

CERTIFICATE OF SERVICE
BZA Application No. **BZATmp7456**

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**

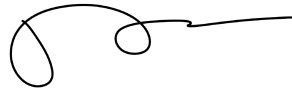
Service was made on July 1, 2026 by email to the following:

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

Mark Eckenwiler, SMD 6C04
6C04@anc.dc.gov

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

Signature: _____

A handwritten signature in black ink, consisting of a large loop followed by a horizontal line.