PRE-FILE NUMBERS		ZONING DISTRICT	FILE NUMBER	PERMIT NUMBER	
H.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)

BZA

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:
2304 First Street, NW		0075	3126	10.12.02

5. Owner of Building or Property:	6. Address: (include Zip)	7. Phone:
Mr. & Mrs. V. Aisher Smith	2229 First Street, NW Washington, DC 20001	Work: (202) 302-7276 Home: (202) 986-3793

8. Agent for Owner: (if applicable)	9. Address: (include Zip)	10. Phone: Work: 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)

12. Description of Proposed Work:

Restore Garage that was originally demolished because of structural deficiencies, Construct additions to rear area pursuant to submitted plans

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	3	1	$ By: Date:
16. Proposed Use(s) of Building or Property:	**17. Prop. No. of Stories of Bldg.:**	**18. Prop. No. of Dwelling Units:**	
Residential SFD (kitchen, bedroom, nursery	3	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?
Upon BZA approval	Four months after BZA approval	☑ 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	SEE ARCH DWG A-1	0 sq. ft.	1 FTG	94 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				
F				
S				

W: ☐ Yes ☐ No
PLANS:
☐ No ☐ Sm ☐ Lg

BZA #16962
Case No. 16962
Exhibit No. 10

Board of Zoning Adjustment
District of Columbia
CASE NO.16962
EXHIBIT NO.10

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

Architect's Name:	29. Lic. No.:	30. Architect's Address: *(include Zip)*	31. Phone:
Mr. Shawn Gizaun			(202) 737-4800
Engineer's Name:	**33. Lic. No.:**	**34. Engineer's Address: *(include Zip)***	**35. Phone:**
Mr. Carson Mok			(301) 588-6008
Building Contractor's Name:	**36A. Lic. No.:**	**37. Contractor's Address:**	**38. Phone:**
Mr. Sandy Taylor			(301) 441-3646

Type of Construction	40. Fire Suppression:	41. Booster Pump:	42. Total Lot Area:	43. Breakdown of Lot Area (= 100%):
☐ Masonry ☐ Steel	☐ Fully Sprinklered ☐ Standpipe System	☐ New	1632 sq. ft.	a. Building: 79 %
☐ Wood ☐ Other:	☐ Partially Sprinklered ☒ None	☐ Existing		b. Paved Area: 21 %
☒ Concrete	☐ Other: _____	☒ None		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?**
4,062 sq. ft.	4,902 sq. ft.	☒ All ☐ Floors _____	☐ Yes, answer q. 48-52 ☒ No, SKIP q. 48-52

Number and type of **projection:**	49. Distance of **projection:**	50. Width of **projection:**	51. Width of building frontage: ft.
NONE			52. Signature of Owner **(projection only):**

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

Estimated Cost of Work:
New/Add.: $ _____
Alt/Rep.: $ _____
Total: $

OFFICIAL USE ONLY

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

Volume of New Bldg. or Addition: 8294 cubic ft.

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

Raze Contractor's Name:	62. Contractor's Address: *(include Zip)*	63. Phone:
Insurance Company:	65. Policy or Certif. No.:	66. Expir. Date: / 67. Raze Method:

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

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

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

Cost of Work:	85. Material:	86. Height:	87. Color:	88. Location:
		ft.		☐ 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:

Address: Queue No.:

A. PERMIT CONTROL

- ☐ 1. Fine Arts : _____ Date _____
- ☐ 2. Historic : _____ Date _____
- ☐ 3. NCPC : _____ Date _____
- ☐ 4. W.H./Obs. Precinct : _____ Date _____
- ☐ 5. WMATA : _____ Date _____
- ☐ 6. Chinatown Dist. _____ Date _____

B. CLEARANCE TO FILE PLANS

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

Restrictions and/or Conditions:

C. PLANS AND APPLICATION APPROVAL

- ☐ 1. Information Counter MO Date 10/18/02
- ☐ (a). Environmental Policy: _____ Date _____
- ☐ (b). Noise Control : _____ Date _____
- ☐ (c). Vector Control : _____ Date _____
- ☐ (d). Lead : _____ Date _____
- ☐ 2. Zoning : _____ Date _____
  Zoning Update : _____ Date _____
- ☐ 3. DPW-Permit and Records Division/Deposit # _____
  Sidewalk Deposit $ _____ Driveway Deposit $ _____
  by: _____ Date _____
- ☐ 5. Water/Sewer Design Branch
  Consumer Eng. : _____ Date _____
- ☐ Erosion Control : _____ Date _____
- ☐ Storm Water Mgmt. : _____ Date _____
- ☐ 6. Mechanical Eng. Rev. : _____ Date _____
- ☐ 7. Plumbing Eng. Rev : _____ Date _____
- ☐ 8. Electrical Eng. Rev. : _____ Date _____
- ☐ 9. Health Plan Rev. : _____ Date _____
- ☐ (a) Medical X-ray Plan Rev. _____ Date _____
- ☐ 10. Fire Protection Div)
  : _____ Date _____
- ☐ 11. Elevator Plan Rev. Sec. : _____ Date _____
- ☐ 12. Plumbing Insp. Rev. Sec. : _____ Date _____
- ☐ 13. Construction Insp. Branch (Field Check)
  : _____ Date _____
- ☐ 14. Electrical Insp. : _____ Date _____
- ☐ 15. Structural Eng. : _____ Date _____
- ☐ 16. Other : _____ Date _____
- ☐ 17. Q. Control : _____ Date _____

- ☐ 18. Permit and Certificate Issuance
  _____ Date _____

ZONING

C of O Number _____ Date _____

Existing Use(s) _____

_____

_____

_____

☐ New Bldg.

☐ P.O.D.

DPW - PUBLIC SPACE

Street Name: _____

Street Width: _____

Road Width: _____

Sidewalk Width : _____

Parking: _____

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

DEPARTMENT OF HEALTH
ENVIRONMENTAL HEALTH ADMINISTRATION

LEAD HAZARD CONTROL PERMIT QUESTIONNAIRE AND EXEMPTION FORM

Project Address: 2304 First Street, NW

Name of Owner(s): Mr & Mrs. V. Aisha Smith Name of Contractor: Taylor & Associates

Phone Number: (202) 302-7278 Square #: 3125 Lot #: 75 Ward #: _____

Project Start Date: Upon BZA approval Project End Date: 4 months after BZA approval

Building Type:

Commercial -		Government -	
Office	☐	Federal	☐
Mixed Use (Explain)	_____	District	☐
Residential -		Institutional -	
Multi-family	☐	Hospital	☐
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:		X	
A. Removal and replacement of lead-based paint components, e.g. windows, doors and baseboards?		X	
B. Onsite stripping and removal of lead-based paint?		X	
C. Partial demolition or gutting of building?		X	
2. Does the project involve the removal and covering of lead-contaminated soil?		X	

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.

V. Aisha Smith

SIGNATURE

10.17.02

DATE

V. Aisha Smith, Esq.

PRINT NAME

For Official Government Use Only

PERMIT REQUIRED: YES ☐ NO ☐ Reviewed By: _____ Date: _____

DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS
Building and Land Regulation Administration
941 North Capitol Street NE, Suite 2000
Washington DC 20002

ENVIRONMENTAL INTAKE FORM

Project Name:	Project Address:	Lot:	Square:
2304 First Street, NW	2304 First Street, NW	75	3125
Filed Job Application # (If applicable):	**Project Description:**		
	Single Family Dwelling		

Owner: MR. & MRS. V. Aisleen Smith, Esq **Date:** 10.17.02

Owner's address and phone #: 2229 First Street, NW Apt. B

Authorized agent: _____

Address and Phone # of authorized agent: _____

Scope of the Project	Yes	No	Instructions
1. Does the owner of this site own adjacent or abutting property?		✓	If yes, submit a site plan to EIS Coordinator, DCRA. If no plan exists, submit written explanation to EIS Coordinator, DCRA.
2. Does the owner of this site plan to acquire property that is adjacent to or abutting this site within the next three years?		✓	If yes, submit a site plan to EIS Coordinator, DCRA. If no plan exists, submit written explanation to EIS Coordinator, DCRA.
3. Is additional activity planned by the applicant for this site or any site within the same square during the next three years that requires a permit?		✓	If yes, submit a site plan to EIS Coordinator, DCRA. If no plan exists, submit written explanation to EIS Coordinator, DCRA.
4. Is this a residential project within the R-1 through R-5-A zoning districts?	✓		If yes, skip to signature line.
5. Is this project a single-family residence that is not in conjunction with the building of two or more units?			If yes, skip to signature line.
6. Is this project an accessory structure such as a garage, patio, swimming pool or fence?			If yes, skip to signature line.
7. Is the project solely an interior renovation with no change in the use or capacity of the structure being renovated?			If yes, skip to signature line.
8. Is the project located in an Economic Development Zone, as defined in DC Code 5-1401 et seq (DC Law 7-177)?			If yes, skip to signature line.
9. Is the project located within the Central Employment Area as defined in DC Zoning Regulations? (Title 11DCMR)			If yes, skip to signature line.
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. 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.

-OVER-

Scope of the Project	Yes	No	Instructions
12. Is an exemption claimed from the requirement to submit an Environmental Impact Screening Form pursuant to Title 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.
13. Does the total cost of the project exceed $1.42 million, including site preparation and construction?			If yes, and no exemption claimed, Environmental Impact Screening Form (EISF) required. If no, indicato actual project cost _____
14. Is the cost of this project $1.42 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 100 feet of the project site?			If yes, EISF required.
C. Will the project result in an emission of odorous or other air pollutants from any source, including VOCs?			If yes, EISF required.
D. Will this action involve the use, production or disposal of hazardous substances as defined in 20 DCMR 7299?			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.

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 Sec. 22-2514)

Signature of Owner/Authorized Agent _____ **Date** 10.17.02

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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 _____

_____

NOTE: APPROVAL OF A BUILDING PERMIT IS NOT SYNONYMOUS WITH APPROVAL OF AN ACTION OR ENTIRE PROJECT UNDER THE ENVIRONMENTAL POLICY ACT OF 1989. IF THE APPLICANT BUILDS ON THE SAME, ADJACENT OR ABUTTING PROPERTY OR EXPANDS UPON THE WORK DESCRIBED IN THE INSTANT APPLICATION OR PLANS AND SPECIFICATIONS WITHIN THREE YEARS, AN ENVIRONMENTAL IMPACT SCREENING FORM MAY BE REQUIRED FOR THE ENTIRE PROJECT, INCLUDING THE PORTION ENCOMPASSED BY THIS APPLICATION AND PERMIT APPROVAL. FURTHER, IF THE ACTION IS IN VIOLATION OF ANY FEDERAL OR DISTRICT LAWS PERTAINING TO THE ENVIRONMENT, AN EISF CAN BE REQUIRED.

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