

CERTIFICATE OF SERVICE
BZA Application No. **BZATmp6558**

Pursuant to the requirements of Subtitle Y § 407.3, I certify that a copy of the application and all accompanying documents have been served upon:


- (a) **The Main ANC Office**
- (b) **The ANC Single Member District Office**
- (c) **The Office of Planning**

Service was made on October 31, 2025 by email to the following:

Advisory Neighborhood Commission 6B:
6B@anc.dc.gov

Vince Mareino, SMD 6B07
6b07@anc.dc.gov

DC Office of Planning
Joel Lawson
Joel.lawson@dc.gov

Signature:  _____