

ZONING COMMISSION OF THE DISTRICT OF COLUMBIA

APPLICATION TO AMEND THE ZONING MAP

Before filling out this form, please see the instructions on the reverse side. Print or type all information unless otherwise indicated.

In accordance with the provisions of Section 102 of the Zoning Regulations, request is hereby made for an amendment to the Zoning Map as follows:

Square No.	Lot Nos.	Existing Zoning	Requested Zoning
<u>See Attachment No. 2 to Cover letter</u>			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Address or description of the premises:

See attachment No. 3 to Cover letter

Area of the Site: See Att No. 10 to Cover letter square feet or acres: N/A

Baist Atlas No. Vol 1, Page Plans 11, 12, 18, 19

The above information and attached documents are true to the best of my knowledge.

Owner's Signature _____

Date _____

Owner's Printed Name _____

Person(s) to be notified of all actions:

Anne Sellin

Anne Sellin

Name

202.387.7782

Telephone Number

1834 16th Street, NW

Address

Washington, DC 2

City

20009

Zip Code

DO NOT WRITE BELOW THIS LINE

Date Received:

Date Accepted: _____

Z.C. Case No. _____

ZONING COMMISSION
District of Columbia

CASE NO. 07-34 ZONING COMMISSION
District of Columbia
EXHIBIT NO. 2 CASE NO. 07-34
EXHIBIT NO. 2