



**BEFORE THE BOARD OF ZONING ADJUSTMENT
OF THE DISTRICT OF COLUMBIA**



FORM 120 - APPLICATION FOR VARIANCE/SPECIAL EXCEPTION

Before completing this form, please review the instructions on the reverse side.
Print or type all information unless otherwise indicated. All information must be completely filled out.

Pursuant to X 1002.1 – Area/Use Variance and/or Y 901.1 - Special Exception of Title 11 DCMR- Zoning Regulations, an application is hereby made, the details of which are as follows:

Address(es)	Square	Lot No(s).	Zone District(s)	Type of Relief Being Sought	
				Area Variance Use Variance Special Exception	Section(s) of Title 11 DCMR - Zoning Regulations from which relief is being sought
5212 Astor PL SE Washington DC 20019	5308	0025	R-2		

Present use(s) of Property: Community based youth residential substance abuse treatment services

Proposed use(s) of Property: Community based youth residential substance abuse treatment services

Owner of Property: Joyce and Godwin Ukwuani **Telephone No:** 2022621214

Address of Owner: 5214 Astor PL SE Washington DC 20019

Advisory Neighborhood Commission Single-Member District (for instance 2A09 = Ward 2, Subdivision A, and SMD 09) 7 E 0 6

Written paragraph specifically stating the “who, what, and where of the proposed action(s)”. This will serve as the Public Hearing Notice:

Plant The Seed Youth Treatment Services (Applicant) is the Leasee of the Property located at 5212 Astor Pl SE DC Square 5308, Lot 0025 (The property) which is zoned R-2. The relief sought is to increase the present occupancy from six (6) persons to fifteen (15) persons. The applicant proposes to increase the occupancy accordingly and requests special exception approval pursuant to subtitle X 901.2 and Subtitle U 203.1-(e) respectively.

The property is located at 5212 Astor Pl SE and is in the R-2 zone district. Abutting to the north is a semi attachment residence. Abutting the property to the south is a 12 unit residential building. Abutting the residence to the east is the street

EXPEDITED REVIEW REQUEST (If interested, please select the appropriate category)
 I waive my right to a hearing, agree to the terms in Form 128 - Waiver of Hearing for Expedited Review, and hereby request that this case be placed on the Expedited Review Calendar, pursuant to Y 401 (CHOOSE ONE):
 A park, playground, swimming pool, or athletic field pursuant to Y401.2(c), or
 An addition to a one-family dwelling or flat or new or enlarged accessory structures pursuant to Y 401.2(b)

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/petition is in violation of D.C. Law and subject to a fine of not more than \$1,000 or 180 days imprisonment or both. (D.C. Official Code § 22-2405)

Date: 11/15/2017 **Signature*:** Michael Davis

To be notified of hearing and decision (Owner or Authorized Agent*):

Name: Michael Davis **E-Mail:** mdavis@ptsyts.org

Address: 4865 F ST SE **Phone No.:** 2409939347

City, State, Zip: Washington DC 20019 **Fax No.:** 2025065469

** To be signed by the Owner of the Property for which this application is filed or his/her authorized agent. In the event an authorized agent files this application on behalf of the Owner, a letter signed by the Owner authorizing the agent to act on his/her behalf shall accompany this application.*

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

FOR OFFICIAL USE ONLY Board of Zoning Adjustment
District of Columbia

Exhibit No. 1 **Case No.** _____
CASE NO.19677
EXHIBIT NO.1