page 4

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

A. PERMIT CONTROL

- ☐ 1. Fine Arts by: _____ Date: _____
- ☐ 2. Historic by: _____ Date: _____
- ☐ 3. Cap. Gateway by: _____ Date: _____
- ☐ 4. NCPC: _____ Date: _____
- ☐ 5. W.H./Obs. Precinct by: _____ Date: _____
- ☐ 6. Flood Control by: _____ Date: _____
- ☐ 7. WMATA by: _____ Date: _____
- ☐ 8. Condem. by: _____ Date: _____
- ☐ 9. Rental Accom. by: _____ Date: _____
- ☐ 10. Chinatown Distr. by: _____ Date: _____
- ☐ 11. Utility Clearance by: _____ Date: _____
- ☐ 12. General Liability Ins. Policy Clearance by: _____ Date: _____

B. CLEARANCE TO FILE PLANS

- ☐ 1. Zoning by: _____ Date: _____
- ☐ 2. DDOT – Permit and Records Division
  Access to Parking Street ☐ Street ☐ Alley
  Cleared by: _____ Date: _____
- ☐ 3. DDOT – Consumer Engineer
  Cleared by: _____ Date: _____
- ☐ 4. ERA – Erosion Control
  Cleared by: RG Date: 5.17.04

Restrictions of the Permit:

GRADE & EROSION & SEDIMENT CONTROL PLAN REQUIRED MECHANICAL VENTILATION PLANS REQUIRED

C. PLANS AND APPLICATION APPROVAL

- ☐ 1. Information Counter by: _____ Date: _____
- ☐ 2. Information Center by: _____ Date: _____
- ☐ ☐ (a) ABRA 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: _____
  Zoning Overlay approval by : _____ Date: _____
- ☐ 4. DDOT – 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 _____
- ☐ Air Quality by: _____ Date _____
- ☐ Underground Storage by: _____ Date _____
- ☑ 7. Mechanical Eng. Review by: _____ Date 4/15/04
- ☑ 8. Plumbing Eng. Review by: _____ Date 4/15/04
- ☑ 9. Electrical Eng. Review by: _____ Date 4/15/04
- ☐ 10. Health Plan Review
  ☐ (a) Food Plan Review by: _____ Date _____
  ☐ (b) Medical X-Ray Plan Rev.
  by: _____ Date _____
- ☐ 11. Fire Protection Plan Review
  by: _____ Date 04/15/04
- ☐ 12. D.C. Fire Dept. (Fire Prevention Plan Review Section)
  by: _____ Date _____
- ☐ 13. Elevator Plan Rev. Sec. by: _____ Date _____
- ☐ 14. Plumbing Insp Rev. by: _____ Date _____
- ☐ 15. Construction Insp. Branch (Field Check)
  by: _____ Date _____
- ☐ 16. Historic Pres. Div. by: _____ Date _____
- ☐ 17 EISF: _____ Date _____
- ☑ 18. Structural Eng. by: _____ Date _____
- ☐ 19. Permit and Certificate Issuance Counter
  by: _____ Date _____
- ☐ 20. QC By: _____ Date _____

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

ZONING

C of O Number _____ Date _____

Existing Use(s) _____

Proposed Use SFD Addition Rear Addition

☐ New Bldg
☐ P.O.D.
☐ File in room 2124

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

DDOT – PUBLIC SPACE

Street Name: _____

Street Width: _____

Road Width: _____

Sidewalk Width: _____

Parking: _____

Restrictions: _____

PRE-FILE NUMBERS		ZONING DISTRICT	FILE NUMBER	PERMIT NUMBER	
N.C.P.C. No:	O.G. No:	R-2			By:
H.P.A. No:	S.L. No:	Ward No:	Receipt No:	Date:	Receipt No

★ ★ ★ GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUILDING AND LAND REGULATION ADMINISTRATION PERMIT SERVICE CENTER
Tel 202-442-4589 Fax 202-442-4862

BLRA-33 (Rev. 2/04)

APPLICATION FOR CONSTRUCTION PERMITS ON PRIVATE PROPERTY
(PRINT IN INK OR TYPE, DO NOT WRITE IN SHADED AREAS OR ON PAGE 4)

2145

CLEARANCE TO FILE By _____ Date _____

(A) ALL APPLICANTS MUST COMPLETE ITEMS 1 THRU 27

1 Address of Proposed Work:	Suite No.	2 Lot	3 Square	4 Application Date
246 Nicholson St. NE		131	3710	

5 Owner of Building or Property	6 Address (include Zip Code)	7 Phone
Everna Brown	246 Nicholson St. N.E.	2246 2025293227

8 Agent for Owner: (if applicable)	9. Address (include Zip Code)	10. Phone
Everna D. Brown	Same	

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

- ☐ New Building
- ☑ Addition
- ☐ Alteration and Repair
- ☐ Raze Building
- ☐ Retaining Wall
- ☐ Fence
- ☐ Shed
- ☐ Awning
- ☐ Garage
- ☐ Sign
- ☐ Projection
- ☐ Other (Specify) _____

12. Description of Proposed Work
New addition as per plan

BZA Case No. 17243
Exhibit No. 9

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
SFD	2+B	1	$

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

19 Starting Date	20 Completion Date of work	21 Method of Removing Construction Debris	22 Does the proposed work involve **disturbing the earth** or razing a building?
As soon as poss.	N/A	[ ] 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 or Columns
☐ Yes, answer **q. 24-25** ☐ No, SKIP **q. 24-25**	—	— sq. ft	4	4

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)

OFFICIAL USE ONLY

	R	P	H	A
M				
P				
S				

W ☐ Yes ☐ No
PLANS
☐ No ☐ Sm ☐ Lg

Board of Zoning Ad
District of Colu

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

28. Architect's Name:	29. D.C. Lic. No.:	30. Architect's Address: *(include Zip Code)*	31. Phone:
32. Engineer's Name:	33. D.C. Lic. No.:	34. Engineer's Address: *(include Zip Code)*	35. Phone
36. Building Contractor's Name:	36A. D.C. 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	☐ Fully Sprinklered ☐ Standpipe System	☐ New		a. building	%
☐ Wood ☐ Other	☐ Partially Sprinklered ☐ None	☐ Existing		b. paved area	%
☐ Concrete	☐ Other _____	☐ None	sq. ft.	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 elevator	58. Plans Certified by Engineer?
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes, answer q. 57 ☐ No		☐ Yes, cert. attached ☐ No

59. Estimated Cost of Work
a) New/Add.: $ 80,000
b) Alt/ Repair $ _____
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 Code)*	63. Phone:

64. Insurance Company	65. Policy or Cert. Number	66. Expiration 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. D.C. Lic. No.	76. Length	77. Width	78. Height	79. Volume	80. Party Wall?
		ft.	ft.	ft.	ft.	☐ Yes ☐ No

81. Asbestos in the Building?	82. Raze Contractor Signature	OFFICIAL USE ONLY FEE	By:	Date:
☐ No ☐ Yes, location ___	83. Owner's Signature	$		

(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: ☐ 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: Home Work	OFFICIAL USE ONLY FEE	By:	Date:
91. Address of Adjoining Owner:	92. Lot: 93. Square:	$		

(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. Est. Cost of Work $	OFFICIAL USE ONLY FEE
							$

110. Material of Roof	111. Material of Sides	112. Wall Thickness: ☐ External ( ) inches ☐ Party ( ) inches	113. Color	By:	Date:

(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	OFFICIAL USE ONLY FEE
				(a)_____ ft above sidewalk (b)_____ ft above parking (c)_____ ft above grade	$

119. Material of Frame	120. Material of Covering	121. Lettering on awning?	122. Fixed Posts?	123. Over Side-walk café?	By:	Date:
		☐ 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. ☐ Flouresc. ☐ Neon	_____VA	License Number:

129. Address of Electrical Contractor *(include Zip)*	130. Signature of Licensed Electrician	131. Phone No.	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 building height (d) _____ ft _____ in above projection of window (e) _____ ft _____ in from roof to sign's bottom			

137. Width ft.	138. Length ft.	139. Area of Sign sq. ft	140. Wide of Business frontage ft.

141. C of O No for Bldg.	142. Sign Contractor: License No.	OFFICIAL USE ONLY Sign FEE	Elect. FEE	Total FEE
		$	$	$
143. Sign Contractor's Address:	144. Phone:	By: Date:	By: Date:	By: Date:

(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, 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 Geerna D. Brown Address 246 Nicholson St NE Date 3/31/04

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 _____