

**Government of the District of Columbia
Department of Consumer and Regulatory Affairs**

1100 4th Street SW
Washington DC 20024
(202) 442 - 4400
dcra.dc.gov



C OF O

CERTIFICATE OF OCCUPANCY

PERMIT NO. CO1700955

Issued Date: 02/13/2017

Address: 410 RICHARDSON PL NW		Zone: RF-1	Ward: 5	Square: 0507	Suffix:	Lot: 0102
Description of Occupancy: A TWO-FAMILY FLAT WITH (2) OFF-STREET PARKING SPACES						
Permission Is Hereby Granted To: OTD 410-412 RICHARDSON PLACE, LLC	Trading As: OTD 410-412 RICHARDSON PLACE	Floor(s) Occupied CELLAR & 1ST-3RD	Occupant Load: 2 No. of Seats			
Property Owner: OTD 410-412 RICHARDSON PLACE, LLC	Address: 1400 KEY BLVD STE 100 ARLINGTON, VA 22209-1518	BZA/PUD Number:	Occupied Sq. Footage: 5360			
			PERMIT FEE: \$85.18			
Building Permit Number (if applicable) B1611470	Type of Application: Use Change	Approved Building Code Use Two-Family Flat - R-3: Approved Zoning Code Use: Flat, [two-family dwelling] Approved Zoning General Use: Residential				
Conditions/ Restrictions:						
<p>THIS CERTIFICATE MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS MAIN ENTRANCE, EXCEPT PLACES OF RELIGIOUS ASSEMBLY. Use complies with DCMR Title 11 (Zoning) and Title 12 (Construction).</p> <p>As a condition precedent to the issuance of this Certificate, the owner agrees to conform with all conditions set forth herein, and to maintain the use authorized hereby in accordance with the approved application and plans on file with the District Government and in accordance with all applicable laws and regulations of the District of Columbia. The District of Columbia has the right to enter upon the property and to inspect all spaces whose use is authorized by this Certificate and to require any changes which may be necessary to ensure compliance with all the applicable regulations of the District of Columbia.</p>						
Director: Melinda Bolling	Permit Clerk <i>John T. McFarland</i>		Expiration Date:			
2/13/2017 TO REPORT WASTE, FRAUD OR ABUSE BY ANY DC GOVERNMENT OFFICIAL, CALL THE DC INSPECTOR GENERAL AT 1-800-521-1839						



Board of Zoning Adjustment
District of Columbia
CASE NO.19441
EXHIBIT NO.40C

Application for Certificate of Occupancy

001700955

Application Date: 1/5/16

C of O Number:

APPLICATION FEE IS NON-REFUNDABLE; CERTIFICATE FEE IS BASED ON SQUARE FOOTAGE

Erasing, Crossing Out, Whiting Out, or Otherwise Altering Any Entered Information Will Void This Application

INFORMATION ON THE BUILDING/PROPERTY

- 1. Property Address 410 RICHARDSON PLACE NW
2. Building/Property Owner's Name OTD 410-412 RICHARDSON PLACE LLC
3. Phone 202-888-6480 Email: PETER@DCAKTREE.COM
4. Property Square 0507 Suffix Lot 0102
5. Number of Floors 3
6. Zone RF-1 Overlay (if applicable)

APPLICANT INFORMATION

- 7. Applicant's Name (see instructions) OTD 410-412 RICHARDSON PLACE LLC
8. Trade name of business (if applicable)
9. Applicant's Mailing Address 1400 KEY BLVD, SUITE 100, ARLINGTON, VA 22209
10. Applicant's Day Phone # Cell # 301-502-7559 Email Address KBROWN@

MONTAGEDEVGROUP.COM

INFORMATION ON PREMISES/OCCUPANCY

- 11. (choose one) Ownership Change Use Change Load Change Revision New Bldg
12. Proposed use of Premises FLAT (2 FAMILY)
13. Prior use of Premises SINGLE FAMILY DWELLING C of O # N/A
14. Proposed Occupancy Load 2
15. Area Occupied by Proposed Use 5360 5360 sq. ft.
16. List Floors of a building to be Occupied by Proposed Use CELLAR, 1st, 2nd, 3rd
17. Does your business sell or rent any goods or provide any services that could be described as sexually-oriented? Yes No
18. Is your business a Medical Marijuana Dispensary or Production Facility? Yes No
19. Was this use approved by an order of the BZA or ZC? Yes No If yes, provide order # and date of approval:
20. Is there a building permit associated with this application? Yes No If yes, provide building permit # B1611470 B1606608
21. What use was listed on the building permit? TWO FAMILY FLAT
22. Were all inspections conducted and approved? Yes No
23. Is off-street parking on the property provided for this use? Yes No If yes, number of spaces: 2

ATTESTATION AND 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.

Applicant or Agent's Signature [Signature] Date 12/29/2016

*If you are an applying as an Agent on behalf of the Applicant, attach completed Authorization Form

Making a false statement on this application can result in the denial or revocation of your certificate of occupancy and criminal penalties, under D.C. Official Code § 22-2405, of a fine up to \$1000 and/or imprisonment up to 180 days.

For more information about C of Os, please visit dcra.dc.gov and click on Permits/Zoning

OFFICIAL DCRA USE ONLY

01700955

C of O # _____

Premises Address _____

410 Richardson Place, NW

PERMIT REVIEW COORDINATOR

Checked items #1-9 for completeness

Approved By _____

Jm

Date _____

1-5-17

ZONING INFORMATION

BZA or ZC # (if applicable) _____

Prior C of O # (if applicable) _____

Prior Use on above C of O _____

ZONING REVIEWER

Continuation of Prior Use? Yes No

Zone RF-1

Use Allowed? Yes No Provide Zoning Code Use FLAT

Cite Zoning Section # _____

Off-street Parking Required? Yes No If yes, number of spaces required _____. If no, was a waiver granted? Parking credit? BZA relief obtained? Describe

Is Zoning Inspection Required? Yes No If Yes, describe: VERIFY USE, # OF UNITS: PARKING (IF ANY)

Approved By _____

[Signature]

Date _____

Feb. 2. 2017

ENGINEERING REVIEW AND APPROVAL

Prior Bldg Permit Applicable? Yes No Bldg. Permit # _____

New Bldg Permit Required? Yes No

Construction Code Inspections for the Proposed Use

Bldg (715) _____

Elect (720) _____

Plumb/Mech (730/725) _____

Fire (750) _____

Approved By _____

Date _____

GREEN REVIEW

Green Building Financial Security Required? Yes No N/A

If applicable, check box of chosen path:

Green Bond Binding Pledge Line of Credit Escrow

All Green Inspections Complete? Yes No N/A

If applicable, Green Code documentation provided?

Construction and Site Waste Management Yes No N/A
Preliminary Commissioning Acknowledgement Yes No N/A

Approved By _____

Date _____

INSPECTIONS

Zoning Inspection (745) Approved? Yes No N/A

All Construction Code Inspections Approved? Yes No N/A

DDOE Inspections Verification? Yes No N/A DDOE Approval _____ Date _____

Approved By Maree Binn Date 2/10/17

APPROVAL

Issuance: By _____

Date _____

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS

Certificate of Occupancy Authorization Form

Authorization Form to Act on Behalf of the Owner

To the Director, Department of Consumer and Regulatory Affairs:

This is to certify that I, PETER STUART
(Print Name of sole owner, general partner, or corporation officer)

am the true Owner of the Business described below:

(Proposed address of business you intend to occupy):

410 RICHARDSON PLACE NW

(Type of business you intend to operate):

FLAT

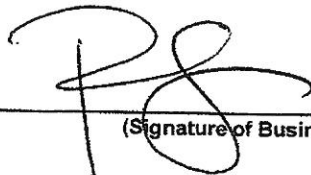
I FURTHER CERTIFY THAT THE PERSON(S) NAMED BELOW IS/ARE AUTHORIZED TO ACT ON MY BEHALF IN EXECUTING AND PROCESSING AN APPLICATION FOR DISTRICT OF COLUMBIA CERTIFICATE OF OCCUPANCY RELATING TO THE AFOREMENTIONED BUSINESS ESTABLISHMENT.

Name of Person/s to act on behalf of owner:

ROSHAUN DENNIS & COURTNEY TAYLOR

Address/es of Person/s to act on behalf of owner:

2654 DOUGLASS PLACE SE #304, WASHINGTON, DC 20020

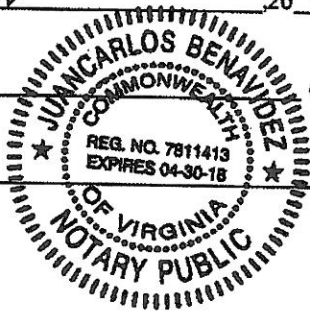

(Signature of Business Owner)

12/29/2016
(Date)

Sworn to before me this 29th day of December, 2016

Juan Carlos Benavidez  (Notary Public)

My Commission Expires: 04-30-2018





Department of Consumer and Regulatory Affairs

Permit Operations Division

1100 4th Street SW

Washington DC 20024

Tel. (202) 442 - 4589

Fax (202) 442 - 4862



B

BUILDING PERMIT

THIS PERMIT MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS OF WORK UNTIL WORK IS COMPLETED AND APPROVED

Issue Date: 04/05/2016

PERMIT NO. B1606608

Expiration Date: 04/05/2017

Address of Project: 410 RICHARDSON PL NW	Zone:	Ward: 5	Square: 0507	Suffix:	Lot: 0102
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Description Of Work:
REVISION TO PERMIT NO B1214832 TO REFLECT NEW OWNERSHIP NAME OF OTD 410-412 RICHARDSON PLACE LLC

Permission Is Hereby Granted To: Otd 410-412 Richardson Place Llc	Owner Address: 1400 KEY BLVD SUITE 100	PERMIT FEE: \$36.30
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Permit Type: Alteration and Repair	Existing Use: Two-Family Flat - R-3	Proposed Use: Two-Family Flat - R-3	Plans: No
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Agent Name: Kim Mitchell Cdkm Consulting Llc	Agent Address: 1615 New Hampshire Ave Nw 4th Flr Wdc 20009	Existing Dwell Units: 2	Proposed Dwell Units: 2	No. of Stories: 3	Floor(s) Involved:
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Conditions/ Restrictions:

This Permit Expires if no Construction is Started Within 1 Year or if the Inspection is Over 1 Year.

All Construction Done According To The Current Building Codes And Zoning Regulations;

As a condition precedent to the issuance of this permit, the owner agrees to conform with all conditions set forth herein, and to perform the work authorized hereby in accordance with the approved application and plans on file with the District Government and in accordance with all applicable laws and regulations of the District of Columbia. The District of Columbia has the right to enter upon the property and to inspect all work authorized by this permit and to require any change in construction which may be necessary to ensure compliance with the permit and with all the applicable regulations of the District of Columbia. Work authorized under this Permit must start within one(1) year of the date appearing on this permit or the permit is automatically void. If work is started, any application for partial refund must be made within six months of the date appearing on this permit.

Lead Paint Abatement
Whenever any such work related to this Permit could result in the disturbance of lead based paint, the permit holder shall abide by all applicable paint activities provisions of the 'Lead Hazard Prevention and Elimination Act of 2008' and the EPA 'Lead Renovation, Repair and Painting rule' regarding lead-based Include adherence to lead-safe work practices. For more information, go to <http://ddoe.dc.gov>, Lead and Healthy Housing.

Director: Melinda Bolling	Permit Clerk: Robert Simpkins
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TO REPORT WASTE, FRAUD OR ABUSE BY ANY DC GOVERNMENT OFFICIAL, CALL THE DC INSPECTOR GENERAL AT 1-800-521-1639

FOR CONSTRUCTION INSPECTION INQUIRIES CALL (202) 442-9557

TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442-9557.



Department of Consumer and Regulatory Affairs

Permit Operations Division

1100 4th Street SW

Washington DC 20024

Tel. (202) 442 - 4589

Fax (202) 442 - 4862

Remittance Source Document

OFFICE OF FINANCE AND TREASURY

Date: 2/13/2017 2:42 PM

Officer: DCRA Term: WFE00-90Y7

Batch: 47565 Batch Date: 2/13/2017

Cashier: OFT06

Trans #: 41

DEPARTMENT OF CONSUMER & Reg: 02152337

Comment/Document: CO1700955

Payment Total: \$85.18

Payment Distribution:

2106 CRO (3013) 10001-ops50 \$85.18

CK Tendered: \$85.18

Date: February 13, 2017

INVOICE

Invoice Number: 2321558

Customer: OTD 410-412 RICHARDSON PLACE, LLC

Mailing Address: 1400 KEY BLVD STE 100
ARLINGTON, VA 22209-1518

Address of Work: 410 RICHARDSON PL NW
WASHINGTON, DC 20001

Permit: CO1700955

Type of Permit: Certificate of Occupancy

Acct Code:	Fees:	Description:
3013-3013-1000-2106	\$3.30	Enhanced Service Fee - Filing Fee
3013-3013-1000-2106	\$4.44	Enhanced Service Fee - C of O
3013-3013-1000-2106	\$33.00	Certificate of Occupancy Filing Fee
3013-3013-1000-2106	\$44.44	Certificate of Occupancy Permit Fee (Enter Sq. Footage)
Invoice Total:	\$85.18	

John McFarland