DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUILDING AND LAND REGULATION ADMINISTRATION
APPLICATION FOR CERTIFICATE OF OCCUPANCY

Date 8/4/03

59534

Receipt No.

Application Fee $33.00 Non Refundable
Certificate Fee is Based on square footage

Cashier=s No.

INFORMATION ON PROPOSED BUSINESS

1. Premise Address 3636 16TH St. N.W. Suite/Room No A-131
2. Business Telephone No. (202) 462-3636 Fax No. Lot 831 Square 2624
3. Trade Name of Business GAP Community Child Care Center
4. Is Business Incorporated? Y/N Y Partnership? Y/N N Sole Proprietor? Y/N N New/Existing Existing
5. Corporate Name GAP, Inc.
6. President Monica Guyot Vice President Secretary
7. Sole Proprietor
8. Business Owner=s Mailing Address 3636 16TH St. N.W. phone # (daytime) (202) 462-3636

INFORMATION ON OCCUPANCY

9. ☐ Ownership Change ☐ Partial Occupancy ☐ New Bldg. ☐ Use change ☑ Load Change ☐ B.Z.A No. 16153
10. Proposed Use of Premises Continued Operation of a Child Development Center w/Maximum 140 children 28 staff
11. Prior Use of Premises Same
12. Proposed Occupancy Load 140 children 28 staff Square Feet Occupied 6,000
13. Floors to be Occupied First partial Basement ? ☒ Yes ☐ No
14. Is this Business Sexually Oriented according to the DC Zoning Regulations ? ☐ Yes ☒ No

INFORMATION ON ENTIRE BUILDING

15. Building Owner Jonathan Woodner Co. Telephone No.
16. Building Owner=s Address: 3636 16TH St. N.W.
17. Square feet Numbers of floors 8 Basement 4

ATTESTATION & SIGNATURE

I certify that all of the statements on this application are true to the best of my knowledge and belief. I agree to comply with all applicable laws and regulations of the District of Columbia.

18. Owner of Business Signature Date

If Authorized Agent for owner of Business (Attach Authorization)

19. Agent=s Name Edgar T. Nunley Edgar T. Nunley Date 8/4/03
Print Clearly Signature
20. Agent=s Address 4707 Brinkley Rd., Temple Hills, Md 20748

Visit our website www.dcra.org/permits for permit applications.

Case No. BZA 17065
Exhibit No. 6

Board of Zoning Adjustment
District of Columbia
CASE NO. 17065
EXHIBIT NO. 6

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

OFFICE USE ONLY

ADDRESS

Premise Address 3636 - 16th St, NW. Suite/Room No _____

ZONING DIVISION

Zone R-5-E Overlay District Y / N B.Z.A. No: 16153 B.Z.A. approved date _____

Prior Use Granted w/ conditions: ① 7 years ② 140 child CDC ③ # 28 persons ④ 7:00 am - 6:00 p.m. Mo,

Date of Last Certificate _____ Last Certificate No. _____ Prior B.Z.A No _____

Accepted for filing by _____ Date _____

EXAMINERS USE

Use Change ☐ Yes ☐ No Inspections Required ☐ Yes ☐ No. By _____ Date _____

Building Permit Required ☐ Yes ☐ No By _____ Date _____

Inspection Fee $ _____ **Issuance Fee $** _____ By _____ Date _____

Approved for Issuance by _____ Date. _____

C of O INSPECTION

Date of scheduled Certificate of Occupancy inspection _____

Inspection Status ☐ Approved ☐ Disapproved By _____ Branch _____ Date _____

Inspector=s Signature _____ Printed Name _____

Reason for Disapproval _____

C of O APPROVAL

☐ Approved ☐ Denied ☐ Canceled By _____

Reason for Denial/Cancellation _____

_____

If Approved, Certificate of Occupancy No. _____ Date of Issuance _____

Bldg _____ Electric _____ Plumbing _____ Fire _____ Zoning _____

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