

(Revised 8/6/19)



BEFORE THE ZONING COMMISSION
FOR THE DISTRICT OF COLUMBIA

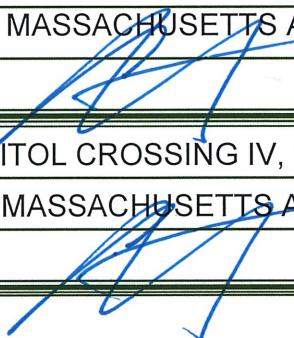
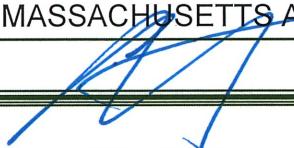


FORM 100 – APPLICATION SIGNATURE PAGE

All Zoning Commission applications shall be filed through the Interactive Zoning Information System (IZIS). Pursuant to Subtitle Z §§ 300.5, 301.4, and 302.4, please use Form 100 to provide the name(s), address(es), and signature(s) of each owner of property included in the area to be developed, or of the owner's authorized agent.

PUD: <input type="checkbox"/> 1 st Stage <input type="checkbox"/> 2 nd Stage <input type="checkbox"/> Consolidated	Modification: <input type="checkbox"/> Minor <input type="checkbox"/> Consequence <input type="checkbox"/> Significance
<input type="checkbox"/> Map Amendment <input type="checkbox"/> Design Review	<input type="checkbox"/> Campus Plan <input checked="" type="checkbox"/> Time Extension

I/We hereby certify that the information contained on the application for the relief filed with the Zoning Commission 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/petition is in violation of D.C. Law and subject to a fine of more than \$1,000 or 180 days' imprisonment or both. (D.C. Official Code § 22-2405.)

Owner's Name:	CAPITOL CROSSING III, LLC	
Owner's Address:	200 MASSACHUSETTS AVE NW STE 420, WASHINGTON DC 20001-5653	
Owner's Signature:	 Date: 11/17/2023	
Owner's Name:	CAPITOL CROSSING IV, LLC	
Owner's Address:	200 MASSACHUSETTS AVE NW STE 420, WASHINGTON DC 20001-5653	
Owner's Signature:	 Date: 11/17/2023	
Owner's Name:		
Owner's Address:		
Owner's Signature:		
Owner's Name:		
Owner's Address:		
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Owner's Name:		
Owner's Address:		
Owner's Signature:		

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

ZONING COMMISSION
CASE NO. 08-340
EXHIBIT NO. 2B