

RECEIVED

Department of Consumer and Regulatory Affairs

2015 AUG 7 AM 9 10

Permit Operations Division
1100 4th Street SW
Washington DC 20024
Tel. (202) 442 - 4589 Fax (202) 442 - 4862
TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 9557

HRA-DHOD RENTAL ACCOMMODATIONS DIVISION

Date:

June 26, 2015

Cap Id:

R1500147

Department of Housing and Community Development Housing Regulation Administration (HRA) 1800 Martin Luther King, Jr. Avenue, SE Washington, DC 20020 (202) 442-7200

Re: Request for clearance to issue Raze Permit

901 H ST NE

LOT: 0055 SQUARE: 0912 TYPE:

VACANT: No

An application to raze the structure located at the above-referenced address was filed on this date with the Department of Consumer and Regulatory Affairs, Permit Operations Division. The applicant certifies that it the structure is a housing accommodation or rental unit, (1) the structure will not be razed for the purpose of constructing or expanding a hotel, motel, inn, or other structure used for transient, residential occupancy; and (2) the applicant shall complete and serve on each tenant a 180-Day Notice to Vacate for Demolition, on a form provided by the Housing Regulation Administration, Rental Accommodations Division, in advance of any action to recover possession of the housing accommodation or rental unit occupied by the tenant.

The applicant further certifies that if the structure is a housing accommodation or rental unit, the tenant (s) have been provided the opportunity to purchase the housing accommodation or rental unit, but failed to exercise their rights, in accordance with the tenant opportunity to purchase requirements codified in the Rental Housing Conversion and Sale Act of 1980, as amended (D.C. Official Code 42-3401.01 et.seq.) and Subchapter VII of the Rental Housing Act of 1985, as amended (D.C. Official Code 42-3501.01 et. seq.), including all relevant regulations in Title 14, Sections 4401 and 4700 of the District of Columbia Municipal Regulations.

A complete copy of the raze permit application and applicant's certifications are attached.

Please notify our office of the satisfactory completion of your processing of this permit by filling out the clearance section below and returning this form to the Permit Operations Division, D.C.R.A., 1100 4th Street S.W., Washington D.C. 20024

CLEARANCE

This is to inform you that the applicant for the proposed razing of the structure identified above has completed all RACD elements of the Raze Permit process and satisfied all of our requirements. We have no objections to proceeding with the proposed razing of said structure.

Date:

Signature:

Name of releasing RACD Official. (print)

CAM BralFord



APPLICATION FOR RAZE PERMIT

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide detailed information. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

105.1.7.2, and Section 155A.					_			
R1500 14	7		Applio	ation Date: 6	/26/1	15		
	1. INFORMATIO	N ON PR	OPERTY					
1. Address of Proposed Work		2. Quad	3. Ward	4a. Square	- 4	4b. Suffix	5. Lot	
901 H Street, NE, Washington D	С	NE	Six	912			55	
united to buy a supply of the	2. APPLICANT	INFORM	IATION					
6. Property Owner	7. Complete mailing address			ne Number(s)		9. Email		
Parcel Seven Associates, LLC	1100 New Jersey Avenue	, SE, Washin 571-382-22102			lmoses@rappaportco.com			
10. Agent/Contractor for Owner (if app	olicable) 11. Complete mailing address	s (include 2	clude zip) 12. Phone Number(s			s) 13. Email		
	3. TYPE O	FPERM	ΙT		ne.			
14. Check all that apply:	aze Permit							
	4. DESCRIPTIO	N OF BL	JILDING				Harrist M	
15. Description of Building to be Raze	ed (e.g., two story brick single family dwe	elling)			16. E	xisting Number of	Stories of Bldg:	
one story brick retail center buil	1							
17. Use(s) of Property (specifically inc	dicate if any use is residential.)	1	8. Materials	of Building (bri	ick, w	ood, etc.)		
retail center		b	rick					
19. Bldg Length (ft)	20. Bldg Width (ft)	21. Bldg Height (ft)				22. Bldg Volume (cu ft) (L x W x H)		
494' 1"	141'	17"	17"			1,184,118' 1"		
	OFFICIAL	USE ON	LY		-1-			
CONDITIONS/ COMMENTS:								

	70-51,11	SECT	ION A. RAZE PERMIT	T. P.				
23. Raze Contractor's Name		24. Contractor's Address (including zip code)			25. Contractor's Phone			
TBD		TBD			тво			
26. Historic District?	Yes	⊠No	33. Raze Contractor Sign	nature				
27. CFA?	Yes	⊠ No						
28. Raze Entire Building?	⋉Yes	No	34. Property Owner Sign	ature	ıre			
29. Building Condemned?	Yes	⊠ No						
30a. Party Wall?	Yes	⊠No	30b. If yes, adjacen	30b. If yes, adjacent property owner signature is required.				
			30c. Any raze permit application for a building(s) involving party include 2 copies of a plan that show how the party wall(s) will be p					
31. Building Vacant?	Yes	⊠ No	Building must be vacant	before l	Raze Permit issuance	ð.		
32. Public Space Vault?	Yes				Official Use Only			
	_	_	Fee By			Date		
33. Plumber's Name 34. Plumber's License Number 35. Raze Method (ball, bulldozer, t					all, bulldozer, by hand, etc.)			
TBD		TBD			TBD			
You must submit a Certificate of Insural square feet or less in area and not more	nce coveri	ng the raze ope	eration/contractor- unless the	e buildir	ng you plan to raze is	an accessory building 500		
2. The Certificate should:	e tilali olie	Story, writing u	etached from any other build	ing on	the same or adjoining	g promises.		
Show the holder of the insural	nce as: De	eputy Director, f	Permit Division, 1100 4th St	SW, W	ashington, DC 20024			
 Include a 30-day advance not 	tice cancel	lation clause.						
 Include these amounts of inst State that the insurance cove 	Irance cov	erage: Bodily In	njury, \$100,000; Aggregate, he District of Columbia " if th	\$300,0	00; and Property Dar	nage, \$100,000. for blanket coverage		
 State that the insurance cove If the insurance is for one spe 	_				e of the madranae is	P		
					(address of raz			
36. Insurance Company		37. Policy	or Certificate No.		38. Expiration D	eate		
TBD		TBD			TBD			
39. Asbestos in Building? If yes, indicate location:	×Yes	□ No		Of	fficial Use Only			
,	V		Fee	Ву		Date		

28 11	1	1 11			21	8	21
22 H	111	8 22 8 22 8 30	E .	111	12	3	28
22		8 30		13	22	П	н

Environmental Intake Form

DEPARTMENT OF CONSUMER WEST ABOUT OF THE	Eliviioliii	icilai	IIICANC				
	Owner & Contact Inform	ation	4 (2)				
Complete address of proposed work							
Square Suffix (if any)	Lot Applicatio	n date (4 r	numbers t	or vea	ar) l		
Sumx (if any)	Suffix (if any) Lot Application date (4 numbers for year)						
			\perp				
Number Ext Official street name					Quadrant Unit/Suite		
Decided name	Application number (if applicable)	Project De	narintian	_			
Project name	Application number (if applicable)	Project De	scription				
		2. 51			lo ==== 2 16 6 15		
6. Owner	7. Complete mailing address (include zip)	8. Phone			9. Email, if you prefer e-notice		
Agent for owner, if applicable	11. Complete mailing address (include zip)	12. Phone			13. Email, if you prefer e-notice		
					1		
	Project Scope			Yes (
	I that this project involves.)		No Yes	-	If You Answer "Yes"		
Is this project a residential structure with the structure with t			_	-			
 Is this project a single-family structure as Is this project an accessory structure, s 	not built in conjunction with 2 or more units?			-			
	n with no building use or capacity change?	-	_	1			
	nent Zone, as defined in DC Official Code §	6-1501		Skip	to the signature line.		
et seq (DC Law 7-177)?					3		
6. Is this project in the Central Employment Area, defined in DC Zoning Regulations?							
7. Does the project involve <i>only</i> operation, repair, maintenance, or minor alteration of public							
	nent, or topographical features, with <i>negligi</i> i	ble or					
 no expansion of use beyond its current Does the owner of this site own adjacent 			_	_			
Do you plan to develop adjacent/abuttir			-	Attac	ch a site plan. If there is no plan,		
	quires permit(s) on any site in this square in	next 3	\neg		ch a written explanation.		
years?							
11. Is this project a solid waste facility?				See	EIS Coordinator.		
	npact Statement (EIS) or a functional equive	alent, as		Attac	ch the EIS or equivalent.		
required by the National Environmental	nan those listed in this form, from the require	most to	_				
submit an Environmental Screening Fo		inent to	Attach an explanation; cite relevant section of regulations.				
4. Is the total project cost more than \$1.51 million, including site preparation and If you're not claiming an exempt							
construction?					h an EISF		
5. For projects with a total cost of \$1.51 m	illion or less, check all that apply:						
⑤ Contains threatened or endangered							
Is within 100 feet of a pond, stream,							
including VOCs).	prous or other air pollutants (from any source	³,		If you	u check any item, attach EISF or		
	hazardous substances, as defined in 20 DC	MR			valent.		
7299.				'			
Will be built on land where the water	r table depth is less than 3 feet.						
Will require blasting.	dian-tiva ba-nad-ua unata						
Will generate medical, infectious, ra	dioactive, or nazardous waste.		_				
	n are true and complete to the best of my kno e statements on this application is punishable						
Signatur	e of Owner/Authorized Agent				Date		
Signatur	OFFICIAL USE ONLY	F 5			- Jate		
nvironmental Impact Screening Form Require							
© Yes, Referred to EIS Coordinator ©					Date		
5 rosi ricionos to Ele decidinator w	54107 (141101101						

NOTE: Building permit approval is not the same as approval of an action or entire project under the Environmental Policy Act of 1989. If you build on the same, adjacent, or abutting property, or expand on work covered by this Environmental Intake Form within 3 years, you may be required to file an EISF for the whole project, including the part covered by this application and permit approval. If the action violates any federal or DC environmental laws, an EISF can be required.

To report waste, fraud, or abuse by any DC government office or official, call the inspector General: 1-800-521-1639

GOVERNMENT OF THE DISTRICT OF COLUMBIA

CERIFICATION FOR RAZE PERMIT APPLICATION

This certifies that Parch Associates UC (referred to as Owner) owns the property at (Legal Name of Property Owner)
and that the person signing below has the legal authority to execute this Certification (Property Address)
and to make the representations and certifications below, on behalf of the Owner:
I am applying for a Raze Permit for the subject property.
I understand that the Raze Permit must be issued prior to any raze activity or operations.
If I do not have a Raze Permit before I start any activity or operations to raze the structure, I will be subject to criminal or civil penalties under District of Columbia laws.
(Initial here to certify that you have read and understand this paragraph)
A. Use of Property as Housing Accommodation
I hereby certify that the structure to be razed IS NOT a housing accommodation.
If the structure is a housing accommodation, complete Section B. If the structure is not a housing accommodation, skip to Section C and the signature block.
B. Additional Provisions Applicable to Razing of "Housing Accommodations"
I agree, in accordance with DC Official Code (DCOC) §§ 42-3506.02(a)-(b) and 14 DCMR § 4400.2, not to use the permits to:
Demolish any housing accommodation or rental unit for the purpose of constructing or expanding a hotel, motel, inn, or other transient residential accommodation.
Construct or expand a hotel, motel, inn, or other transient residential occupancy on the site of a housing accommodation or rental unit demolished after July 17, 1985. (Initial here to certify that you have read and understand this paragraph)
I acknowledge that I must comply with the requirements in the "Tenants Opportunity to Purchase Act," codified in DCOC § 42-3404.02, et seq., and in subchapter VII of the "Rental Housing Act," codified in DCOC §§ 42-3507.01 to 42-3507.03 with implementing regulations in 14 DCMR § 4401. These requirements include, but are not limited to:
Providing tenants with an opportunity to purchase the housing accommodation, via a written copy of an offer for sale, before issuing a Notice to Vacate for purposes of demolition or discontinuance of housing use.
Providing tenants with a 180-day Notice to Vacate that complies with and notifies each tenant of his/her potential right to relocation assistance.
(Initial here to certify that you have read and understand this paragraph)
C. Execution and Certification Applicable to All Applicants
I certify that I have read and understand the requirements in this certification and that any representations I made here are true and accurate to the best of my knowledge. If I fail to follow the above requirements, I acknowledge that this application, and any permits issued as a result of it, may be revoked under DCRA's authority and discretion. I acknowledge that I have been advised that failure to get a Raze Permit before I start operations to raze the structure may subject me to criminal and/or civil penalties.
Name of Owner: Pavel Styly Associates UC Signature: (Print Name of Owner)
Name of Agent: Signature: Signature: 8/7/15
District of Columbia: SS
Subscribed and sworn to before me, in my presence, this TH day of ALCAST Ext. L. McCamey, Notary Public, D.C.
My commission expires January 14, 2018.

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Office of Tax and Revenue

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Property Tax Bills
Property Assessment
Process
Property Assessment
Appeals
Tax Relief Credits
Search Real Property
Sales Database
Search Real Property
Assessment Database

Property

Property Detail

Address: 0901 H ST NE

SSL: 0912 0055

Record Details

 Neighborhood:
 OLD CITY!
 Sub-Neighborhood:
 J

 Use Code:
 61 - Commercial-Banks, Financial
 Class 3 Exception:
 No

Tax Type: TX - Taxable Tax Class:
Homestead Status: ** Not receiving the Homestead Deduction

ssessor: PAUL GUDELSKI

 Gross Building Area:
 Ward:
 6

 Land Area:
 87,052
 Triennial Group:
 2

Owner and Sales Information

 Owner Name:
 PARCEL SEVEN ASSOCIATES LLC RAPPAPORT MGMT CO

 Mailing Address:
 8405 GREENSBORO DR STE 830; MC LEAN VA22102-5121

 Sale Price:
 Not Available

Recordation Date: Not Available
Not Available

Instrument No.:

Tax Year 2016 Preliminary Assessment Roll

 Current Value (2015)
 Proposed New Value (2016)

 Land:
 \$17,790,460
 \$21,153,640

 Improvements:
 \$100,000
 \$100,000

 Total Value:
 \$17,890,460
 \$21,253,640

 Taxable Assessment:*
 \$17,890,460
 \$21,253,640

View Tax Information | View Payments | View Current Tax Bill

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^{*} Taxable Assessment after Tax Assessment Credit and after \$71,400 Homestead Credit, if applicable. (Click here for more information).

^{**} If you believe you should be receiving tax relief through the Homestead deduction program and if you are domiciled in the District and this property is your principal place of residence, you can access the link below, complete the form, and return it per the instructions. For additional information regarding the Homestead program, call (202)727-4TAX, Click here to download the Homestead Deduction and Senior Citizen Tax Relief application *



RECEIVED

Department of Consumer and Regulatory Affairs

Permit Operations Division 1100 4th Street SW Washington DC 20024

Tel. (202) 442 - 4589 Fax (202) 442 - 4862
TO SCHEDULE INSPECTIONS PLEASE CALL (202) 442 9557

2015 AUG 7 AM 9 10

HRA-DHCD PENTAL ACCOMMODATIONS

DIVISION

Date:

June 26, 2015

Cap Id:

R1500146

Department of Housing and Community Development Housing Regulation Administration (HRA) 1800 Martin Luther King, Jr. Avenue, SE Washington, DC 20020 (202) 442-7200

Re: Request for clearance to issue Raze Permit

961 H ST NE

LOT: 0055 SQUARE: 0912 TYPE:

VACANT: Yes

An application to raze the structure located at the above-referenced address was filed on this date with the Department of Consumer and Regulatory Affairs, Permit Operations Division. The applicant certifies that it the structure is a housing accommodation or rental unit, (1) the structure will not be razed for the purpose of constructing or expanding a hotel, motel, inn, or other structure used for transient, residential occupancy; and (2) the applicant shall complete and serve on each tenant a 180-Day Notice to Vacate for Demolition, on a form provided by the Housing Regulation Administration, Rental Accommodations Division, in advance of any action to recover possession of the housing accommodation or rental unit occupied by the tenant.

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A complete copy of the raze permit application and applicant's certifications are attached.

Please notify our office of the satisfactory completion of your processing of this permit by filling out the clearance section below and returning this form to the Permit Operations Division, D.C.R.A., 1100 4th Street S.W., Washington D.C. 20024

CLEARANCE

This is to inform you that the applicant for the proposed razing of the structure identified above has completed all RACD elements of the Raze Permit process and satisfied all of our requirements. We have no objections to proceeding with the proposed razing of said structure.

Date:

0/11/2015

Name of releasing RACD Official. (print)

Signature:



APPLICATION FOR RAZE PERMIT

Application can be downloaded and is fillable except for signature area. If not filling out on computer, please type or print legibly in ink. Please provide detailed information. Write N/A (non-applicable) for items that do not apply. Erasing, crossing out, whiting out, or otherwise altering any entered information will void this application. The owner of record must sign the application with an original signature.

Applicable code sections are in the 2008 DC Building Code Supplement Chapter I § 105.1.7, 105.1.7.1, 105.1.7.1.1, 105.1.7.1.2, 105.1.7.2, and Section 155A.

R1500 14	4	,	A	Applica	ation Date: 6/	26/1	15	
1. Address of Proposed Work	1. INFORMATIO	N ON Pi			4a. Square		4b. Suffix	5. Lot
961 H Street, NE, Washington D					912	7	TO. CUIIIA	55
erne filmstander	2. APPLICANT		-	100				
6. Property Owner	7. Complete mailing address		_		ne Number(s)	_	9. Email	
Parcel Seven Associates, LLC 10. Agent/Contractor for Owner (if app	1100 New Jersey Avenue		<u> </u>		82-22102		Imoses@rappa	aportco.com
To. Agenizeontractor for Owner (if app	olicable) 11. Complete mailing addres	s (include	ZIP) 12	2. Pno	one Number(s)	\neg	13. Email	
			_					
14. Check all that apply:	3. TYPE 0	FPERN						
	4. DESCRIPTIO	N OF B	III DIN	ıc				
15. Description of Building to be Raze	ed (e.g., two story brick single family dwe		31LD11X		10	6. E:	xisting Number of S	tories of Bldg:
one story brick building					1			
17. Use(s) of Property (specifically Ind	licate if any use Is residential.)		8. Mater	rials o	f Building (bric	k, wo	ood, etc.)	
former bank			orick					
19. Bidg Length (ft)	20. Bldg Width (ft)	21. Bldg	Height (1	(ft)		22. Bldg Volume (cu ft) (L x W x H)		ft) (L x W x H)
49'	51'	15' 3"			37,485' 3"			
CONDITIONS/ COMMENTS:	OFFICIAL	USE ON	LY	_				-
GONDANIONO, GONNACATO.								
								}

第111日的		SECT	ION A. RAZE PERMIT					
23. Raze Contractor's Name		24. Contractor's Address (including zip code)			25. Contractor's Phone			
TBD		TBD			TBD			
26. Historic District?	Yes	⊠No	No 33. Raze Contractor Signature					
27. CFA?	Yes	ĭ⊠ No						
28. Raze Entire Building?		No	34. Property Owner Signature					
29. Building Condemned?	□Yes	× No	No					
30a. Party Wall?	Yes	⊠ No	30b. If yes, adjacent property owner signature is required.					
			30c. Any raze permit application for a building(s) involving party walls mu include 2 copies of a plan that show how the party wall(s) will be protected					
31. Building Vacant?	⊠Yes	No	Building must be vacant before Raze Permit issuance.					
32. Public Space Vault?	Yes	⊠ No	Official Use Only					
			Fee By Date			Date		
33. Plumber's Name		34. Plumber's	License Number		35. Raze Method (b	all, bulldozer, by hand, etc.)		
TBD		TBD			TBD			
You must submit a Certificate of Insura square feet or less in area and not more The Certificate should: Show the holder of the insura Include a 30-day advance not	e than one nce as: De ice cancel	estory, wholly deputy Director, lation clause.	etached from any other build Permit Division, 1100 4th St	ding on	the same or adjoining	g premises.		
 Include these amounts of insu State that the insurance cove 	rs "Razing	Operations in t	he District of Columbia," if the	he scop				
 If the insurance is for one spe 	cilic addre	ess only, state t	nat, Razing Operations at _	-	(address of raze	operation)		
36. Insurance Company		37. Policy	or Certificate No.		38. Expiration D	ate		
TBD		TBD			TBD			
39. Asbestos in Building? If yes, indicate location:	×Yes	□ No		Of	fficial Use Only			
			Fee	Ву		Date		

_			g@mmnSq	WIL.	
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22 8		H I	11	H	1 4

Environmental Intake Form

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第 1000年,2000年,1000年,1000年	Owner & Contact Info	ormation		等。
Complete address of proposed work				
Square Suffix (if any)	Lot	ication date (4	numbers f	for year)
Sum to any		T T	T	or your,
Number Ext Official street name				Quadrant Unit/Suite
THAT I THE TOTAL OF THE TOTAL O			7	
Project name	Application number (if applicable)	Project D	escription	
		1		
6. Owner	7. Complete mailing address (include zip)	B. Phone		9. Email, if you prefer e-notice
	, , , , , , , , , , , , , , , , , , , ,			
		1		
10. Agent for owner, if applicable	11. Complete mailing address (include zip)	12. Phone	е	13. Email, if you prefer e-notice
		- 1		
	Project Scope			NOT THE REPORT OF THE PARTY OF
Scope (Check a	all that this project involves.)		No Yes	If You Answer "Yes"
	ithin R-1 through R-5-A zoning districts?			
	not built in conjunction with 2 or more un	nits?		
	such as a garage, patio, pool, or fence?			
	on with no building use or capacity chang			4
	oment Zone, as defined in DC Official Co	de § 6-1501		Skip to the signature line.
et seq (DC Law 7-177)?				4
	ent Area, defined in DC Zoning Regulation			4
	on, repair, maintenance, or minor alteration			
	oment, or topographical features, with <i>ne</i> g	jiigible or		
no expansion of use beyond its currenB. Does the owner of this site own adjacer				
				Attach a site plan. If there is no plan,
9. Do you plan to develop adjacent/abutting property in next 3 years? Attach a site plan. If there is no attach a written explanation.				
vears?	squiles permit(s) on any site in this squar	e iii iiext 5		attacif a writter explanation.
11. Is this project a solid waste facility?			-	See EIS Coordinator.
12. Have you prepared an Environmental	Impact Statement (EIS) or a functional e	guivalent, as		
required by the National Environmenta		1		Attach the EIS or equivalent.
13. Are you claiming an exemption, other t		quirement to		Attach an explanation; cite relevant
submit an Environmental Screening Fo	orm, under Title 20 § 7202.			section of regulations.
14. Is the total project cost more than \$1.5	1 million, including site preparation and			If you're not claiming an exemption,
construction?				attach an EISF.
For projects with a total cost of \$1.51 r	million or less, check all that apply:	1		
⑤ Contains threatened or endangered	d plant or animal species.			
⑤ Is within 100 feet of a pond, stream		- 1		
	lorous or other air pollutants (from any so	ource,		l
including VOCs).		1		If you check any item, attach EISF or
• • • • • • • • • • • • • • • • • • • •	f hazardous substances, as defined in 20	DCMR	- 1	equivalent.
7299.		I		
Will be built on land where the water	er table depth is less than 3 feet.	1		
Will require blasting.Will generate medical, infectious, ra	adioactive, or hazardous waste			
certify that all statements on this application				
DC laws and regulations. The making of fals	se statements on this application is punis	nable by crim	ninal pena	alties. (DC Code Sec. 22-2514)
and the second s	Parameter Comments			
Signatu	ure of Owner/Authorized Agent		-	Date
	OFFICIAL USE ONL			
Environmental impact Screening Form Require	ed			
S Yes. Referred to EIS Coordinator	No DCRA Reviewer			Date
NOTE: Building permit approval is not the same a	as approval of an action or entire project under	the Environme	ental Polic	y Act of 1989. If you build on the same.

NOTE: Building permit approval is not the same as approval of an action or entire project under the Environmental Policy Act of 1989. If you build on the same, adjacent, or abutting property, or expand on work covered by this Environmental Intake Form within 3 years, you may be required to file an EISF for the whole project, including the part covered by this application and permit approval. If the action violates any federal or DC environmental laws, an EISF can be required.

GOVERNMENT OF THE DISTRICT OF COLUMBIA

CERIFICATION FOR RAZE PERMIT APPLICATION

This certifies that Payer Styly Associates UC (referred to as Owner) owns the property at (Legal Name of Property Owner)
and that the person signing below has the legal authority to execute this Certification (Property Address)
and to make the representations and certifications below, on behalf of the Owner:
I am applying for a Raze Permit for the subject property.
I understand that the Raze Permit must be issued prior to any raze activity or operations.
If I do not have a Raze Permit before I start any activity or operations to raze the structure, I will be subject to criminal or civil penalties under District of Columbia laws.
(Initial here to certify that you have read and understand this paragraph)
A. Use of Property as Housing Accommodation
I hereby certify that the structure to be razed IS NOT a housing accommodation.
If the structure is a housing accommodation, complete Section B. If the structure is not a housing accommodation, skip to Section C and the signature block.
B. Additional Provisions Applicable to Razing of "Housing Accommodations"
I agree, in accordance with DC Official Code (DCOC) §§ 42-3506.02(a)-(b) and 14 DCMR § 4400.2, not to use the permits to:
Demolish any housing accommodation or rental unit for the purpose of constructing or expanding a hotel, motel, inn, or other transient residential accommodation.
Construct or expand a hotel, motel, inn, or other transient residential occupancy on the site of a housing accommodation or rental unit demolished after July 17, 1985. (Initial here to certify that you have read and understand this paragraph)
I acknowledge that I must comply with the requirements in the "Tenants Opportunity to Purchase Act," codified in DCOC § 42-3404.02, et seq., and in subchapter VII of the "Rental Housing Act," codified in DCOC §§ 42-3507.01 to 42-3507.03 with implementing regulations in 14 DCMR § 4401. These requirements include, but are not limited to:
Providing tenants with an opportunity to purchase the housing accommodation, via a written copy of an offer for sale, before issuing a Notice to Vacate for purposes of demolition or discontinuance of housing use.
Providing tenants with a 180-day Notice to Vacate that complies with and notifies each tenant of his/her potential right to relocation assistance. (Initial here to certify that you have read and understand this paragraph)
C. Execution and Certification Applicable to All Applicants
I certify that I have read and understand the requirements in this certification and that any representations I made here are true and accurate to the best of my knowledge. If I fail to follow the above requirements, I acknowledge that this application, and any permits issued as a result of it, may be revoked under DCRA's authority and discretion. I acknowledge that I have been advised that failure to get a Raze Permit before I start operations to raze the structure may subject me to criminal and/or civil penalties.
Name of Owner: Pavell Siven Associated W Signature: (Print Name of Owner)
Name of Agent: The Name of Authorized Agent) Signature: The Most of Authorized Agent)
100

District of Columbia: SS

Subscribed and sworn to before me, in my presence,

this TH day of ALCHIT

Éric L. McCamey, Notary Public, D.C. My commission expires January 14, 2018.

REV 11/11