made that no EIS is needed, or has the functional equivalent of an EIS been prepared? | | ✓ | If yes, submit documentation to EIS Coordinator, DCRA |
| 10. Does the project involve only the operation, repair, maintenance, or minor alteration of public structures, facilities, mechanical equipment, or topographical features and involve negligible or no expansion of use beyond that previously existing? | | ✓ | If yes, skip to signature line |
| 11. Is an exemption claimed from the requirement to submit an Environmental Impact Screening Form pursuant to DCMR 20, Sec. 7202 that is not referred to in this form? If yes, describe the exemption and cite the relevant section of the regulations on an attachment. | | ✓ | If yes, describe on an attachment and submit to EIS Coordinator, DCRA |

I certify that all of the statements on this application are true and complete to the best of my knowledge and belief. I agree to comply with all applicable laws and regulations of the District of Columbia. The making of false statements on this application is punishable by criminal penalties (DC Code Ann. Sec. 22-2514)

Signature of Owner/Authorized Agent

OFFICIAL USE ONLY

Environmental Impact Screening Form required Yes ____ No ____ Referred to EIS Coordinator ____

DCRA Reviewer ____ Date ____

If yes, submit to EIS Coordinator
Department of Consumer and Regulatory Affairs
Building and Land Regulation Administration

Comments ____

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

March/2001

BLRA 33C

# CONTRACT AGREEMENT

**Name of Contractor/Owner** CAVIT OZTURK **Contractor's License No.** N/A

**Address of Contractor/ Owner** SELF **Date:** 7.16.01

| | |
|---|---|
| ADDRESS OF PROPOSED WORK 1832 WISCONSIN AVE, NW | LOT: 826 SQUARE: 1298 |
| OWNER OF BUILDING OR BUSINESS: CAVIT ÖZTÜRK | PHONE No: 703 863 1530 |
| DESCRIPTION OF PROPOSED WORK: CONVERTING EXISTING APARTMENT ON THE 2ND & 3RD FLOORS INTO AN INN - INTERIOR DESIGN WORK ONLY | |

## COST ESTIMATE

| | | |
|---|---|---|
| CONSTRUCTION e.g drywall, ceilings, framing, carpentry etc | $ 0 | |
| ELECTRICAL | $ 0 | |
| MECHANICAL | $ 0 | |
| PLUMBING | $ 0 | |
| FIRE PROTECTION e.g sprinkler system, fire alarm system, generator etc. | $ 0 | |
| DEMOLITION | $ 0 | |
| MISC/OTHER (please specify) | $ 0 | |
| **TOTAL** | $ 0 | INTERIOR DESIGN WORK ONLY |

The labor and material costs of counter tops, kitchen cabinets, floor coverings, tile work, caulking, patching and plaster repair, painting other than fire retardant paint, gutters and downspouts, not more than 160 square feet of gypsum board shall not be included in the cost estimate for permitting purposes. The entire list can be seen in the 1999 D.C Building Supplement Chapter 1 Section 107.3.

The foregoing terms, specifications and conditions are satisfactory and hereby agreed to. You are authorized to work as specified and payment will be made in the amount as outlined. Upon signing this agreement, the owner represents and warrants that he or she is the owner or the authorized agent of the owner of the aforesaid premises and that he or she has read this agreement.

**CONTRACTOR** SELF Date:
Signature & print

**OWNER OF BUILDING/BUSINESS** CAVIT OZTURK Date: 7.16.01
Signature & print

Upon signing this document, the owner and contractor declare that the cost of construction as specified above for the referenced project is true and correct to the best of their knowledge

Please fill out this agreement form in accordance with D.C Construction Code Supplement 1999, Chapter 1 Section 112.1.

# INSTRUCTIONS FOR ENVIRONMENTAL INTAKE FORM

DC Public Law 8-36, the Environmental Policy Act of 1989, requires that all District of Columbia agencies consider the environmental impact of all proposed major actions prior to issuing any approvals for such actions. The purpose of the Environmental Intake Form is to screen all applications for permits to ensure compliance with DC Public Law 8-36 (Environmental Policy Act of 1989). Every applicant for a building permit must complete this form for submission with the application for a permit. A copy of the Regulations of the Environmental Policy Act of 1989 is available for review in the Permit Service Center, Room 2300, 941 North Capitol Street NE. Or you can visit www.dcra.org on the Internet to find forms, laws and regulations, maps and links to other websites that provide information related to environmental policy review.

Department of Consumer and Regulatory Affairs (DCRA) staff will review the Environmental Intake Form and determine whether or not an Environmental Impact Screening Form (EISF) is required. If a determination is made that an EISF is not required, the application for a permit will proceed through its normal reviews. **If a determination is made that an EISF is required, no permit can be issued until interagency reviews of the EISF are completed, and a determination is made by the Director of DCRA that the proposed action will not result in substantial negative impact.**

Following are line-by-line instructions and resources for completing the Environmental Intake Form. Note that in addition to the resources provided below, all District of Columbia laws and regulations are available at local DC public libraries. Please note that all phone numbers are within the (202) area code.

1. **Is this project a residential structure within the R-1 through R-5-A zoning districts?**
   - If the answer is yes, go directly to the signature line.
   - If the answer is no, proceed to the next question.
   - If you don't know the zoning for this property, ask to speak to the Zoning Technician in Room 2300. In addition, the Zoning Regulations and zoning maps are available on the Internet at www.dcoz.dcgov.org.
2. **Is this project a single-family structure that is not in conjunction with the building of two or more units?**
   - If the answer is yes, go directly to the signature line.
   - If the answer is no, proceed to the next question.
3. **Is this project an accessory structure such as a garage, patio, swimming pool or fence?**
   - If the answer is yes, go directly to the signature line.
   - If the answer is no, proceed to the next question.
4. **Is the project solely an interior renovation with no change in the use of the building?**
   - If the answer is yes, go directly to the signature line.
   - If the answer is no, proceed to the next question.
5. **Is the project located in an Economic Development Zone, as defined in DC Law 7-177?**
   - If the answer is yes, go directly to the signature line.
   - If the answer is no, proceed to the next question.
   - For reference, a map of the Economic Development Zones is located in the Permit Service Center, Room 2300, 941 North Capitol Street NE. A copy of DC Law 7-177 is available from the Office of Documents, 441 4th Street NW.
6. **Is the project located within the Central Employment Area as defined in DC Zoning Regulations? (DCMR 11)**
   - If the answer is yes, go directly to the signature line.
   - If the answer is no, proceed to the next question.
   - For reference, a map of the Central Employment Area is located in the Permit Service Center, Room 2300, 941 North Capitol Street NE. The DC Zoning Regulations are available on the Internet at www.dcoz.dcgov.org.
7. **Does the total cost of the project exceed $1.42 million, including site preparation and construction?**
   - If the answer is yes, go directly to question # 9.
   - If the answer is no, proceed to question # 8.
8. **Is the cost of this activity is $1. 42 million or less?** If yes, please answer # 8A through # 8G and proceed to # 9:
   A. Does the project site contain any species of plant or animal that is identified as threatened or endangered?
   - There are three species listed as threatened or endangered in the District of Columbia: the bald eagle, Hay's Spring amphipod, and the shortnose sturgeon. Please call the Fisheries and Wildlife Division of the Department of Health at 535-2266 if you have further questions.

   B. Are any streams, lakes, ponds, springs or wetlands within or contiguous to the project site?
   - If uncertain, you may visit the Internet at www.dchealth.com\EHA\wqd\reports\htm – or call the Water Quality Division of the Department of Health at 535-2190.

   C. Will the project result in an emission of odorous or other air pollutants from any source?
   - Call 535-2506 if you have any questions.

   D. Will any mature trees be removed from the site?
   - For information regarding mature trees, call 727-1000 and ask for the Tree Division.

   E. Will construction be on land where the depth to the water table is less than 3 feet?
   - For information, you may call 535-2190.

   F. Will blasting occur as part of the project?

Over

G. Will the project generate medical, infectious, radioactive or hazardous waste?

9. **Has an Environmental Impact Statement been prepared under the National Environmental Policy Act of 1969 (NEPA), or a determination made that no EIS is needed, or has the functional equivalent of an EIS been prepared?**
   - If the answer is yes to any, please submit appropriate documentation for review by DCRA's EIS Coordinator.
   - If the answer is no, proceed to question # 10.
10. **Does the project involve only the operation, repair, maintenance, or minor alteration of public structures, facilities, mechanical equipment, or topographical features and involve negligible or no expansion of use beyond that previously existing?**
   - If the answer is yes, go directly to signature line.
   - If the answer is no, proceed to question # 11.
11. **Is exemption claimed from the requirement to submit an Environmental Impact Screening Form pursuant to any section of DC Municipal Regulations 20, Chapter 72 that is not referred to in this form?**
   - If the answer is yes, describe the exemption and cite the relevant section of the regulations on an attachment. A copy of DC Municipal Regulations 20, Chapter 72 (Regulations of the Environmental Policy Act of 1989) is available for review in the Permit Service Center, Room 2300, 941 North Capitol Street NE.
   - If the answer is no, continue to the signature line.