Department of Buildings

Environmental Intake Form

Owner & Contact Information																
					Owner &	Contact Inform	ation									
Complete address	of pro	posed work	_								_					
Square		Suffix (if any)	L	Lot Application date (4 numbers for year)												
Number	Evt	Official atract pan	20								l lour	odront	Unit/	Suito		
Number	Ext	Official street nan	ie								Qua	adrant	Unity	Suite		
				<u> </u>												
Project name				Application	Project D	Project Description										
				7 Complete melling address (include zin)				O. Dhana				lo Email Hamman for a series				
6. Owner				7. Complete mailing address (include zip)			8. Phone				9. Email, if you prefer e-notice					
				11. Complete mailing address (include zip)			12. Phone				40 Finall House and the					
10. Agent for owner, if applicable				111. Complete mailing address (include 2ip)			12. Phone				13. Email, if you prefer e-notice					
					Droi	inat Saana										
		Scope (Che	eck all	that this pro	oject involves.)	ect Scope		No	Yes		If Y	ou Ans	wer"	Yes"		
1. Is this project	t a re	esidential structure				districts?						00.70				
Is this project	t a si	ngle-family struct	ure <i>n</i> e	ot built in d	conjunction with	2 or more units?	1			_						
	Is this project an accessory structure, such as a garage, patio, pool, or fence?															
4. Is this project only an interior renovation with no building use or capacity change?																
 Is this project in the Central Employment Area, defined in DC Zoning Regulations? Does the project involve <i>only</i> operation, repair, maintenance, or minor alteration of public 																
		nvoive <i>only</i> opera es, mechanical ed														
		use beyond its cu			ograpinoar roate	aroo, waar negag	DIC 01									
7. Does the owr	ner of	f this site own adia	cent	or abutting	ı property?											
7. Does the owner of this site own adjacent or abutting property?8. Do you plan to develop adjacent/abutting property in next 3 years?										Attach a site plan. If there is no plan,						
9. Do you plan more development that requires permit(s) on any site in this square in next 3 9. The square in the development of the square in the square											attach a written explanation.					
years?																
10. Is this project a solid waste facility?											IS Cool	rdinato	r.			
11. Have you prepared an Environmental Impact Statement (EIS) or a functional equivalent, as required by the National Environmental Policy Act of 1969 (NEPA)?											Attach the EIS or equivalent.					
				an those listed in this form, from the requirement to						Attach an explanation; cite relevant section of regulations.					nt	
				rm, under Title 20 § 7202. Dimillion, including site preparation and						If you're not claiming an exemption,					n	
construction		t doot more than (, 1.00	1111111011, 1111	sidding one prop	site preparation and					attach an EISF.					
		a total cost of \$1.				t apply:										
Contains threatened or endangered plant or animal species.												_ ■				
 Is within 100 feet of a pond, stream, lake, spring, or wetland. Project will produce emission of odorous or other air pollutants (from any source, 																
including VOCs)											If you check any item, attach EISF or					
 Project produce, use, or dispose of hazardous substances, as defined in 20 DCMR 7299 Will be built on land where the water table depth is less than 3 feet. 											equivalent.					
																Will require blasting. Will generate medical, infectious, radioactive, or hazardous waste.
							ovilodao	and	halia	floaro	o to oo	mplyy	امطئن	ممالعم	hla	
		ents on this applic ons. The making o													ibie	
Signature of Owner/Authorized Agent												Date				
			ı ıatul t	JI OWITEI/		AL USE ONLY				Date						
Environmental Imp	oact S	Screening Form Re	quired	d												
•		EIS Coordinator	N		DOB Reviewer							Date				
NOTE: Building per adjacent, or abuttin	rmit a _l	pproval is not the sa perty, or expand on t covered by this ap	ame as	s approval o covered by	of an action or ent this Environmen	tal Intake Form w	ithin 3 ye	ars.	you n	nav be re	equired	If you be to file a	an ElS	SF for the	e whole	
		or abuse by any DC		•										•		



