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



CERTIFICATE OF OCCUPANCY

PERMIT NO. CO1903064



Issued Date: 07/03/2019

	-						
Address:			Zone:	Ŵard:	Square:	Suffix:	Lot:
409 EAST CAPITOL ST SE		_	RF-3	6	0817		0812
Description of Occupancy: DRY CLEANERS - PICK UP STORE ONL'	Υ.				- -		
Permission Is Hereby Granted To: GANSUKH GANTUYA	Trading As: SWIFTNESS DRY CLE	ANERS	Floor(s) O		Occupan No. of Sea		
Property Owner: MH MANAGEMENT LLC	R3	BZA/PUD Number: Occupied:Sq. Footage: 825					
	VIENNA, VA 22182-508]	ļ	PERMIT F	EE: \$82.5	<u>i0</u>
Building Permit Number (if applicable)	Type of Application: Ownership Change	Approved Building Code Use Laundry - B: Approved Zoning Code Use Approved Zoning General Use Other					
accordance with all applicable laws property and to inspect all spaces ensure compliance with all the applicab	stion). suance of this Certificate y in accordance with the and regulations of the D whose use is authorized le regulations of the District	e, the owner agree e approved applica District of Columbia I by this Certificate et of Columbia.	es to conform witten and plans of the District of and to require	ith all condition file with the Columbia has	ns set for District G the right	rth herein Jovernmen to enter	, and to it and in upon the
Ernest Chrappah	FRAUD OR ÁBUSE BY ÁNY OC GO	olyp Owens			1870		

Government of the District of Columbia epartment of Consumer and Regulatory Affairs

Washington DC 20024 (202) 442 - 4400 dera de gov



TIFICATE OF OCCUPANC

PERMIT NO. CO1903064 Address:

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Description of Occupancy		and the second second	Zone		- 10. V//03/	/201
DRY CLEANERS - PICK UP	10 300		RF-3		Manual Land	
TO FICK UP	STORE ONLY	The medical section of		7 () / 2	C. 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Lot
			The state of the		0817	£ .
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Permission is Hereby Grade					The state of the second	\$; E-

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ن ع	Bermission is Hereby Granted To:				A		The Assert of the	:
7	GANSUKH GANTUYA	J WHS'AS	Section 1	La Contraction	X			
Ž,	Property Owner	SWIFTNESS	KK TEO	Cleane				•
	MH MANAGEMENT LLC	Address			Floore Docupi	ed:		
4		12218 Minn			4	N. S. Cupal	nt Load	
1	Ruller				BZAIPUD Numbe	41 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		MAD	A P D D D	NGT		Occupied (q Footage:	
30		Type of Applies		Nest		825	દેકર્સ ફ્રેડ્ર	
		Ownership Chang	T Alepho	ed Bollating Code		PERMIT FE		J
C	ondiffica-te-		Approv	ed Zoning Code/U	B Laundry B		E \$82.50	ı
rij.	onditions/ Restrictions:		Approv	ed Zoning General				ľ

THIS CERTIFICATE MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS MAIN ENTRANCE, EXCEPT PLACES OF RELIGIOUS ASSEMBLY.

As a condition proceeding to the leasurance of this Continues the contours with all conditions and forth in As a condition precedent to the issuance of this Conflicate, the owner agrees to conform with all applicable hereby in accordance with the approved application and plans on file with the applicable regulations of the District of Columbia has the right to enter upon the applicable regulations of the District of Columbia has the right to enter upon the applicable regulations of the District of Columbia has the right to enter upon the applicable regulations of the District of Columbia has the right to enter upon the

	,,	Director.		3 20 20	one regulati	logs of th	District of	this Co	ificate and	District o	on file v	ith the D	set for latrict G	th herein	and (
îng	Eme	urector st Chrap		لمعتدوا) p	imit Clerk	- Common		to require	any chi	inges whi	right t	enter u	t and li
ř	3/2019	1 10 10 10	1,07 107,5	~ **·	The state of	ر / Gy	vepticium	ΛŽ.			2 1 6 3			De fieces	sary to
<u> </u>	2.1		TÖR	FPORT WASTE	FRAIR		Wend GOVERNMEN	Wells:	A	, EXD	ration Da	10			
٠5. پر	e e e e e e e e e e e e e e e e e e e		-jaroni -		OH ABL	SE BY ANY	C GOVERNMEN	TOFFICE	Livers	Magdi Magdi Magdi				1,74	25
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CCC Certificate of Occupancy (C of O) Application

What is a C of O? A document that certifies your building/structure/land is safe to occupy in accordance with local zoning regulations and building codes. All buildings/structures/land in the District of Columbia that are not single-family homes, require a C of O to legally use them. One is needed every time a change occurs (e.g., new construction and changes to use, ownership, and occupancy load).

A. Tell us	about th	e prope	rtÿ,			///////////////////////////////////////								
Property add	ress:	4-09	East	Cap	ital	st. SE	Ü	nit:		Washing	gton, I	OC ZIP:	2000	3
Square Suffix	Lot#:		0812	•						Total # o	of floo			
Is there a pri	or C of O	for the pro	operty?	No	VY	es, C of O	#:	19	0	1294				
B-Who ow	ns the p	roperty	?	net en						_				
Property Own	ner Name	:	мн м	anagem	ent	للناك						·		
Property Own			mhma	tile G	D gm		om			Property Ow				
Property Own				al nd		Unit:	C	ity:	V	enna 5	tate:	VA ZI	p: 2218	٠2_
C. Who is a		<u>'</u>					_ •		_					,
□	<u> </u>		ndividual/i			ransu				utuya				
Same as property			siness (if a			Swift							Yean-en	<u>-9</u>
owner										Applicant Ph				3 3
=				columb							tate:	7.1	P: 2110	
D. What ty	be C of (o are λο	u request	·····			-			han one, com	plete:	eparate	application	ns.
Permane	nt	·····		······································					<u>'</u> -	ace is made				
Tempora	ry; date/da	ate range_		Non-	perman	ent usë foi	one o	r mült	i-da	y events (e.g.,	farmei	s' marke	t; movie nig	rht)
Core and	Shell									ained before se	eking	condition	nal C of O	
Condition	nal/Partial	forda	γ̃s			ccupancy l Shell C of				conditions				
E. Tell us a	bout you	ur propo	sed use c	f the pro	perty.									
Proposed use DNC leans					facility, i	two-famil	y flat):	•		Which floors	will b	e occupi	eď?	
Proposed # o				of dwellin	g units o	or rooms	(if app	licabl	e):		Sq. f	t, occup	led: <u>8-2</u>	5_
Are you rent	ing any po	ortion of t	he propert	γ?				No		Yes, rented		Not a two	-family dwe	lling
Äre you prop	osing to c	hange the	e use?				$\overline{\mathbf{r}}$	Ņο		Yeş		N/A, ther	e is no prior	C of O
Are you chan	iging own	ership?						No	oxdot	Yes		N/A, ther	e is no prior	C of O
Are you prop	osing to c	hange the	amoùnt o	f space curr	ently o	ccupied?	_\~	No		Yes	Ш	N/A, ther	e is no prior	CofO
Аге уои ргор	osing to c	hange the	e occupanc	y load?				No		Yes	П	N/A, ther	e is no prior	C of O
Does your be				or provide s	ervices	that could	<u>.</u>	No		Yès, Attach <u>Se</u>			Búsiness	
be described is your busin				nsarv or pr	oductio	n facility?		Νο	Г	Establishment Yes	Quesi	ionnaire	-, .	
Is off-street	,,		······································				十	No	t	Yes, # of spac	25:	1.		
Was your pr	<u>·</u> _				loard of	Zoning		No	T	Yes, Order #:				
Adjustment							<u>-</u>	J	!	-				
provide a lette owner to DCR										Approval date	·			
Are there by			***************************************			<u></u>	$\overline{\mathbf{Z}}$	No		Yes, Permit #(s):			
Who conduc	ted the re	guired ins	spections?	check all th	at anni	/ì						***************************************		
Not requi		DERA		arty agency(s		7					_			
E LINOT LEGIS	iicn	DUTA	rnira p	orth affaitrAfa	?/·		TII	FICE US		VLÝ Côf C	/4	6 10	306	//- -!

Department of Consumer and Regulatory Affairs | 1100 4th St. S.W., Washington, DC 20024 | 202.442.4400 | dcra.dc.gov

1 | version 10.02:18

F. If	applicable, t	ell us abou	it your pro	posed	occup	ancy lo	ad.					·
ON	LY for Day T	ime Care/S	ichools Pla	ease pro	ovide ad	lditional i	nformat	ion on how	individuals wil	ll occup)	: / the pro	perty
				Base	ment	1 st Flo	ıor	2 nd Floor	3 rd Floor	Tra	ller(s)	Total
بببتيت	nildren 0 – 30 m			<u> </u>								0
	nildren 30 montl		rontins	 		<u> </u>						0.
	hildren 4 years –	18 years		 								0
# of st	aff/faculty											0
	Y for Assem provide inform	•			_			nplete <u>an Ed</u>	iting Establish	ment Qi	uestionin	<u>oire</u>
		Cellar/ Basement	Mezzanine	1 st Floor	2 nd Floor	3 rd Floor	Roof	1	er Garden utdoor space)		or Café space)	Total
# of gu	ests seated					,			<u> </u>			0
# of gu	ests standing		· · · · · · · · · · · · · · · · · · ·		<u> </u>				,			0
# of st	aff.				<u> </u>							0.
ON	LY Inclusion	ary Zoning	/Affordabl	e Dwe	lling U	nits At	tach a s	eparate she	et for addition	ai units		
r.	•		it Number					oor#	Net Squar			Bedrooms
1,								, , , , , , , , , , , , , , , , , , , ,				
2.	`		• ' ''						· · · ·			
3.									-			• · · · · · · · · · · · · · · · · · · ·
ë c	ertification.								1			
fine appli I have	ng a false state up to \$1,000 cation are true e resolved any Applicant/ u are applying a	and/or impri to the best o violations on Agent signatus s a hired age	sonment up fimy knowled the property ure:	to 180 dge. I ag	days (gree to	(D.C. Officomply w	icial Coo ith all a	le § 22-240 oplicable Dis	95), I certify to strict laws and Date:	regulat	stateme lons and	ents on the certify the
		ine;					-					
Hirec	Agent Email:					Hired A	gent Ph	one:	,,		,	
• L • E • I	ather the followerse, deed, let Building permit Most recent Coocumentation Futherization Futherization own	ter of writter of O on record from owner orm (if a hire	permission regarding co d agent is coi	to use t mpliano mpletin	he prop ce with o g this fo	erty, or H conditions orm on be	IUD-1 s of BZA half of t	or ZC'Ordei he applicant	r (if applicable)	_	: of O)

• Final statement of special inspections (for structural changes and newly-constructed buildings)

1. Submit your application for review.

Visit the DCRA Permit Center.

Bring this completed application and supporting documents to the Permit Center. DCRA will record approvals on the next page when you meet in-person. Please allow up to 10 business days for inspection verification and processing.

Hours of operations: Monday, Tuesday, Wednesday, Friday: 8:30 am – 4:30 pm | Thursday: 9:30 am – 4:30 pm Pay for and pick-up your certificate.

After receiving all approvals, pay application and issuance fees and pick up C of Q at the DCRA Permit Center.

OFFICE USE ONLY	C of O #:	C01903064

D	A second of the provider of closes.	RNMENT USE	ONLY		
Application Date:	and the second by the second	18190306H	C of C expirati	on date:	
Parmit Center Réview	Acceptediby	(signature)	lus Guera		2-19
Zoning Review	Approved by	(signature)		Date: 7*	3-17
zone: LF3	Zoning Code			* *	
Continuation of prior use?	مر 🗖	2 Yes, Gof 0 # 190	iegh & use:	Dry Clear	ers_
Use allowed?	ZÍ Na	🗖 Yes		?ickup {	Store C
Parking credit?	O Ño	. 🖸 ýes			
Off-street parking required?	O No	Yes, # of spaces requ	ired:	1	
ZC ör BZÀ order obtained?	Q No	② Yes,	2	and the second of the second o	
Ali ZC or BZA order conditions met?	Q _N ,	Ö. Yës	and the state of t		
ls a zoning inspection required?	Z No	Yes,			
Additional comments:	and the second of the second o	en e		- 1	a landran ana r vy
Englineering Review	Approved by	ι (signatūrė):		Dete:	
Maximum # of occupants:	Building con	struction type:			
Prior building permit applicable?	D No	Yes, permit #	,		
New building permit required?	O Ño	🔲 Yes			
Auto sprinkler required?	O No	🔲 Yes, type:	, , , , , , , , , , , , , , , , , , ,		
Construcțion code inspecțions;	Buildin	g Electrical	Plumbing/Mechanic	al .Fi	re .
Green Revlew	Approved by	(/signature):	, L	Date:	· · · · · · · · · · · · · · · · · · ·
Type of green building financial security?	Escrow	(Binding Pledge	Line of Credit	Green Bon	d N/A
Pursuing alternative green building certificati	on (e.g. LEED; Gre	en Cammunities, I <u>C</u> C-700)?	Yès, program:	Ü Nö	N/A
All Green Construction Code Inspections com	pleted?		Q Yes	D No	
All Green Construction Gode documentation	provided?	,	Yeş	D No	N/A
Additional comments:		•			
Inspections Review	Approved by	r'(signature);		Date:	
Žoning inspection approved?	4		Q Yes	Q No	N/A
All construction code inspections approved?	*		☐ Yes	O No	N/A
Inspections verified?		,	ÌŪ yēs	□ No	Q N/A
Additional comments:		The second secon	A Secretary of the second seco	* * * * * ****************************	,
DOEE Réview	Approvedby	y (śignatúre):		Date:	
Flood plain required?			☐ Yes	II No	E N/A
Final approval notice for Stormwater Manage	ement Plan issued	P Valor spipmos intermeter modelline eranise	T ves	Q No	ŅÂ NĄÂ
Green area ratio verified?			₹ Yes	No	N/A
Additional			,		



What is a C of O? A document that certifies your building/structure/land is safe to occupy in accordance with local zoning regulations and building codes. All buildings/structures/land in the District of Columbia that are not single-family homes, require a C of O to legally use them. One is needed every time a change occurs (e.g., new construction and changes to use, ownership, and occupancy load).

A. Tell us	about the prope	rty.								·	
Property add	ress: 4 n	a Eas	t Capitol	5t SE	U	n it :		Washing	gton, DC	Z1P:	20003
Square Suffix		6842			***************************************	······································		Total # c	of floors:		2_
ls there a pri	or C of O for the pr	operty?	No 🗸	Yes, C of O #:			۵ کے	3226			
B. Who ow	ns the property	· ?	! 								
Property Ow	ner Name:	MH N	Nanagement	(LLC)							
Property Ow	ner Email:	nhmat	IC @ grmail					Property Owi			03 - 876 -07
	ner Address: 221		ford rd	Unit:	C	tγ:	マデ	euna S	tate: 🎷 🖰	ZIP:	22182
C. Who is a	pplying for occu						,				
	Applicant Name (······································			•
Same as property	Trade Name of Bu	asiness (if a	pplicable):	 .				 			
owner	Applicant Email:	·						Applicant Ph			
	Applicant Address			Unit:	_	ty:			tate:	ZIP:	
D. What:ty	pe C.of O áre yo	u reques	ting? Check.onl	y one: If apply	ing f	or mo	ore ti	nan one, com	plete sepa	rate a _l	oplications.
Permane	nt		Doës not e	xpire ùnțil a ch	ange	tö th	e spic	ice is made			· · · · · · · · · · · · · · · · · · ·
Tempora	ry; date/date range_		Non-perm	anent üse for o	ne oi	mult	i-day	events (ë.g.;)	farmers' n	arket;	movie night)
Core and	Shell		Does not g	rant occupanc	y; mu	ıst be	obta	ined before se	eking con	ditiona	I C of O
Condition	nal/Partial forda	ys.	_	occupancy ba	•						
r million				nd Shell C of O	#.for	this p	rope	rty.is:		· · · · · · · · · · · · · · · · · · ·	
	pout your propo (e.g., retail, eating				iat).		ĺ	Which floors	will be or	cupled	19
rioposea use	Dry clean	=	Pier up	<u>Store</u>	-			19t		wahier	(a)
Proposed # o	f occupants:		# of dwelling unit		-		e): _		Sq. ft. o	ccuple	d:
Are you rent	ing any portion of	the proper	tý?		Π	No	U	Yes, rented	Not	a two-f	amily dwelling
Are you prop	osing to change th	e use?	ν,			No	Į,	Yes			s no prior C of O
Are you chan	ging ownership?				1	No		Yes			s no prior C of Ö
`	osing to change th	e amount d	of space currently	occupied?	abla	No		Yes			s no prior C of O
	osing to change th				Ď	No		Yes			s no prior C of O
	usiness sell or rent		<u>-</u>	es that could	Ľ		-				
	l as sexually-orient		or provide service		\succeq	No	<u> </u>	Yes, Attach Se Establishmen			<u>isiness</u>
Is your busin	ess a medical mari	juana disp	ensary or product	ion facility?	V	No		Yes			
Is off-street	parking on the proj	perty provi	ded?		T	No	V	Yes, # of space	 es:'		
	oposed use approv			of Zoning	m	No		Yes, Order #:			
Adjustment	or Zoning Commiss	sion? Along	with the C of O app	lication,	<u> </u>	1 '''	L	•		•	
	er or matrix, with atta A that documents con							Approval date	!:		<u>·</u>
			this application		T	No		Yes, Permit #(s):		
	mond bermis asso					2					i i
Are there bu			/_Lf11 +1 _+			, ,		<u>. :</u>			
Are there bu	ted the required in		(check all that ap	ply)		.		<u> </u>		•	

					•						
F. If applicable	e, tell ús abói	it your pro	posed	occup	ancy lo	ad.					
ONLY for Da	y Time Care/	Schools Pl	ease pr	ovide ac	iditional l	nformați	iọn on how	individuais wi	li occup)	the pro	perty
			Base	ement	1 st Flo	or	2 nd Floor	3rd Floor	Tra	ller(s)	'Total
# of children 0 – 3) months										0
# of children 30 m	onths 1 day - 47 p	nonths	ļ				·	•••			0
# of children 4 yea	rs – 18 years										0
# of staff/faculty					<u></u>			<u> </u>			0
ONLY for Ass	embly Uses a	ind Eating/	Drinki	ng Est	ablishm	eņts					
Please provide inj	formation on ho	w individuals	will occ	upy the	property [,]	and com	plete an <u>Ea</u>	tin <mark>q Establish</mark>	ment Q	uestionn	<u>aire</u>
	Cellar/ Basement	Mezzanine	1 st Flöor	2 nd Floor	3 rd Floor	Roof		er Garden utdoor space)		or Café space)	Total
# of guests seated							·				0
# of guests standin	B			T :							0
# of staff											0
ONLY Inclusi	onary Zoning	/Affordabl	e Dwe	lling U	inits At	tách a se	parate she	et for addition	ial units		
	U	nit Number				Flo	or#	Net Squar	e Ft.	# of	Bedrooms
i.											
2.	W							·			
3.			/				• • • • • • • • • • • • • • • • • • • •				
G. Certification	ń.										
Making a false st fine up to \$1,00 application are t have resolved a Applica	00 and/or impr	isonment up of my knowled the property	to 180 dge. I a	days	(D.C. Offi	cial Cod	e § 22-240	5). I certify trict laws and	that all I regulat	stateme	ents on this certify that
If you are applying	ng as a hired age	nt on behalf	of the a	ل ipplican	t, please p	provide y	our agent i	nformation a	nd the <u>A</u>	<u>uthoriza</u>	tion Form.
Hired Agent Firs	t Name:				Hired A	gent Las	t Name:				
Hired Agent Ema	il:			***	Hired A	gent Pho	one:				
H. Cathortho	following	anartina da	201220	n+c 0							
Building per Most recent Documental Authorizatio Letter from	, letter of writte	n permission d regarding co ed agent is co ng a condition	to use t mpliand mpletin	he prop ce with (g this fo O and p	conditions conditions frm on bel	IUD-1 s of BZA half of th ire evacu	or ZC Order he applicant ùation plan	(if applicable) (only if seekin	·)		: of O)
Ï. Submit you											
Visit the DCRA P Bring this comple when you meet	ermit Center. eted application n-person. Pleas	and supporti e allow up to	ng doci 10 busi	ness da	ys for insp	ection v	erification a	and processin	g.		
1	f operations: M	• •	day, We	ednesda	y, Friday:	8:30 am	n – 4:30 pm	Thursday:	9:30 an	1 – 4:30 ·	pm
Pay for and pick After receiving a			and issu	ance fe	es and pic	k up C o	f O at the D	CRA Permit C	enter.	•	

C of Q #:

OFFICE USE ONLY

De	GOVERNMENT USE	ONLY	
Application Date: 🔍 - 4-19	coto#: C01901294	C of O explration da	te;
Permit Center Review	Accepted by (signature):	doline Verena	Date: 2 -4-19,
Zoning Review	Approved by (signature): Lun	WB V	Date: 02/04/19
Zone: <u> </u>	Zoning Code Use: M Cand	ng - Fick y	p store one
Continuation of prior use?	□ No Prés, Cof.O# 160.	3176 & use: Dh	+ Chaner
Use allowed?	□ No (□) es		,
Parking credit?	□ No □ Yes		
Off-street parking required?	No Yes, # of spaces requi	red:	
ZC or BZA order obtained?	No Yes,		
All ZC.or BZA order conditions met?	☐ No ☐ Yes		
Is a zoning inspection required?	Yes,	***	
Additional comments:			
Engineering Review	Approved by (signature):		Date:
Maximum # of occupants:	Building construction type:		
Prior building permit applicable?	No Q Yës, permit#		
New building permit required?	□ No □ Yes		
Auto sprinkler required?	No Yés, týpe:		No. 1944 Table Table Town
Construction code inspections:	Building Electrical .	Plumbing/Mechanical	Fire
Green Review	Approved by (signature):		Date:
Type of green building financial security?	Escrow Binding Pledge	Line of Credit	Green Bond N/A
Pursuing alternative green building certification	(e.g. LEED, Green Communities, ICC-700)?	Yes, program:	No E N/A
All Green Construction Code inspections comple	ted?	Q Yes C	1 No 1 N/A
All Green Construction Code documentation pro	vided?	Q Yes	No NA
Additional comments:	e and a second s	A COMPANY OF THE PARTY OF THE P	ende e e en que un en des furramentes
Inspections Review	Approved by (signature):	· · · · · · · · · · · · · · · · · · ·	Date:
Zoning inspection approved?		Q Yes] No
All construction code inspections approved?		Q yes C] No 🔲 N/A
inspections verified?		Q Yes C] No N/A
Additional comments:			
DOEE Réview	Approved by (signature):		Date:
Flood plain required?		☐ Ýes Œ	O NO NA
Final approval notice for Stormwater Manageme	ent Plan issued?	Q Yes C] No Q N/A
Green area ratio verified?)	Q Yes C	D No □ N/A
Additional comments:			— — a manage and manage and manage and the second

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



CERTIFICATE OF OCCUPANCY

PERMIT NO. CO1603226

Issued Date: 08/02/2016

	Maria			T	1	0.45.	·
Address			one	Ward	Square	Suffix	Lot
409 EAST CAPITOL ST SE		C	AP/R-4	6	0817		0812
Description of Occupancy					,*		
DRY CLEANERS							
Permission Is Hereby Granted To	Trading As	*************************************	Floor(s) Occupied	7	occupant	l ned	11
MH MANAGEMENT, LLC	MH MANAGEMENT		1ST		lo of Seats		السخيد
					10 01 00011		
Property Owner	Address		BZA/PUD Number	C	Occupied Se	q Footage	
MH MANAGEMENT, LLC	2218 WOODFORD ROAD			8	25		
	VIENNA, VA 22182			F	FRMIT FE	E \$82.50	n
Building Permit Number (if	Type of Application	Annroyed Building Cod	le Use Dry Cleaning Pla		hm(11071 7	- 400.0	
applicable)	Ownership Change	Approved building con-	e ose by cleaning ris	Nif a Lad			
••	'	Approved Zoning Code	Use Dry cleaning or	laundry			
		<u> </u>					
Conditions/ Restrictions:							
THIS CERTIFICATE MUST ALWAYS BE CONSPICUO	SUSLY DISPLAYED AT THE ADDRE	SS MAIN ENTRANCE, EXCEPT	PLACES OF RELIGIOUS ASSI	EMBLY Us	e complies wi	th	
DCMR Title 11 (Zoning) and Title 12 (Construction) As a condition precedent to the iss	eusers of this Cartificate	the cumer server t	in conform with all	e and it lan	- set fo	rth herein.	and to
	y in accordance with the						
accordance with all applicable laws a	and regulations of the Di	istrict of Columbia The	e District of Columbia	a has t	he right	to enter	upon the
property and to inspect all spaces to ensure compliance with all the applicable regu			id to require any ci	hanges t	which may	, pe uece	assary to
district and the same of the same to the	nauono or are wisaret or soren	libia					
Director	Permit Cl		Expiration Di	ate	——————————————————————————————————————		
Melinda Bolling Meline	da Bolling John Mc	my mut men					
		William www	MU				
8/2/2016 TO REPORT WA	ISTE, FRAUD OR ABUSE BY ANY DC GO	OVERNMENT OFFICIAL CALL THE D	OC INSPECTOR GENERAL AT 1-80	<i>)</i> 0-521-1839			





Department of Consumer and Regulatory Affairs

Remittance Source Document

Permit Operations Division 1100 4th Street SW

Washington DC 20024

Tel (202) 442 - 4589

INVOICE

OFFICE OF FINANCE AND TREASURY

Fax (202) 442 - 4862 Date:

8/2/2016 12:32 PM Term: WFE02-9200 DCRA Term: Office: 43752 8/2/2016 Batch Date Ratch:

(ashier: OFT50

Trans 🛊: 3

DEFARTMENT OF CONSUMER & Rcpt: 02028060 Comment/Document: C01603226

fayment Total: Payment Distribution: 2106 (R0 (3013) 10001-ops50 \$82.50

Invoice Number: 2118035

Date: August 02, 2016

MH MANAGEMENT, LLC

Customer:

\$82.50 VS Tendered: \$82.50

Mailing Address:

2218 WOODFORD ROAD

VIENNA, VA 22182

Address of Work:

409 EAST CAPITOL ST SE

WASHINGTON, DC 20003

Permit.

CO1603226

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

\$4.20

Enhanced Service Fee - C of O

3013-3013-1000-2106

\$33.00

Certificate of Occupancy Filing Fee

3013-3013-1000-2106

\$42.00

Certificate of Occupancy Permit Fee (Enter Sq. Footage)

Invoice Total.

\$82.50

John McFaifand

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS

Application for Certificate of Occupancy Application Date: 8.1.2016 Cof O Number: 603226 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
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 TO OPPORT
INFORMATION ON THE BUILDING/PROPERTY
1. Property Address 409 East Capital St. SE.
2. Building/Property Owner's Name MH Management. LL.
3. Phone 703-876-0353 Email: mhmat (10 @ gmail. com
2. Building/Property Owner's Name MH Management. LLC. 3. Phone 703-876-0353 Email: mhmgt/IC @ gmail. com 4. Property Square 0812 Suffix Lot 0812
5. Number of Floors 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.
6. Zone CAP/R-4 Overlay (if applicable)
APPLICANT INFORMATION
7 Applicant's Name (see instructions) Me)ung Film
7 Applicant's Name (see instructions) 8. Trade name of business (if applicable) 9. Applicant's Mailing Address 10. Applicant's Day Phone # 703-876-0313 Cell # 571-334-8217 Email Address 10. Applicant's Day Phone # 703-876-0313 Cell # 571-334-8217 Email Address 10. Applicant's Day Phone # 703-876-0313 Cell # 571-334-8217 Email Address
9. Applicant's Mailing Address 2218 Woodford Rol. Vienna. VA. 22182.
10. Applicant's Day Phone # 703-876-0353 Cell # 571-334-8217 Email Address
INFORMATION ON PREMISES/OCCUPANCY
11. (choose one) ■Ownership Change □□Use Change □□Load Change □□Revision □□New Bldg
12. Proposed use of Premises Dry cleaning
13. Prior use of Premises Dry cleaning C of 0 # 1602082
13. Prior use of Premises Dry cleaning C of 0 # 1602082 14. Proposed Occupancy Load No. of Seats 15. Area Occupied by Proposed Use 825 sq. ft.
15. Area Occupied by Proposed Use 825 sq. ft.
16. List Floors of a building to be Occupied by Proposed Use 1st Apor
17. Does your business sell or rent any goods or provide any services that could be described as sexually-
oriented? DDYes DONO If yes, please fill out the supplemental form.
18. Is your business a Medical Marijuana Dispensary or Production Facility? □Yes ENo
19. Was this use approved by an order of the BZA or ZC? ☐ Yes ₱No If yes, provide order # and
date of approval:
date of approval:
21. What use was listed on the building permit? Dry cleaning or Laundry
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:
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
*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 <u>dera de gov</u> and eliek on <u>Permits/Zoning</u>

FICIAL DCRA USE ONLY CO 60322 (C of O #	or to the to
Premises Address	409 East Capital Street, 3
PERMIT REVIEW COORDINATOR Checked items #1-9 for completeness	
Approved By	Date 8-2-16
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? Deves Devo	Zone CAP/R-4
Cite Zoning Section #	er of spaces required If no, was a waiver
Is Zoning Inspection Required? DaYes & No. 17 es de Approved By	escribe:
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 (
Approved By	Date
GREEN REVIEW Green Building Financial Security Required? □Yes □No If applicable, check box of chosen path: □Green Bond □Binding Pledge □Line of Credit All Green Inspections Complete? □Yes† □No □N/A If applicable, Green Code documentation provided? Construction and Site Waste Management Preliminary Commissioning Acknowledgement	
Approved By	Date
INSPECTIONS Zoning Inspection (745) Approved? † PYes† No DN/A All Construction Code Inspections Approved? PYes† No DDOE Inspections Verification? PYes No N/A DE Approved By	o □N/A DOE Approval Date
APPROVAL Issuance: By	Date

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS

APPLICATION INSTRUCTIONS AND GENERAL INFORMATION for Certificate of Occupancy

Erasing, crossing out, or otherwise altering any entered information will void this application.

GENERAL INFORMATION

,

The purpose of the Certificate of Occupancy (C of O) is to ensure that the use of building, structure or land in the District of Columbia conforms to the Zoning Regulations, DCMR Title 11, and to the provisions of the DC Building Code, DCMR Title 12A. In most cases, no person is permitted to use a building, structure or land in the District of Columbia for any purpose, other than a single family dwelling, until a valid C of O for that use has been issued by DCRA.

To apply for a C of O, please complete the C of O application form located at http://dcra.dc.gov/DC/DCRA/Permits/Certificate+of+Occupancy+Application+and+Instructions and follow the directions listed below. If you propose to operate an eating establishment, please also submit the Eating Establishment Questionnaire with your Certificate of Occupancy application.

Applications must be submitted in person at DCRA's Permit Center located at 1100 4th Street SW, Second Floor.

The application fee is non-refundable. The issuance fee is based on square footage of the premises for which the C of O is being requested.

DCRA does not accept applications and payments that are mailed. Such submittals will be returned.

For applications other than ownership change, please allow 30 calendar days for the review of your application and possible issuance of your certificate of occupancy.

For more information about the C of O process and a checklist of submission items, please visit: <a href="http://dcra.dc.gov/DC/DCRA/Pernuts/Certificates+of+Occupancy+and+Zoning/Get+a+Certificate+of+Occupancy+and+Certificate+of+Occupancy+and+Certificate+of+Occupancy+and+Certificate+of+Occupancy+and+Certificate+of+Occupancy+and+Certificate+of+Occupancy+and+Occupancy+and+Certificate+of+Occupancy+and+Certificate+of+Occupancy+and+Certificate+of+Occupancy+and+Certificate+of+Occupancy+and+Occu

A C of O does not take the place of any license that may be required to permit you to conduct your business at the premises for which the C of O is requested. For information concerning license requirements, contact the License Center, 1100 4th Street, S.W., Second Floor, or by phone at (202) 442-4311 or via email dera@de gov.

APPLICATION INSTRUCTIONS

- Lines 1 to 21 Lines 1 thru 21 ask for information about the proposed business/occupancy. Please be very detailed in the information you provide. Indicate N/A (non-applicable) for items that do not apply. Please make sure that the signatures, dates, telephone numbers, and all information is legible.
- Lines 1 5 This section asks for basic information about the building/property where the premise is located. Do not use abbreviations for street names. Be sure that you indicate the correct quadrant and include the zip code. Provide the building/property owner's name, phone number and email address.
- Line 5 Information regarding the zone district and overlay district, if applicable, which can be obtained from the D.C. Office of Zoning at (202) 727-6311 or by visiting http://deoz.de.gov.
- Lines 6-9 This section asks for basic information about the applicant applying for the C of O. If you are applying as a corporation or other type of business entity, please use the corporate or other business entity name as the applicant's name.

Temporary Occupancy: If you would like to use the building for temporary purposes, a temporary C of O may be sought. Conditions on the issuance of the C of O may also be imposed as necessary, and will include an expiration date.

Partial Occupancy: Upon request from the holder of a building permit, a temporary certificate of occupancy may be issued for part of the building before completion of the entire work covered by the permit, provided such part can be occupied without endangering life, public safety or welfare. If you desire to occupy a portion of the premises under construction, you may seek a partial occupancy C of O

Completion of Core and Shell: Upon request, a conditional C of O can be issued by DCRA to recognize that the core and shell of a building or other structure has been substantially and materially completed in accordance with the applicable provisions of the Construction Codes of the District of Columbia. The issuance of this type of C of O does not permit or authorize use and occupancy of the building or other structure for any purpose.

Establishment of a New Occupancy: Where an occupancy is to be established in a new building or other structure that has not previously been occupied, upon request a C of O can be issued by DCRA to recognize the approved use and occupancy of the premises in the new building or other structure. The issuance of this type of C of O permits use and occupancy of a new building or other structure for the specified uses listed on the C of O Issuance of the C of O may require inspection and approval of the entire new building or other structure for core and shell completion, if a conditional C of O for core and shell has not been previously requested and obtained.

- Line 11 Be as detailed as possible about the proposed used of the premises, referring to the permitted uses under the Zoning Regulations of the District of Columbia and the use classifications of the Construction Codes of the District of Columbia.
- Line 12

 Be as detailed as possible about the prior use of the premises. A copy of an existing C of O is required unless no previous C of O was issued by DCRA. If you need assistance in obtaining a copy of the issued certificate of occupancy, you may call the Records Management Branch Room at (202) 442-4480 to obtain a copy
- Line 13 For proposed occupant load:
 - For assembly uses (such as restaurants, public halls, churches, etc.), enter the maximum number of persons allowed under Section 1004 of the Construction Codes of the District of Columbia
 - For multi-family dwelling uses such as apartment buildings, enter the number of dwelling units.
 - For rooming and boarding houses, enter the number of roomers or boarders.
 - For a community based residential facility (CBRF), enter the number of residents.
 - For hotels and motels, enter the number of rooms, and identify assembly spaces.
 - For schools and child development centers, enter the number of children attending and number of staff
- Line 14 For the calculation of the square footage of the premises to be occupied by the proposed use, please be advised of the following definition of gross floor area:

Gross floor area - the sum of the gross horizontal areas of the several floors of all buildings on the lot, measured from the exterior faces of exterior walls and from the center line of walls separating two (2) buildings.

The term "gross floor area" shall include basements, elevator shafts, and stairwells at each story; floor space used for mechanical equipment (with structural headroom of six feet, six inches (6 ft., 6 in.), or more); penthouses; attic space (whether or not a floor has actually been laid, providing structural headroom of six feet, six inches (6 ft., 6 in.), or more); interior balconies; and mezzanines.

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

This is to certify the	at J.	MH	Manage	ement	
This is to certify the	(Pri	nt Name of solo owne	r, general pari	ner, or corporation	officer)
am the true Owner	of the Busine	ss described b	elow:		
Proposed address of bu	siness you intend	d to occupy:			
Type of business you int	end to operate:				
BEI EXI DIS REI EST	LOW IS/ARE ECUTING AN TRICT OF CO LATING TO TABLISHMEN		TO ACT (NG AN A TIFICATE	ON MY BEHA PPLICATION OF OCCUPA	LF IN FOR INCY
BEI EXI DIS REI EST	LOW IS/ARE ECUTING AN TRICT OF CO LATING TO TABLISHMEN TABLISH OF OWNER	AUTHORIZED ID PROCESSII DLUMBIA CER THE AFOR IT.	TO ACT (NG AN A TIFICATE	ON MY BEHA PPLICATION OF OCCUPA	LF IN FOR INCY
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Government of the District of Columbia Department of Consumer and Regulatory Affairs

1109 4th Street SW Washington oc 20024 (202) 442 4460





CERTIFICATE OF OCCUPANCY

CO1602082 409 EAST CAPITOL ST SE Description of Occupancy DRY CLEANING ¿Zone: CAPIR-4 Square Sűttix Lôt Permission is Hereby Granted To CAPITOLHILLVALET 0812 CAPITOL HILL VAL Property Owner DAE KEUN LÊE Floor(s) Occupied 1601 SPRING GATE DR'UNIT 1301 HEN FIRST MC LEAN VA 22102 3460 Building Permit Number (if applicable) Occupied Sq Footage 825 Conditions/ Rastrictions: Approved Zoning Code Use Diy cleaning or laundry THIS CERTIFICATE MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS MAIN ENTRANCE EXCEPT PLACES OF RELIGIOUS ASSEMBLY. Use complies with all spilicable list and regulations of the District of Columbia. The District of Columbia and to require any changes with all spaces whose use is authorized by the District of Columbia. The District of Columbia has the right to enter upon the District of Columbia and to require any changes which may be necessary to Director: Melinda Bolling

Consideration.

\$1,050,000.00

Tax ID Number

SSL: 0817 0812

GRANTEE'S ADDRESS:

MH Management, LLC 2218 Woodford Road

Vienna, VA 22182

PREPARED BY AND AFTER RECORDATION RETURN TO-

Vision Law Group, PLLC

Jeonghwa Kim, Esq., DC Bar #503310

7700 Little River Turnpike

Suite #403 Annandale, VA 22003

2016060119-2

Title Insurance provider is Old Republic National Title Insurance Company

SPECIAL WARRANTY DEED

THIS DEED (this "Deed") made this 10 th day of 700 , 2016, by and from DAE KEUN LEE through his attorney-in-fact, YOUNG OK LEE, and YOUNG OK LEE, husband and wife ("Grantors"), to and in favor of MH MANAGEMENT, LLC, a Virginia limited liability company ("Grantee").

WITNESSETH, that in consideration of the sum of Ten Dollars and other good and valuable considerations the said parties of the first part do hereby grant, bargain, sell, and convey, in fee simple, unto the Grantees as TENANTS IN COMMON, all that property situate and located in the District of Columbia, and described as follows:

Part of Original Lot numbered 8, in Square numbered 817, BEGINNING for the same at the Northeast corner of said lot, and running thence west along the south line of East Capitol Street, 18 feet; thence south to the rear line of said lot; thence east along said rear line 18 feet; and thence North to the place of beginning.

LOT 812 IN SQUARE 817

AND BEING the same property conveyed to the Grantor by Deed dated July 31, 2007, and recorded on August 3, 2007, as Instrument No. 2007102315. in the Land Records of the District of Columbia.

TOGETHER will all improvements thereupon, and the rights, alleys, ways, waters, easements, privileges, appurtenances and advantages belonging or appertaining thereof.

SUBJECT, HOWEVER, to those matters of record which by their terms affect title to the Property.

The Grantors hereby covenant that they have not done or suffered to be done any act, matter or thing whatsoever to encumber the property hereby conveyed; that they will

warrant specially the property hereby granted; and that they will execute such further assurances of the same as may be requisite.

IN WITNESS WHEREOF, Grantors have executed and delivered this Deed as of the date first hereinabove set forth as the free act and deed of Grantors for the uses and purposes herein set forth, with the specific intention that this Deed constitutes an instrument under seal.

WITNESS the hands and seals the day and year first hereinbefore written:

IN PRESENCE OF:

DAZ KEUN LEZ by young ok LEZ,

Attorney - in-fuct

DAE KEUN LEE by YOUNG OK LEE,

Attorney-in-Fact

IN PRESENCE OF:

On this /Officer, personally appeared DAE KEUN LEE by YOUNG OK LEE, his Attorney-in-Fact, and YOUNG OK LEE, and acknowledged the foregoing deed to be their respective act.

In witness whereof, I hereunto set my hand and official seal.

Notary Public

Commission Expires: 12/3

Doc # 2016060119 Fees \$30,481 50 06/15/2016 11:35 AM Pages. 2

Filed and Recorded in Official Records of WASH DC RECORDER OF DEEDS IDA WILLIAMS

RECORDING FEES SURCHARGE

\$25.00 \$6 50

RECORDATION TAX FEES

\$15,225 00

TRANSFER TAX FEES

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



CERTIFICATE OF OCCUPANCY

PERMIT NO. CO1602082

Issued Date: 04/25/2016

Address 409 EAST CAPITOL ST SE			Zone CAP/R-4	Ward 6	Square	Suffix	Lot 0812
Description of Occupancy DRY CLEANING							
Permission is Hereby Granted To CAPITOL HILL VALET	Trading As CAPITOL HILL VALET		Floor(s) Occupied FIRST	جيا ا	ccupant o of Seats		
Property Owner DAE KEUN LEE	Address 1601 SPRING GATE DR UNIT 1301 MC LEAN, VA 22102-3460		8ZA/PUD Number	82	Occupied Sq. Footage 825 PERMIT FEE \$82.50		
Building Permit Number (if applicable)				laundry			
Conditions/ Restrictions: THIS CERTIFICATE MUST ALWAYS BE CONSPICUOUSLY DISPLAYED AT THE ADDRESS MAIN ENTRANCE, EXCEPT PLACES OF RELIGIOUS ASSEMBLY. Use compiles with DCMR Title 11 (Zoning) and Title 12 (Construction). 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.							
Director Melinda Bolling Permit Clerk Tezrah Thomas Expiration Date							
4/25/2016 TO REPORT WAS	STE FRAUD OR ABUSE BY ANY DC GO	VERNMENT OFFICIAL, CALL	THE CO INSPECTOR GENERAL AT 1-80	10-521-1639			





Department of Consumer and Regulatory Affairs

Remittance Source Document

Permit Operations Division 1100 4th Street SW Washington DC 20024

Tel. (202) 442 - 4589

INVOICE

Fax (202) 442 - 4862 Date:

OFFICE OF FINANCE AND TREASURY

4/25/2016 12:53 PM

DCRA Office: 41679 Batch:

WFE02-90YZ Term: Batch Date 4/25/2016

Cashier: OFT56

Trans #: 51

DEPARTMENT OF CONSUMER & Rept: 01959855

Comment/Document: 2040234

\$82.50 <u>Payment Total:</u>

invoice Number, 2040234

Date: April 19, 2016

Payment Distribution: 2106 (RO (3013) 10001-ops50

\$82.0

VS Tendered: \$82.50

Customer:

DAE KEUN LEE

Mailing Address

1601 SPRING GATE DR UNIT 1301

MC LEAN, VA 22102-3460

Address of Work:

409 EAST CAPITOL ST SE

WASHINGTON, DC 20003

Permit:

CO1602082

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 20

Enhanced Service Fee - C of O

3013-3013-1000-2106

\$33,00

Certificate of Occupancy Filing Fee

3013-3013-1000-2106

\$42.00

Certificate of Occupancy Permit Fee (Enter Sq. Footage)

Invoice Total.

\$82.50

Tezzah Thomas

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS

Application for Certificate of Qccupancy Application Date: 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 409 EAST (APITOL 1. Property Address 2. Building/Property Owner's Name Dre Keun Lee Voust 3. Phone 703-380-2758 Email: WHAME 9@ OMAIL. COM Suffix 4. Property Square へない Lot 0812 5. Number of Floors Overlay (if applicable) 6. Zone APPLICANT INFORMATION 7. Applicant's Name (see instructions) 5con6 -1un 8. Trade name of business (if applicable) _______ 9 Applicant's Mailing Address 409 East Cosite! 10. Applicant's Day Phone # 202 - 549-03-16 Cell # 202 - 910 - 724 Email Address mikes ikim @ Amal. com INFORMATION ON PREMISES DECUPANCY 12. Proposed use of Premises Cleaning CofO# B 35113 13. Prior use of Premises 14. Proposed Occupancy Load 15. Area Occupied by Proposed Use sg. ft. 16. List Floors of a building to be Occupied by Proposed Use 15 + Coo 17. Does your business sell or rent any goods or provide any services that could be described as sexuallyoriented? □□Yes □ ZNo If yes, please fill out the supplemental form. 18. Is your business a Medical Marijuana Dispensary or Production Facility? □Yes 戸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 □Xio If yes, provide building permit # 21. What use was listed on the building permit? Classin. 22. Were all inspections conducted and approved? □ Tes'□ □No 23. Is off-street parking on the property provided for this use? ☐Yes ☑ No If yes, number of spaces: 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 Date *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

C of O # ()		409 8	a ret 1	Ca mil	1 SJ 8
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PERMIT REVI	EW COORDINATOR				
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r				1010	·
Approved By	1 UZ			Date 4-19	ί-(φ
		4			
ZONING INFO			•		
BZA or ZC # (if		-, -, /			
Prior C of O # (if		11 } /	-5-2	-6-	
Prior Use on abo	ve C 010)\r	of clear	200		
ZONING REVI	EWER /				
	Prior Use? Dayes 🗆 🗆 No		Zone _	R-12	
	□Yes I □No Provide Zor	ning Code Use		(V Clesia	ing.
Cite Zoning Secti	ion #	-		٠	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Off-street Parkin	g Required? □ □Yes □ □N	o If yes, number	of spaces req	uired .	If no, was a waiv
granted? Parking	credit? BZA relief obtained	d? Describe			
Is Zoning Inspect	tion Required? [LetYes []c	o Ŋó If Yes, des	scribel	Rufy 1	we,
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Approved By				Date	100/1
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ENGINEERING	I REVIEW AND APPRO	1 1 7 A B		₹	
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DCRA Zoning Help Line 202-442-4576 dcra.dc.gov

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District of Columbia Government
Department of Consumer and Regulatory Affairs
Building and Land Regulation Administration
P.O. Box 37200 — Washington, D.C. 20002-7200

189500

12/19/00 (date)

CERTIFICATE OF OCCUPANCY

HRS. OK HEE AHN 2 2 Permission is heraby granted to. to use suites(s)_ floor(s) of the building located on lot(s). 812 known as premises. 409 P CAPITOL ST. for the following purpose(s)_ DRY CLEANER PICK-UP STORE NOT SEXUALLY ORIENTED EXPIRATION ATE.

WE PREn date is ROUNG TZ SA MENTAL PARTY R-/4 THIS CERTIFICATE SHALL BE POSTED CONSPICUOUSLY ON THE ABOVE PRE-MISES AT ALL TIMES. IT IS VALID INDEFINITELY, unless an expiration date is FEE S 32.00 R

GOVERNMENT OF THE DISTRICT OF COLUMBIA		nt of Consumer a	and Regulatory Affa lation Administration	airs	
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DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS BUILDING AND LAND REGULATION ADMINISTRATION APPLICATION FOR CERTIFICATE OF OCCUPANCY

Date 12/	19/00 Receipt No. 804920
	\$25.00 Non Refundable 550/ Cashier's No. 135479
Certificate Fee -	Based on square footage
INFORMATION ON PROPOSED BUSINESS	1. Premise Address 409 F. CAPITOL ST. S.E., Suite/Room No. 2. Business Telephone No. 547-5356 Fax No. N/A Lot 812 Square 817 3. Trade Name of Business CAPITOL HILL VALET. 4. Is Business Incorporated? Y/N NO Partnership? Y/N NO Sole Proprietor? Y/N Sole Proprietor? Y/N Sole Proprietor N/A Vice President N/A Secretary N/A 5. Corporate Name N/A Vice President N/A Secretary N/A 7. Sole Proprietor MRS. OK HEE AHN 8. Business Owner's Mailing Address 6640 MORNING VIEW C1. phone # (daytime) 547-5356 ALEXANDRIA VA 22315
INFORMATION ON ' OCCURANCY	9. XiOwnership Change Partial Occupancy New Bidg. Duse change DLoad Change DB.ZA No
Î	14. Is this Business Sexually Oriented according to the DC Zoning Regulations?
INFORMATION ON ENTIRE BUILDING	15. Building Owner SUNG J. YI Telephone No(202) 332-5756 16. Building Owner's Address: 1963 CAUGCT ST. NW WASH D.C. 20009 17. Square feet 1600 Sq. feet Numbers of floors 2 Basement YES.
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 OK Hee Alex Date 12/19/00 Signature If Authorized Agent for owner of Business (Attach Authorization) 19. Agent's Name Date 20. Agent's Address
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 409 East Capital Street, SE suite/Room No.
ZONING DIVISION	zone CAP/R-4 overlay District V) N BZ.A. No: B.Z.A. approved date Prior Use Dry Cleaner / Pick-Up Store. Basement & 1st Floor (15/02) R1/20/10
	Date of Last Certificate 6/5/92 Last Certificate No. B162960 Prior B.Z.A No
examiners USE	Use Change
C of C Inspection	Date of scheduled Certificate of Occupancy inspection
C of O APPROVAL	Reason for Denial/Cancellation
	If Approved, Certificate of Occupancy No. 189500 135484 Date of Issuance 1219 m Bidg Electric Plumbing Fire Zoning

for the following floor(s) of the building located on Lot (812 Square 957 Permission is hereby granted to CAPITOL HILL CLEANERS & LAUNDERERS INC. No. B. 35173 Washington, D.C., MAY ZND FEE ZONE R-4 CLEANING AND LAUNDRY AGENCY 409 EAST CAPITOL STREET ANY CHANGE in the type of basiness, community of fastiness, or AT ALL TIMES. IT IS VALID INDIFINITELY, onless on expiration dots is stoted, ONLY for this premises, or part thereof, and for the purpose(s), indicated THIS CERTIFICATE SHALL BE POSTED CONSPICUOUSLY ON THE ABOVE PREMISES obove, and is NOT TRANSFIRABLE to another perion or premises under ANY PATANT NOTICE OF REPERSE SIDE HERE TIFICATE OF OCCUPANC FIGURES A-INSPECTIONS, GOVT, OF DIST, OF COL Complete Comments F1001 known as premises lo use the purposa(s) · conditions.

THIS CERTIFICATE SHALL BE POSTED CONSPICUOUSLY ON THE ABOVE PREMISES AT ALL TIMES.

in (1) the type of business, (2) address of business, (3) ownership of business, or (4) part of the building used for the business. BUT, should there be any change in and or more of the faregoing items a <u>NEW</u> Certificate of Occupancy must be obtained." This Cartificate of Occupancy need not be renewed unless there is a change

CENTRAL PERMIT BUREAU, GOVT. OF DIST. OF COL.

FEE ZONE Bee. BOG Superintendent of Permits Dig

District of Columbia

OFFICE COPY