

**Certificate of Service**

I certify that on April 11, 2025, I served a copy of this application to the following:

D.C. Office of Planning  
1100 4th Street SW, Suite E650  
Washington, DC 20024  
[Planning@dc.gov](mailto:Planning@dc.gov)

Advisory Neighborhood Commission 5E

ANC Office  
[5E@anc.dc.gov](mailto:5E@anc.dc.gov)

Huma Imtiaz, Chairperson  
[5E04@anc.dc.gov](mailto:5E04@anc.dc.gov)

Alice Thompson, SMD  
[5E05@anc.dc.gov](mailto:5E05@anc.dc.gov)

Respectfully Submitted,

*Sarah Harkcom*  
Sarah Harkcom, Case Manager