

CERTIFICATE OF SERVICE

BZA Application No. 19887A

Pursuant to the requirements of Subtitle Y § 703.6, I certify that a copy of the **Application for Modification of Consequence** and all accompanying documents have been served upon:

- (a) **The ANC**
- (b) **The ANC SMD**
- (c) **The Office of Planning**

03/08/2024

Service was made on [DATE] by [mail/email/hand-delivery]^X to the following:

1. NAME/AGENCY
ADDRESS or E-MAIL ADDRESS **ANC5E@Anc.dc.gov**
2. NAME/AGENCY
ADDRESS or E-MAIL ADDRESS Fred Carver
ANC5E03@ANC.DC.GOV
3. NAME/AGENCY
ADDRESS or E-MAIL ADDRESS Office of planning@dc.gov
5F@anc.dc.gov
5F07@anc.dc.gov

Signature: _____

