| (Revised 8/2/16) | | Ca | ase No | | |
|---|-----------------------|----------------------|---------------|---|--|
| * * * BEFORE THE BOARD OF ZONING ADJUSTMENT | | | | | |
| FORM 145 – AFFIDAVIT OF POSTING | | | | | |
| Before completing this form, please review the instructions on the reverse side. Print or type all information unless otherwise indicated. | | | | | |
| (Name of person posting the property) Jennifer Fowler | | , being first duly s | worn, do he | reby depose and say that: | |
| On January 19, 2021 at | 1:55 PM | ime) | I caused | (number of notices) | |
| Zoning Sign(s) furnished by the Office of Zoning to be posted on private property known as: | | | | | |
| (address of premises) 1507 E Street SE, Washington, DC 20003 | | | | | |
| In plain view of the public on the following street frontages: | | | | | |
| I caused to be taken, (no. of photos) photograph | (s), attached hereto, | of the Zoning Sign(| s) in place w | hich fairly depict each | |
| Zoning Sign as seen by the public. The photographs are numbered and correspond to the following street frontages: | | | | | |
| Photograph No. | Stre | et Frontage | | | |
| 1 1500 block of E Street SE | | | | | |
| 2 1500 block of E Street SE | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| I/We certify that the above information is true | and correct to the b | est of my/our know | rledge, infor | mation and belief. Any | |
| person(s) using a fictitious name or address and/or knowingly making any false statement on this form 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: 1-28-21 Signar | | y sun | | | |
| Subscribed and sworn to before me this 28th | day of Janua | | | (seal) | |
| See Attached Certificate | | | | | |
| Notary Public | | | | | |
| My commission expires on: | (date) 10/11/2024 | | | Board of Zoning Adjustment District of Columbia CASE NO.20371 | |

JURAT

| State/Commonwealthof F | LORIDA) | | | |
|--|--|--|--|--|
| |) | | | |
| ☐City ✓ County of P | inellas) | | | |
| | | | | |
| On 01/20/2021 hefer | re me, William Wallace Schrimpf Jr | | | |
| On <u>01/28/2021</u> , befor Date | Notary Name | | | |
| | s subscribed and sworn (or affirmed) before me by: | | | |
| the foregoing instrument was subscribed and sworn (or animied) before the by. | | | | |
| Jennifer Fowler | | | | |
| Name of Affiant(s) | | | | |
| | | | | |
| ☐ Personally known to me OF | { | | | |
| ☐ Proved to me on the basis of the oath of | | | | |
| Name of Credible Witness | | | | |
| ✓ Proved to me on the basis of satisfactory evidence: <u>Washington</u> , <u>DC Driver License</u> | | | | |
| | Type of ID Presented | | | |
| | | | | |
| | | | | |
| | WITNESS my hand and official seal. | | | |
| | VITTAZOS My hand and omolal oddi. | | | |
| | Notary Public Signature: | | | |
| WILLIAM WALLACE | | | | |
| SCHRIMPFJR Notary Public - State of Florida | Notary Name: William Wallace Schrimpf Jr | | | |
| Commission # HH 52334 | Notary Commission Number: HH 52334 | | | |
| Expires on October 11, 2024 | Notary Commission Expires: 10/11/2024 | | | |
| <u>Unine.</u> | Notarized online using audio-video communication | | | |
| | notanizoa omno asing assis naso communication | | | |
| | | | | |
| DESCRIPTION OF ATTACHED DOCUMENT | | | | |
| Title or Type of Document: <u>Instructions For Form 145 - Affidavit Of Posting</u> | | | | |
| ··· | | | | |
| Document Date: 01/19/2021 | | | | |

Number of Pages (including notarial certificate): _____3



