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: _____