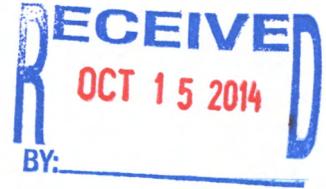




Government of the District of Columbia  
Department of Consumer and Regulatory Affairs

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



Date: October 06, 2014

Cap Id: R1500001

D.C. Historic Preservation Office  
1100 4th Street S.W. , Rm E650  
Washington, DC 20024

Re: Request for clearance of premises subject to razing operations

An application to raze the structure identified below, located in the District of Columbia, was filed on this date with the Permit Operations Division. Our records do not reveal any kind of conservation holds on this property. We are hereby requesting confirmation from your office, in order to release the subject permit.

Address:  
1618 14TH ST NW

LOT: 0134 SQUARE: 0208 TYPE: VACANT: Yes

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

**CLEARANCE**

This is to inform you that we researched our records concerning the structure identified above and we have no objections to proceeding with the proposed razing of said structure.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Name of releasing HPO Official. (print) \_\_\_\_\_



*HISTORIC*

# 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.

*R15 00001*

Application Date: *10.6.14*

## 1. INFORMATION ON PROPERTY

1. Address of Proposed Work <i>1618 14th Street NW Washington, DC 20009</i>	2. Quad <i>NW</i>	3. Ward <i>TWO</i>	4a. Square <i>0208</i>	4b. Suffix	5. Lot <i>0134</i>
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## 2. APPLICANT INFORMATION

6. Property Owner <i>1618 14th Street NW, LLC</i>	7. Complete mailing address (include zip) <i>c/o Newbridge Management LLC 9464 Newbridge Drive Potomac, Md. 20854</i>	8. Phone Number(s) <i>202-674-7080</i>	9. Email <i>shjaffe@nbmgmt.com</i>
10. Agent/Contractor for Owner (if applicable) <i>JEFFREY OWENS OWENS TECHNOLOGIES INC.</i>	11. Complete mailing address (include zip) <i>1121 LUXMANOR ROAD ROCKVILLE MD 20852</i>	12. Phone Number(s) <i>301-213-4845</i>	13. Email <i>jowens@2@comcast.net</i>

## 3. TYPE OF PERMIT

14. Check all that apply:  
 Raze Permit

## 4. DESCRIPTION OF BUILDING

15. Description of Building to be Razed (e.g., two story brick single family dwelling) <i>MASONRY AND WOOD</i>		16. Existing Number of Stories of Bldg: <i>TWO STORIES</i>	
17. Use(s) of Property (specifically indicate if any use is residential.) <i>RETAIL / COMMERCIAL</i>		18. Materials of Building (brick, wood, etc.)	
19. Bldg Length (ft) <i>61</i>	20. Bldg Width (ft) <i>26</i>	21. Bldg Height (ft) <i>28</i>	22. Bldg Volume (cu ft) (L x W x H) <i>44,408</i>

## OFFICIAL USE ONLY

CONDITIONS/ COMMENTS:

### SECTION A. RAZE PERMIT

23. Raze Contractor's Name		24. Contractor's Address (including zip code)		25. Contractor's Phone	
26. Historic District?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		33. Raze Contractor Signature	
27. CFA?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
28. Raze Entire Building?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		34. Property Owner Signature	
29. Building Condemned?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
30a. Party Wall?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		30b. If yes, adjacent property owner signature is required.	
				30c. Any raze permit application for a building(s) involving party walls must be include 2 copies of a plan that show how the party wall(s) will be protected.	
31. Building Vacant?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Building must be vacant before Raze Permit issuance.	
32. Public Space Vault?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<b>Official Use Only</b>	
		Fee		By	
				Date	
33. Plumber's Name		34. Plumber's License Number		35. Raze Method (ball, bulldozer, by hand, etc.)	
<p>1. You must submit a Certificate of Insurance covering the raze operation/contractor— unless the building you plan to raze is an accessory building 500 square feet or less in area and not more than one story, wholly detached from any other building on the same or adjoining premises.</p> <p>2. The Certificate should:</p> <ul style="list-style-type: none"> <li>• Show the holder of the insurance as: Deputy Director, Permit Division, 1100 4th St SW, Washington, DC 20024</li> <li>• Include a 30-day advance notice cancellation clause.</li> <li>• Include these amounts of insurance coverage: Bodily Injury, \$100,000; Aggregate, \$300,000; and Property Damage, \$100,000.</li> <li>• State that the insurance covers "Razing Operations in the District of Columbia," if the scope of the insurance is for blanket coverage.</li> <li>• If the insurance is for one specific address only, state that, "Razing Operations at _____"</li> </ul> <p style="text-align: right;">(address of raze operation)</p>					
36. Insurance Company		37. Policy or Certificate No.		38. Expiration Date	
39. Asbestos in Building?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>Official Use Only</b>	
If yes, indicate location:				Fee	
				By	
				Date	

GOVERNMENT OF THE DISTRICT OF COLUMBIA  
**CERTIFICATION FOR  
RAZE PERMIT APPLICATION**

This certifies that 1618 14<sup>th</sup> Street NW, LLC (referred to as Owner) owns the property at  
(Legal Name of Property Owner)  
1618 14<sup>th</sup> Street, NW 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.  
(is/is not)

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: 1618 14<sup>th</sup> Street NW, LLC  
(Print Name of Owner)

Signature: Stephen Jaffe, agent

Name of Agent: STEPHEN JAFFE  
(Print Name of Authorized Agent)

Signature: Stephen Jaffe



0208 0134 07/12/2004