



BEFORE THE ZONING COMMISSION OF THE DISTRICT OF COLUMBIA



APPLICATION FOR CAPITOL GATEWAY DESIGN REVIEW

Before completing this form, please review the instructions on the reverse side.
Print or type all information unless otherwise indicated.

In accordance with the provisions of Chapter 24 of 11 DCMR – Zoning Regulations, request is hereby made for Consolidated Approval of a PUD details of which are as follows:

Square No.	Lot No.	Square Feet	Existing Zoning	Requested Zoning
700	33,802,840,841,	87,989	CG/CR	N/A
	850,857,864,865,			
	868,871,872			

Previous zoning (ZC and/or BZA) actions, including Order No.(s), affecting the above properties: Order No. 971

Address or boundary description of the premises: 25 M Street, SE

Total Area of the Site:	87,989	Square Feet	2	Acres	Baist Atlas No.		Page	
-------------------------	--------	-------------	---	-------	-----------------	--	------	--

Brief description of proposal: The Applicant is proposing a mixed-use development consisting of approximately

60,000 square feet of retail use, 360,000 square feet of office use, and 286,000 of residential use.

Concurrent change of zoning (circle one):
(if yes, please complete a Map Amendment Application)



Advisory Neighborhood Commission(s)/
Single Member ANC District (s):

6D07

If applicable, Historic District(s) in which site is located:

I/We certify that the above information is true and correct to the best of my/our knowledge, information and belief. Any person(s) using a fictitious name or address and/or knowingly making any false statement on this application is in violation of D.C. Law and subject to a fine of not more than \$1,000 or 180 days imprisonment or both.

Signature: Owner's Signature

Date: 12 Nov 08

Owner's Name: West Half 1, LLC; West Half 2, LLC; West Half 3, LLC; C/O John Akridge Development Company

Person to be notified of all actions:

Name: Paul Tummonds

Address: 2300 N Street, NW; Washington, DC

Zip Code: 20037 Phone No.: 202.663.8000

Certification of Minimum Area: I hereby certify that the land area involved in this application is a minimum of
N/A acres or N/A square feet, pursuant to Title 11 DCMR – Zoning §2401.

Signature: _____ Owner's Signature

Date: _____

DO NOT WRITE BELOW THIS LINE

Date Received: _____

Date Accepted: _____

ANY APPLICATION THAT IS NOT COMPLETED IN ACCORDANCE WITH THE INSTRUCTIONS ON THE BACK OF THIS FORM WILL NOT BE ACCEPTED.

ZONING COMMISSION
District of Columbia
CASE NO.08-30
EXHIBIT NO.3C