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<b>19-007-058</b>		<b>5119 9th RD N ARLINGTON VA 22201</b>
<b>Owner</b>	<b>Legal Description</b>	
9TH ROAD RESIDENCES LLC	PARCEL B BK 1 LATTERNERS ADDN CLARENDON 21875 SQ FT	
<b>Mailing Address</b>	<b>Trade Name</b>	
4401 WILSON BLVD #600 ARLINGTON VA 22203		
<b>Year Built</b>	<b>Units</b>	<b>EU#</b>
2014	18	N/A
<b>Property Class Code</b>	<b>Zoning</b>	<b>Lot Size</b>
312-Apartment - Mid-rise	R48-18	21875
<b>Neighborhood#</b>	<b>Map Book/Page</b>	<b>Polygon</b>
870000	053-07	19007038
<b>Site Plan</b>	<b>Rezoning</b>	<b>Tax Exempt</b>
N/A	N/A	No

QUESTIONS? Contact the Department of Real Estate Assessments at 703-228-3920 or [realog2@arlingtonva.us](mailto:realog2@arlingtonva.us)

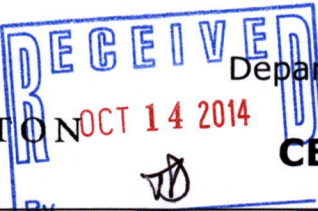


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<b>19-007-058</b>		<b>5119 9th RD N ARLINGTON VA 22201</b>
<b>Owner</b>	<b>Legal Description</b>	
9TH ROAD RESIDENCES LLC	PARCEL B BK 1 LATTERNERS ADDN CLARENDON 21875 SQ FT	
<b>Mailing Address</b>	<b>Trade Name</b>	
4401 WILSON BLVD #600 ARLINGTON VA 22203		
<b>Year Built</b>	<b>Units</b>	<b>EU#</b>
2014	18	N/A
<b>Property Class Code</b>	<b>Zoning</b>	<b>Lot Size</b>
312-Apartment - Mid-rise	RA8-18	21875
<b>Neighborhood#</b>	<b>Map Book/Page</b>	<b>Polygon</b>
870000	053-07	19007038
<b>Site Plan</b>	<b>Rezoning</b>	<b>Tax Exempt</b>
N/A	N/A	No

QUESTIONS? Contact the Department of Real Estate Assessments at 703-228-3920 or [realog2@arlingtonva.us](mailto:realog2@arlingtonva.us)



Arlington County, Virginia  
 Department of Community Planning, Housing and Development  
**Zoning Division**

**BETSY STAGG**  
 Permit #: CO1400820  
 CPHD Case #: 10/14/2014



**CERTIFICATE OF OCCUPANCY APPLICATION**

(Please read the back of this application before completing this form)

**Important: Applicant must complete all the non-shaded areas, and mark where applicable.**

<b>Trade/ Legal Name</b>	Name / Trade 9th Road Residences LLC
<b>Address to be inspected</b>	Number and Street 3119 9th Road North Arlington, VA 22201 <sup>Zip</sup>

Deliver or mail applications to:  
 Zoning Division, 2100 Clarendon Blvd., Suite 1000  
 Phone: 703-228-3883; Web: building.arlingtonva.us

**I. TYPE OF BUILDING**

- |  |  |
|--|--|
| <input type="checkbox"/> One-Family Dwelling | <input type="checkbox"/> Two-Family Dwelling             |
| <input type="checkbox"/> Town Houses         | <input checked="" type="checkbox"/> Apartments (Rentals) |
| <input type="checkbox"/> Condominiums        | <input type="checkbox"/> Cooperatives                    |
| <input type="checkbox"/> Hotel               | <input type="checkbox"/> Office Building                 |
| <input type="checkbox"/> Commercial/Retail   | <input type="checkbox"/> Industrial Building             |
| <input type="checkbox"/> Temporary Structure | <input type="checkbox"/> Other                           |

**V. CERTIFICATE REQUESTED FOR:**

- Master Certificate of Occupancy (MCO) for a new or renovated building or conversion to a condominium, or cooperative.
- Shell & Core (S & C).
- \*Partial Occupancy of a building.
- Change of ownership of a building.
- Change of ownership of a business.
- Change in the use of a building space.
- \*Condominium/cooperative unit to be sold.
- Condominium/cooperative unit to be rented
- Other

Does the building have an elevator?  
 Yes  No

**\*For buildings, condominiums or cooperatives with elevators, an MCO must be filed and S&C issued prior to the issuance of these certificates.**

**VI.** Does your business involve the storage, manufacture or processing of Hazardous materials (radioactive materials requiring approval of the Nuclear Regulatory Commission, gasoline, paint, etc)?  
 Yes  No

**Storage of hazardous waste materials is regulated by the Uniform Statewide Building Code and Arlington Fire Prevention Code.**

**VII.** Ready for inspection?  
 Yes  No

**The premises described under this application are in compliance with law, ordinances and regulations, as determined by the inspections indicated.**

**II. USE OF BUILDING OR SPACE**

Previous Use \_\_\_\_\_  
 Proposed Use Multifamily Apartment Rentals  
 Nature of Business \_\_\_\_\_  
 Maximum Capacity (occupancy) assembly type uses \_\_\_\_\_  
 (ex: restaurants, churches, child care, etc)

**III. CONSTRUCTION WORK INVOLVED (if any):**

- New Building  Alteration of an existing building
- Neither of the above Building Permit # B1300967

**IV. AREA TO BE INSPECTED**

**Entire Building** Yes   
 Gross Floor Area \_\_\_\_\_ sq. ft. Garage Floor \_\_\_\_\_ sq. ft.  
 Gross Parking Area \_\_\_\_\_ sq. ft.  
 Total # of Parking Spaces \_\_\_\_\_  
 Total # of Floors in Garage 1 \_\_\_\_\_ Total # of Units \_\_\_\_\_  
 Number of Floors \_\_\_\_\_ Unit Numbers \_\_\_\_\_  
 Amenities Yes  No  / Pool Yes  No

**Partial Occupancy** Yes  FLOOR 2  
 Garage Floor \_\_\_\_\_ sq. ft.  
 # of Parking Spaces \_\_\_\_\_ # of Floors in Garage \_\_\_\_\_  
 Total # of Units <sup>6</sup> \_\_\_\_\_ Square Footage <sup>9444</sup> \_\_\_\_\_  
 Number of Floors and \_\_\_\_\_ Unit Numbers 201-206

**Do not write here**

**VIII. ADDITIONAL INFORMATION:**

- Use Permit  Variance  Site Plan Approval

**IX. ZONING:** Initials: TS  
 Zone RAB-1B Zoning Fees 599.95  
 Receipt No. R14016826 Date 10/14/14

**X. APPROVED BY**

	Initials	Date
Building	<u>MIA</u>	<u>2-20-15</u>
Electrical	<u>SPI</u>	<u>2-15-15</u>
Mechanical	<u>PK</u>	<u>2-9-15</u>
Plumbing	<u>CMH</u>	<u>1-24-15</u>
E. H. B	<u>MIA</u>	<u>2-20-15</u>
Elevator		
Fire Prevention	<u>MIA</u>	<u>2-20-15</u>
Child Care		
Final Survey		
Bus. Inspection		
DES		
Bus. License		
Zoning Inspection	<u>DZW</u>	<u>2-19-15</u>

**XI. Building Official** [Signature] Date 2-23-15

Revised 8/13

**I, the Applicant, hereby certify that the information supplied on this application is true and correct to the best of my knowledge; and that any construction, alteration or repair has been performed in accordance with the applicable regulations and under a valid permit issued by Arlington County. I acknowledge receipt of the application instructions.**

Signature <u>[Signature]</u>	Applicant name (Print) Michael Jiang	Address 4401 Wilson BLVD Suite 600 22203	Phone 7032944634
On Site Contact Person (if not the applicant)			



ARLINGTON VIRGINIA

Department of Community Planning, Housing and Development.
Planning Division, Zoning Administration Inspection Services Division

CERTIFICATE OF OCCUPANCY

Permission is hereby granted to: 9TH ROAD LLC

To use the: 2 floor, and /or suite number:

Of the building located at: 3119 9TH RD N, For the following purpose: MULTIFAMILY APARTMENTS - 2ND FL (201-206).

Table with 8 columns: Permit Number (CO1400820), Date Issued (02/23/2015), Seating Capacity (Zoning), Occupant Load, Number of Children, Zoning (RA8-18), Use Group (R-2), Const. Type (5A), Code Mod. (NONE), Use Permit, Sprinkler (Y), Sprinkl Req. (Y), Site plan Number (0), V.U.S.B.C. (2009), Fire Alarm (Y), Comments.

This certificate does not take the place of any license required by law. Any change in the use, ownership, or occupancy of this building or land shall require a new certificate of occupancy.

This Building or the proposed use of the building or land complies with all provisions of the Virginia Uniform State Building Code and the Arlington County Zoning Ordinance.

Authorized by

Signature of Shahriar Amiri

Signature of Norma J. Cozart

Shahriar Amiri
Building Official

Norma J. Cozart
Zoning Administrator

THIS CERTIFICATE SHALL BE CONSPICUOUSLY POSTED AT ALL TIMES.

2100 Clarendon Blvd., Suite 1000, Arlington, Va. 22201. Tel: 703-228-3883, Fax: 703-228-3896. www. Arlingtonva.us



Arlington County, Virginia  
 Department of Community Planning, Housing and Development  
**Zoning Division**

**BETSY STAGG**

Permit #: **CO1400821**

CPHD Case #:

10/14/2014

ARLINGTON VIRGINIA



**CERTIFICATE OF OCCUPANCY APPLICATION**

(Please read the back of this application before completing this form)



**Important: Applicant must complete all the non-shaded areas, and mark where applicable.**

<b>Trade/ Legal Name</b>	Name / Trade <b>9th Road Residences LLC</b>	Deliver or mail applications to: Zoning Division, 2100 Clarendon Blvd., Suite 1000 Phone: 703-228-3883; Web: building.arlingtonva.us
<b>Address to be inspected</b>	Number and Street <b>3119 9th Road North Arlington, VA 22201</b> Zip	

**I. TYPE OF BUILDING**

- |  |  |
|--|--|
| <input type="checkbox"/> One-Family Dwelling | <input type="checkbox"/> Two-Family Dwelling             |
| <input type="checkbox"/> Town Houses         | <input checked="" type="checkbox"/> Apartments (Rentals) |
| <input type="checkbox"/> Condominiums        | <input type="checkbox"/> Cooperatives                    |
| <input type="checkbox"/> Hotel               | <input type="checkbox"/> Office Building                 |
| <input type="checkbox"/> Commercial/Retail   | <input type="checkbox"/> Industrial Building             |
| <input type="checkbox"/> Temporary Structure | <input type="checkbox"/> Other                           |

**II. USE OF BUILDING OR SPACE**

Previous Use \_\_\_\_\_  
 Proposed Use Multifamily Apartment Rentals  
 Nature of Business \_\_\_\_\_  
 Maximum Capacity (occupancy) assembly type uses \_\_\_\_\_  
 (ex: restaurants, churches, child care, etc)

**III. CONSTRUCTION WORK INVOLVED (if any):**

- New Building  Alteration of an existing building  
 Neither of the above Building Permit # B1300967

**IV. AREA TO BE INSPECTED**

**Entire Building** Yes   
 Gross Floor Area \_\_\_\_\_ sq. ft. Garage Floor \_\_\_\_\_ sq. ft.  
 Gross Parking Area \_\_\_\_\_ sq. ft.  
 Total # of Parking Spaces \_\_\_\_\_  
 Total # of Floors in Garage \_\_\_\_\_ Total # of Units \_\_\_\_\_  
 Number of Floors \_\_\_\_\_ Unit Numbers \_\_\_\_\_  
 Amenities Yes  No  / Pool Yes  No

**Partial Occupancy** Yes   
 Garage Floor \_\_\_\_\_ sq. ft. **FLOOR 3**  
 # of Parking Spaces \_\_\_\_\_ # of Floors in Garage \_\_\_\_\_  
 Total # of Units 6 Square Footage <sup>9444</sup> \_\_\_\_\_  
 Number of Floors 3rd Unit Numbers 301-306

**V. CERTIFICATE REQUESTED FOR:**

- Master Certificate of Occupancy (MCO) for a new or renovated building or conversion to a condominium, or cooperative.  
 Shell & Core (S & C).  
 \*Partial Occupancy of a building.  
 Change of ownership of a building.  
 Change of ownership of a business.  
 Change in the use of a building space.  
 \*Condominium/cooperative unit to be sold.  
 Condominium/cooperative unit to be rented  
 Other

Does the building have an elevator?  
 Yes  No

**\*For buildings, condominiums or cooperatives with elevators, an MCO must be filed and S&C issued prior to the issuance of these certificates.**

**VI.** Does your business involve the storage, manufacture or processing of Hazardous materials (radioactive materials requiring approval of the Nuclear Regulatory Commission, gasoline, paint, etc)?  
 Yes  No

**Storage of hazardous waste materials is regulated by the Uniform Statewide Building Code and Arlington Fire Prevention Code.**

**VII.** Ready for inspection?  
 Yes  No

**The premises described under this application are in compliance with law, ordinances and regulations, as determined by the inspections indicated.**

**Do not write here**

**VIII. ADDITIONAL INFORMATION:**

- Use Permit  Variance  Site Plan Approval

**IX. ZONING:**

Initials: JS  
 Zone RAB-18 Zoning Fees 575.55  
 Receipt No. R14016824 Date 10/14/14

**X. APPROVED BY**

	Initials	Date
Building	<u>MIA</u>	<u>2-20-15</u>
Electrical	<u>JPL</u>	<u>2-5-15</u>
Mechanical	<u>PK</u>	<u>2-9-15</u>
Plumbing	<u>CMH</u>	<u>1-26-18</u>
E. H. B	<u>[Signature]</u>	<u>[Date]</u>
Elevator		
Fire Prevention	<u>MIA</u>	<u>2-20-15</u>
Child Care		
Final Survey		
Bus. Inspection		
DES		
Bus. License		
Zoning Inspection	<u>DZW</u>	<u>2-19-15</u>

**XI. Building Official**

Date 10-23-14

Revised 8/13

**I, the Applicant, hereby certify that the information supplied on this application is true and correct to the best of my knowledge; and that any construction, alteration or repair has been performed in accordance with the applicable regulations and under a valid permit issued by Arlington County. I acknowledge receipt of the application instructions.**

Signature <u>[Signature]</u>	Applicant name (Print) <b>Michael Jiang</b>	Address <b>4401 Wilson BLVD Suite 600 22203</b>	Phone <b>7032944634</b>
	On Site Contact Person (if not the applicant)		



ARLINGTON VIRGINIA

Department of Community Planning, Housing and Development.
Planning Division, Zoning Administration Inspection Services Division

CERTIFICATE OF OCCUPANCY

Permission is hereby granted to: 9TH ROAD LLC
To use the: 3 floor, and /or suite number:

Of the building located at: 3119 9TH RD N, For the following purpose: MULTIFAMILY APARTMENTS - UNITS 301-306.

Table with 8 columns: Permit Number (CO1400821), Date Issued (02/23/2015), Seating Capacity (Zoning), Occupant Load, Number of Children, Zoning (RA8-18), Use Group (R-2), Const. Type (5A), Code Mod. (NONE), Use Permit, Sprinkler (Y), Sprinkl Req. (Y), Site plan Number (0), V.U.S.B.C. (2009), Fire Alarm (Y), Comments.

This certificate does not take the place of any license required by law. Any change in the use, ownership, or occupancy of this building or land shall require a new certificate of occupancy. This Building or the proposed use of the building or land complies with all provisions of the Virginia Uniform State Building Code and the Arlington County Zoning Ordinance.

Authorized by

Signature of Shahriar Amiri

Signature of Norma J. Cozart

Shahriar Amiri
Building Official

Norma J. Cozart
Zoning Administrator

THIS CERTIFICATE SHALL BE CONSPICUOUSLY POSTED AT ALL TIMES.

2100 Clarendon Blvd., Suite 1000, Arlington, Va. 22201. Tel: 703-228-3883, Fax: 703-228-3896. www.Arlingtonva.us



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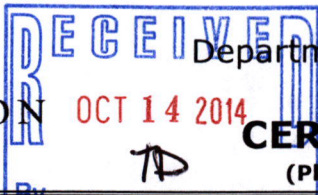
Arlington County, Virginia  
 Department of Community Planning, Housing and Development  
**Zoning Division**

**BETSY STAGG**

Permit #: **CO1400818**

CPHD Case #:

10/14/2014



**CERTIFICATE OF OCCUPANCY APPLICATION**

(Please read the back of this application before completing this form)



**Important: Applicant must complete all the non-shaded areas, and mark where applicable.**

<b>Trade/ Legal Name</b>	Name / Trade 9th Road Residences LLC
<b>Address to be inspected</b>	Number and Street 3119 9th Road North Arlington, VA 22201 <sup>Zip</sup>

Deliver or mail applications to:  
 Zoning Division, 2100 Clarendon Blvd., Suite 1000  
 Phone: 703-228-3883; Web: building.arlingtonva.us

**I. TYPE OF BUILDING**

- |  |  |
|--|--|
| <input type="checkbox"/> One-Family Dwelling | <input type="checkbox"/> Two-Family Dwelling             |
| <input type="checkbox"/> Town Houses         | <input checked="" type="checkbox"/> Apartments (Rentals) |
| <input type="checkbox"/> Condominiums        | <input type="checkbox"/> Cooperatives                    |
| <input type="checkbox"/> Hotel               | <input type="checkbox"/> Office Building                 |
| <input type="checkbox"/> Commercial/Retail   | <input type="checkbox"/> Industrial Building             |
| <input type="checkbox"/> Temporary Structure | <input type="checkbox"/> Other                           |

**V. CERTIFICATE REQUESTED FOR:**

- Master Certificate of Occupancy (MCO) for a new or renovated building or conversion to a condominium, or cooperative.
- Shell & Core (S & C).
- \*Partial Occupancy of a building.
- Change of ownership of a building.
- Change of ownership of a business.
- Change in the use of a building space.
- \*Condominium/cooperative unit to be sold.
- Condominium/cooperative unit to be rented
- Other

**II. USE OF BUILDING OR SPACE**

Previous Use \_\_\_\_\_  
 Proposed Use Multifamily Apartment Rentals  
 Nature of Business \_\_\_\_\_  
 Maximum Capacity (occupancy) assembly type uses \_\_\_\_\_  
 (ex: restaurants, churches, child care, etc)

**III. CONSTRUCTION WORK INVOLVED (if any):**

- New Building  Alteration of an existing building
- Neither of the above Building Permit # B1300967

**IV. AREA TO BE INSPECTED**

**Entire Building** Yes   
 Gross Floor Area \_\_\_\_\_ sq. ft. Garage Floor \_\_\_\_\_ sq. ft.  
 Gross Parking Area \_\_\_\_\_ sq. ft.  
 Total # of Parking Spaces \_\_\_\_\_  
 Total # of Floors in Garage \_\_\_\_\_ Total # of Units \_\_\_\_\_  
 Number of Floors \_\_\_\_\_ Unit Numbers \_\_\_\_\_  
 Amenities Yes  No  / Pool Yes  No

**Partial Occupancy** Yes  FLOOR 1  
 Garage Floor <sup>5977</sup> \_\_\_\_\_ sq. ft.  
 # of Parking Spaces <sup>33</sup> \_\_\_\_\_ # of Floors in Garage 1  
 Total # of Units <sup>0</sup> \_\_\_\_\_ Square Footage <sup>11561</sup> \_\_\_\_\_  
 Number of Floors <sup>1st + Garage</sup> \_\_\_\_\_ Unit Numbers \_\_\_\_\_

Does the building have an elevator?  
 Yes  No

**\*For buildings, condominiums or cooperatives with elevators, an MCO must be filed and S&C issued prior to the issuance of these certificates.**

**VI. Does your business involve the storage, manufacture or processing of Hazardous materials (radioactive materials requiring approval of the Nuclear Regulatory Commission, gasoline, paint, etc)?**  
 Yes  No

**Storage of hazardous waste materials is regulated by the Uniform Statewide Building Code and Arlington Fire Prevention Code.**

**VII. Ready for inspection?**  
 Yes  No

**The premises described under this application are in compliance with law, ordinances and regulations, as determined by the inspections indicated.**

**Do not write here**

**VIII. ADDITIONAL INFORMATION:**

- Use Permit  Variance  Site Plan Approval

**IX. ZONING:**

Initials: TD  
 Zone RAB-1B Zoning Fees 1153.95  
 Receipt No. R14016814 Date 10/14/14

**X. APPROVED BY**

	Initials	Date
Building	<u>MIA</u>	<u>2-20-15</u>
Electrical	<u>JPI</u>	<u>2-5-15</u>
Mechanical	<u>PK</u>	<u>2-9-15</u>
Plumbing	<u>CMM</u>	<u>1-26-15</u>
E. H. B		
Elevator		
Fire Prevention	<u>MIA</u>	<u>2-20-15</u>
Child Care		
Final Survey		
Bus. Inspection		
DES		
Bus. License		
Zoning Inspection	<u>D2W</u>	<u>2-19-15</u>

**XI. Building Official** [Signature] Date 2-23-15

Revised 8/13

**I, the Applicant, hereby certify that the information supplied on this application is true and correct to the best of my knowledge; and that any construction, alteration or repair has been performed in accordance with the applicable regulations and under a valid permit issued by Arlington County. I acknowledge receipt of the application instructions.**

Signature <u>[Signature]</u>	Applicant name (Print) <u>Michael Jiang</u>	Address <u>4401 Wilson BLVD Suite 600 22203</u>	Phone <u>7032944634</u>
	On Site Contact Person (if not the applicant)		





ARLINGTON  
VIRGINIA

Department of Community Planning, Housing and Development.  
Planning Division, Zoning Administration Inspection Services Division

# CERTIFICATE OF OCCUPANCY

Permission is hereby granted to: **9TH ROAD LLC**  
To use the: **G-1 floor, and /or suite number:**  
Of the building located at: **3119 9TH RD N,** For the following purpose: **G-1 & 1ST FLOOR.**

Permit Number	<b>CO1400818</b>		Date Issued	<b>02/23/2015</b>			
Seating Capacity (Zoning)			Occupant Load				
Number of Children			Zoning	<b>RA8-18</b>			
Use Group	<b>R-2</b>	Const.Type	<b>5A</b>	ZBZA Case Number			
Code Mod.	<b>NONE</b>	Use Permit		Sprinkler	<b>Y</b>	Sprinkl Req.	<b>Y</b>
Site plan Number	<b>0</b>		V.U.S.B.C.	<b>2009</b>	Fire Alarm	<b>Y</b>	
Comments							

This certificate does not take the place of any license required by law. Any change in the use, ownership, or occupancy of this building or land shall require a new certificate of occupancy.

This Building or the proposed use of the building or land complies with all provisions of the Virginia Uniform State Building Code and the Arlington County Zoning Ordinance.

**Authorized by**

**Shahriar Amiri**  
Building Official

**Norma J. Cozart**  
Zoning Administrator

**THIS CERTIFICATE SHALL BE CONSPICUOUSLY POSTED AT ALL TIMES.**

2100 Clarendon Blvd., Suite 1000, Arlington, Va. 22201. Tel: 703-228-3883, Fax: 703-228-3896. www.Arlingtonva.us





Arlington County, Virginia  
Department of Community Planning, Housing and Development  
**Zoning Division**

**BETSY STAGG**  
Permit #: **CO1400822**  
CPHD Case #: \_\_\_\_\_ 10/14/2014

**CERTIFICATE OF OCCUPANCY APPLICATION**

(Please read the back of this application before completing this form)

**Important: Applicant must complete all the non-shaded areas, and mark where applicable.**

<b>Trade/ Legal Name</b>	Name / Trade 9th Road Residences LLC
<b>Address to be inspected</b>	Number and Street 3119 9th Road North Arlington, VA 22201 <sup>Zip</sup>

Deliver or mail applications to:  
Zoning Division, 2100 Clarendon Blvd., Suite 1000  
Phone: 703-228-3883; Web: building.arlingtonva.us

**I. TYPE OF BUILDING**

- |  |  |
|--|--|
| <input type="checkbox"/> One-Family Dwelling | <input type="checkbox"/> Two-Family Dwelling             |
| <input type="checkbox"/> Town Houses         | <input checked="" type="checkbox"/> Apartments (Rentals) |
| <input type="checkbox"/> Condominiums        | <input type="checkbox"/> Cooperatives                    |
| <input type="checkbox"/> Hotel               | <input type="checkbox"/> Office Building                 |
| <input type="checkbox"/> Commercial/Retail   | <input type="checkbox"/> Industrial Building             |
| <input type="checkbox"/> Temporary Structure | <input type="checkbox"/> Other                           |

**II. USE OF BUILDING OR SPACE**

Previous Use \_\_\_\_\_  
 Proposed Use Multifamily Apartment Rentals  
 Nature of Business \_\_\_\_\_  
 Maximum Capacity (occupancy) assembly type uses \_\_\_\_\_  
 (ex: restaurants, churches, child care, etc)

**III. CONSTRUCTION WORK INVOLVED (if any):**

- New Building  Alteration of an existing building  
 Neither of the above Building Permit # B1300967

**IV. AREA TO BE INSPECTED**

► **Entire Building** Yes   
 Gross Floor Area \_\_\_\_\_ sq. ft. Garage Floor \_\_\_\_\_ sq. ft.  
 Gross Parking Area \_\_\_\_\_ sq. ft.  
 Total # of Parking Spaces \_\_\_\_\_  
 Total # of Floors in Garage \_\_\_\_\_ Total # of Units \_\_\_\_\_  
 Number of Floors \_\_\_\_\_ Unit Numbers \_\_\_\_\_  
 Amenities Yes  No  / Pool Yes  No

► **Partial Occupancy** Yes

Garage Floor \_\_\_\_\_ sq. ft.  
 # of Parking Spaces \_\_\_\_\_ # of Floors in Garage FLOOR 4  
 Total # of Units<sup>6</sup> \_\_\_\_\_ Square Footage<sup>9373</sup> \_\_\_\_\_  
 Number of Floors 4th Unit Numbers 401-406

**V. CERTIFICATE REQUESTED FOR:**

- Master Certificate of Occupancy (MCO) for a new or renovated building or conversion to a condominium, or cooperative.  
 Shell & Core (S & C).  
 \*Partial Occupancy of a building.  
 Change of ownership of a building.  
 Change of ownership of a business.  
 Change in the use of a building space.  
 \*Condominium/cooperative unit to be sold.  
 Condominium/cooperative unit to be rented  
 Other

Does the building have an elevator?

- Yes  No

**\*For buildings, condominiums or cooperatives with elevators, an MCO must be filed and S&C issued prior to the issuance of these certificates.**

**VI. Does your business involve the storage, manufacture or processing of Hazardous materials (radioactive materials requiring approval of the Nuclear Regulatory Commission, gasoline, paint, etc)?**  
Yes  No

**Storage of hazardous waste materials is regulated by the Uniform Statewide Building Code and Arlington Fire Prevention Code.**

**VII. Ready for inspection?**

- Yes  No

**The premises described under this application are in compliance with law, ordinances and regulations, as determined by the inspections indicated.**

**Do not write here**

**VIII. ADDITIONAL INFORMATION:**

- Use Permit  Variance  Site Plan Approval

**IX. ZONING:**

Zone RAB-18 Initials: JA  
 Zoning Fees 599.55  
 Receipt No. R14016826 Date 10/14/14

**X. APPROVED BY**

	Initials	Date
Building	<u>MJA</u>	<u>2-20-15</u>
Electrical	<u>JPI</u>	<u>2-15-15</u>
Mechanical	<u>PK</u>	<u>2-9-15</u>
Plumbing	<u>CAM</u>	<u>1-26-15</u>
E. H. B	<u>MJA</u>	<u>2-20-15</u>
Elevator		
Fire Prevention	<u>MJA</u>	<u>2-20-15</u>
Child Care		
Final Survey		
Bus. Inspection		
DES		
Bus. License		
Zoning Inspection	<u>D&amp;W</u>	<u>2-19-15</u>

**XI. Building Official**

Date 2-23-15  
Shabir

Revised 8/13

**I, the Applicant, hereby certify that the information supplied on this application is true and correct to the best of my knowledge; and that any construction, alteration or repair has been performed in accordance with the applicable regulations and under a valid permit issued by Arlington County. I acknowledge receipt of the application instructions.**

Signature 	Applicant name (Print) <b>Michael Jiang</b>	Address 4401 Wilson BLVD Suite 600 22203	Phone 7032944634
On Site Contact Person (if not the applicant)			



ARLINGTON VIRGINIA

Department of Community Planning, Housing and Development. Planning Division, Zoning Administration Inspection Services Division

CERTIFICATE OF OCCUPANCY

Permission is hereby granted to: 9TH ROAD LLC To use the:4 floor, and /or suite number:

Of the building located at: 3119 9TH RD N, For the following purpose: MULTIFAMILY APARTMENTS - 4TH FL (401-406).

Table with permit details: Permit Number CO1400822, Date Issued 02/23/2015, Zoning RAS-18, Use Group R-2, Const. Type 5A, etc.

This certificate does not take the place of any license required by law. Any change in the use, ownership, or occupancy of this building or land shall require a new certificate of occupancy. This Building or the proposed use of the building or land complies with all provisions of the Virginia Uniform State Building Code and the Arlington County Zoning Ordinance.

Authorized by

Signature of Shahriar Amiri

Signature of Norma J. Cozart

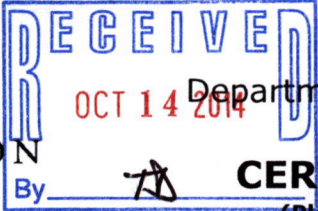
Shahriar Amiri Building Official

Norma J. Cozart Zoning Administrator

THIS CERTIFICATE SHALL BE CONSPICUOUSLY POSTED AT ALL TIMES.

2100 Clarendon Blvd., Suite 1000, Arlington, Va. 22201. Tel: 703-228-3883, Fax: 703-228-3896. www. Arlingtonva.us





Arlington County, Virginia  
 Department of Community Planning, Housing and Development  
**Zoning Division**

**BETSY STAGG**  
 Permit #: **CO1400816**

CPHD Case #: \_\_\_\_\_ 10/14/2014



**CERTIFICATE OF OCCUPANCY APPLICATION**

(Please read the back of this application before completing this form)

**Important: Applicant must complete all the non-shaded areas, and mark where applicable.**

<b>Trade/ Legal Name</b>	Name / Trade 9th Road Residences LLC
<b>Address to be inspected</b>	Number and Street 3119 9th Road North Arlington, VA 22201 Zip

Deliver or mail applications to:  
 Zoning Division, 2100 Clarendon Blvd., Suite 1000  
 Phone: 703-228-3883; Web: building.arlingtonva.us

**I. TYPE OF BUILDING**

- |  |  |
|--|--|
| <input type="checkbox"/> One-Family Dwelling | <input type="checkbox"/> Two-Family Dwelling             |
| <input type="checkbox"/> Town Houses         | <input checked="" type="checkbox"/> Apartments (Rentals) |
| <input type="checkbox"/> Condominiums        | <input type="checkbox"/> Cooperatives                    |
| <input type="checkbox"/> Hotel               | <input type="checkbox"/> Office Building                 |
| <input type="checkbox"/> Commercial/Retail   | <input type="checkbox"/> Industrial Building             |
| <input type="checkbox"/> Temporary Structure | <input type="checkbox"/> Other                           |

**V. CERTIFICATE REQUESTED FOR:**

- Master Certificate of Occupancy (MCO) for a new or renovated building or conversion to a condominium, or cooperative.
- Shell & Core (S & C).
- \*Partial Occupancy of a building.
- Change of ownership of a building.
- Change of ownership of a business.
- Change in the use of a building space.
- \*Condominium/cooperative unit to be sold.
- Condominium/cooperative unit to be rented
- Other

Does the building have an elevator?  
 Yes  No

**\*For buildings, condominiums or cooperatives with elevators, an MCO must be filed and S&C issued prior to the issuance of these certificates.**

**VI.** Does your business involve the storage, manufacture or processing of Hazardous materials (radioactive materials requiring approval of the Nuclear Regulatory Commission, gasoline, paint, etc)?  
 Yes  No

**Storage of hazardous waste materials is regulated by the Uniform Statewide Building Code and Arlington Fire Prevention Code.**

**VII.** Ready for inspection?  
 Yes  No

**The premises described under this application are in compliance with law, ordinances and regulations, as determined by the inspections indicated.**

**II. USE OF BUILDING OR SPACE**

Previous Use \_\_\_\_\_  
 Proposed Use Multifamily Apartment Rentals  
 Nature of Business \_\_\_\_\_  
 Maximum Capacity (occupancy) assembly type uses \_\_\_\_\_  
 (ex: restaurants, churches, child care, etc)

**III. CONSTRUCTION WORK INVOLVED (if any):**

- New Building  Alteration of an existing building
- Neither of the above Building Permit # B1300967

**IV. AREA TO BE INSPECTED**

**Entire Building** Yes   
 Gross Floor Area 39822 sq. ft. Garage Floor 9103 sq. ft.  
 Gross Parking Area 5977 sq. ft.  
 Total # of Parking Spaces 33  
 Total # of Floors in Garage 1 Total # of Units 18  
 Number of Floors 4 Unit Numbers ~~201-406~~ 201-206, 301-306  
 Amenities Yes  No  / Pool Yes  No  401,406

**Partial Occupancy** Yes   
 Garage Floor \_\_\_\_\_ sq. ft.  
 # of Parking Spaces \_\_\_\_\_ # of Floors in Garage \_\_\_\_\_  
 Total # of Units \_\_\_\_\_ Square Footage \_\_\_\_\_  
 Number of Floors \_\_\_\_\_ Unit Numbers \_\_\_\_\_

**Do not write here**

**VIII. ADDITIONAL INFORMATION:**

- Use Permit  Variance  Site Plan Approval

**IX. ZONING:** Initials: TD  
 Zone RAB-10 Zoning Fees 2295.30  
 Receipt No. R14016809 Date 10/14/14

**X. APPROVED BY**

	Initials	Date
Building	MIA	2-20-15
Electrical	JPI	2-5-15
Mechanical	PK	2-9-15
Plumbing	CMM	1-26-15
E. H. B		
Elevator	NEIS	12-29-15
Fire Prevention	MIA	2-20-15
Child Care		
Final Survey		
Bus. Inspection		
DES	CEP	2-20-15
Bus. License		
Zoning Inspection	ABS	2-20-15

**XI. Building Official** Date 2-23-15

Revised 8/13

**I, the Applicant, hereby certify that the information supplied on this application is true and correct to the best of my knowledge; and that any construction, alteration or repair has been performed in accordance with the applicable regulations and under a valid permit issued by Arlington County. I acknowledge receipt of the application instructions.**

Signature 	Applicant name (Print) Michael Jiang	Address 4401 Wilson BLVD Suite 600 22203	Phone 7032944634
On Site Contact Person (if not the applicant)			



ARLINGTON VIRGINIA

Department of Community Planning, Housing and Development. Planning Division, Zoning Administration Inspection Services Division

CERTIFICATE OF OCCUPANCY

Permission is hereby granted to: 9TH ROAD LLC To use the:G-4 floor, and /or suite number:MULTI Of the building located at: 3119 9TH RD N,For the following purpose: SHELL & CORE - 4 FLS (G-4) , 18 UNITS : UNITS 201-206, 301-306, 401-406.

Table with 8 columns: Permit Number, Seating Capacity (Zoning), Number of Children, Use Group, Code Mod., Site plan Number, Date Issued, Occupant Load, Zoning, Const.Type, ZBZA Case Number, Sprinkler, Fire Alarm, Comments.

This certificate does not take the place of any license required by law. Any change in the use, ownership, or occupancy of this building or land shall require a new certificate of occupancy. This Building or the proposed use of the building or land complies with all provisions of the Virginia Uniform State Building Code and the Arlington County Zoning Ordinance.

Authorized by

Signature of Shahriar Amiri

Signature of Norma J. Cozart

Shahriar Amiri Building Official

Norma J. Cozart Zoning Administrator

THIS CERTIFICATE SHALL BE CONSPICUOUSLY POSTED AT ALL TIMES.

2100 Clarendon Blvd., Suite 1000, Arlington, Va. 22201. Tel: 703-228-3883, Fax: 703-228-3896. www. Arlingtonva.us

Handwritten signature or scribble, possibly containing the word "Carpenter" or similar, written in a cursive style.

12-8-15



DEPARTMENT OF COMMUNITY PLANNING, HOUSING AND DEVELOPMENT

Arlington County, Virginia  
Department of Community Planning, Housing and Development  
Zoning Division

BETSY STAGG  
Permit #: CO1400823  
(PHID) Case #:

10/14/2014

ARLINGTON COUNTY, VIRGINIA  
NOV 14 2014

**CERTIFICATE OF OCCUPANCY APPLICATION**

(Please read the back of this application before completing this form)

**Important: Applicant must complete all the non-shaded areas, and mark where applicable.**

<b>Trade / Legal Name</b>	Name / Trade
<b>Address to be inspected</b>	Number and Street

9th Road Residences LLC  
3119 9th Road North Arlington, VA 22201 Zip

Deliver or mail applications to  
Zoning Division, 2100 Clarendon Blvd., Suite 1000  
Phone 703-228-3883, Web building@arlingtonva.us

**I. TYPE OF BUILDING**

- One-Family Dwelling
- Town Houses
- Condominiums
- Hotel
- Commercial/Retail
- Temporary Structure
- Two-Family Dwelling
- Apartments (Rentals)
- Cooperatives
- Office Building
- Industrial Building
- Other

**II. USE OF BUILDING OR SPACE**

Previous Use \_\_\_\_\_  
Proposed Use Multifamily Apartment Rentals  
Nature of Business \_\_\_\_\_  
Maximum Capacity (occupancy) assembly, type uses \_\_\_\_\_  
(ex. restaurants, churches, child care, etc)

**V. CERTIFICATE REQUESTED FOR:**

- Master Certificate of Occupancy (MCO) for a new or renovated building or conversion to a condominium, or cooperative.
- Shell & Core (S & C).
- \*Partial Occupancy of a building.
- Change of ownership of a building.
- Change in the use of a building space.
- \*Condominium/cooperative unit to be sold.
- Condominium/cooperative unit to be rented
- Other \_\_\_\_\_

Does the building have an elevator?  
Yes  No

**\*For buildings, condominiums or cooperatives with elevators, an MCO must be filed and S&C issued prior to the issuance of these certificates.**

**VI. Does your business involve the storage, manufacture or processing of Hazardous materials (radioactive materials requiring approval of the Nuclear Regulatory Commission, gasoline, paint, etc)?**  
Yes  No

**Storage of hazardous waste materials is regulated by the Uniform Statewide Building Code and Arlington Fire Prevention Code.**

**VII. Ready for inspection?**  
Yes  No

**The premises described under this application are in compliance with law, ordinances and regulations, as determined by the inspections indicated.**

Do not write here

**VIII. ADDITIONAL INFORMATION:**  
 Use Permit  Variance  Site Plan Approval

**IX. ZONING:**

Zone R4B-11B Initials AD  
Receipt No. R14016840 Date 10/14/14

**X. APPROVED BY**

Building	Initials	Date
Electrical	<u>MAA</u>	<u>2-20-15</u>
Mechanical	<u>SP</u>	<u>2-5-15</u>
Plumbing	<u>DM</u>	<u>1-26-15</u>
E. H. B		
Elevator	<u>AK</u>	<u>2-23-15</u>
Fire Prevention	<u>IDL</u>	<u>2-10-15</u>
Child Care		
Final Survey		
Bus. Inspection		
DES	<u>CEP</u>	<u>12-29-15</u>
Bus. License	<u>KA</u>	<u>12-17-15</u>

**XI. Building Official** Date 12-29-15

*Signature of Building Official*

**IV. AREA TO BE INSPECTED**

**▶ Entire Building** Yes  No

Gross Floor Area 39822 sq. ft. Garage Floor 9103 sq. ft.  
Gross Parking Area 5977 sq. ft.

Total # of Parking Spaces 33  
Total # of Floors in Garage 1 Total # of Units 18  
Number of Floors 4 Unit Numbers 204-405 / 201-206, 301-306, 401-406  
Amenities Yes  No  Pool Yes  No

**▶ Partial Occupancy** Yes  No

Garage Floor \_\_\_\_\_ sq. ft. # of Floors in Garage \_\_\_\_\_  
# of Parking Spaces \_\_\_\_\_ Square Footage \_\_\_\_\_  
Total # of Units \_\_\_\_\_ Unit Numbers \_\_\_\_\_  
Number of Floors \_\_\_\_\_

**I, the Applicant, hereby certify that the information supplied on this application is true and correct to the best of my knowledge; and that any construction, alteration or repair has been performed in accordance with the applicable regulations and under a valid permit issued by Arlington County. I acknowledge receipt of the application instructions.**

Signature *[Signature]* Applicant name (Print) Michael Jiang Address 4401 Wilson Blvd Suite 600 22203 Phone 7032944634  
On-Site Contact Person (if not the applicant) \_\_\_\_\_

Revised 8/13

4547



ARLINGTON  
VIRGINIA

Department of Community Planning, Housing and Development  
Planning Division, Zoning Administration Inspection Services Division

# CERTIFICATE OF OCCUPANCY

Permission is hereby granted to: **9TH ROAD LLC**

To use the: **G-4** floor, and /or suite number:

Of the building located at: **3119 9TH RD N, For the following purpose: MULTIFAMILY APARTMENTS - 4 FLS - UNITS 201-206, 301-306, 401-406.**

Permit Number	CO1400823		Date Issued	12/29/2015	
Seating Capacity (Zoning)			Occupant Load		
Number of Children			Zoning	RA8-18	
Use Group	R-2	Const.Type	SA	ZBZA Case Number	
Code Mod.	NONE	Use Permit		Sprinkler	Y
Site plan Number	0	V.U.S.B.C.	2009	Sprinkl Req.	Y
Comments					

This certificate does not take the place of any license required by law. Any change in the use, ownership, or occupancy of this building or land shall require a new certificate of occupancy.  
This Building or the proposed use of the building or land complies with all provisions of the Virginia Uniform State Building Code and the Arlington County Zoning Ordinance.

Authorized by

*Norma J. Cozart*

*Shahriar Amiri*  
Shahriar Amiri  
Building Official

Norma J. Cozart  
Zoning Administrator

**THIS CERTIFICATE SHALL BE CONSPICUOUSLY POSTED AT ALL TIMES.**

2100 Clarendon Blvd., Suite 1000, Arlington, Va. 22201. Tel: 703-228-3883, Fax: 703-228-3896. www.Arlingtonva.us





Figure 2. *Staphylococcus aureus*

Figure 3. *Staphylococcus aureus*

12-8-15



Arlington County, Virginia  
Department of Community Planning, Housing and Development

Zoning Division

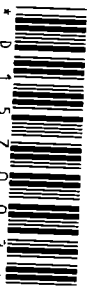
ARLINGTON COUNTY  
NOV 14 2014

**CERTIFICATE OF OCCUPANCY APPLICATION**

(Please read the back of this application before completing this form)

**Important: Applicant must complete all the non-shaded areas, and mark where applicable.**

**BETSY STAGG**  
Permit #: CO1400823  
(PHID) Case #:



10/14/2014

**Trade / Legal Name** 9th Road Residences LLC

**Address to be inspected** 3119 9th Road North Arlington, VA 22201 Zip 2100

Deliver or mail applications to  
Zoning Division, 2100 Clarendon Blvd., Suite 1000  
Phone 703-228-3883, Web building@arlingtonva.us

**I. TYPE OF BUILDING**

- One-Family Dwelling
- Town Houses
- Condominiums
- Hotel
- Commercial/Retail
- Temporary Structure
- Two-Family Dwelling
- Apartments (Rentals)
- Cooperatives
- Office Building
- Industrial Building
- Other

**II. USE OF BUILDING OR SPACE**

Previous Use \_\_\_\_\_

Proposed Use Multifamily Apartment Rentals

Nature of Business \_\_\_\_\_

Maximum Capacity (occupancy) assembly, type uses \_\_\_\_\_  
(ex. restaurants, churches, child care, etc)

**III. CONSTRUCTION WORK INVOLVED (if any):**

- New Building
- Alteration of an existing building.
- Neither of the above Building Permit # B1300967

**IV. AREA TO BE INSPECTED**

**▶ Entire Building**

Gross Floor Area 38822 sq. ft. Garage Floor 9103 sq. ft.

Gross Parking Area 5977 sq. ft.

Total # of Parking Spaces 33

Total # of Floors in Garage 1 Total # of Units 18

Number of Floors 4 Unit Numbers 201-406 201-206, 301-306, 401-406

Amenities Yes  No  Pool Yes  No

**▶ Partial Occupancy**

Garage Floor \_\_\_\_\_ sq. ft.

# of Parking Spaces \_\_\_\_\_ # of Floors in Garage \_\_\_\_\_

Total # of Units \_\_\_\_\_ Square Footage \_\_\_\_\_

Number of Floors \_\_\_\_\_ Unit Numbers \_\_\_\_\_

**V. CERTIFICATE REQUESTED FOR:**

- Master Certificate of Occupancy (MCO) for a new or renovated building or conversion to a condominium, or cooperative.
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- Change in the use of a building space.
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Yes  No

**Storage of hazardous waste materials is regulated by the Uniform Statewide Building Code and Arlington Fire Prevention Code.**

**VII. Ready for inspection?**  
Yes  No

**The premises described under this application are in compliance with law, ordinances and regulations, as determined by the inspections indicated.**

Do not write here

**VIII. ADDITIONAL INFORMATION:**

- Use Permit
- Variance
- Site Plan Approval

**IX. ZONING:**

Zone R48-11B Initials AD

Receipt No. R14016840 Date 10/14/14

**X. APPROVED BY**

Building Initials MAA Date 2-20-15

Electrical Initials SP Date 2-9-15

Mechanical Initials DM Date 1-26-15

Plumbing Initials DM Date 1-26-15

E. H. B. Initials AK Date 2-23-15

Elevator Fire Prevention Initials IDL Date 2-10-15

Child Care Initials \_\_\_\_\_ Date \_\_\_\_\_

Final Survey Initials \_\_\_\_\_ Date \_\_\_\_\_

Bus. Inspection Initials \_\_\_\_\_ Date \_\_\_\_\_

DES Initials \_\_\_\_\_ Date \_\_\_\_\_

Bus. License Initials CEP Date 12-29-15

Zoning Inspector Initials SA Date 12-17-15

**XI. Building Official** Date 12-29-15

Revised 8/13

**I, the Applicant, hereby certify that the information supplied on this application is true and correct to the best of my knowledge; and that any construction, alteration or repair has been performed in accordance with the applicable regulations and under a valid permit issued by Arlington County. I acknowledge receipt of the application instructions.**

Signature [Signature] Applicant name (Print) Michael Jiang Address 4401 Wilson Blvd Suite 600 22203 Phone 7032944634

On-Site Contact Person (if not the applicant) \_\_\_\_\_



ARLINGTON  
VIRGINIA

Department of Community Planning, Housing and Development  
Planning Division, Zoning Administration Inspection Services Division

# CERTIFICATE OF OCCUPANCY

Permission is hereby granted to: **9TH ROAD LLC**

To use the: **G-4** floor, and /or suite number:

Of the building located at: **3119 9TH RD N, For the following purpose: MULTIFAMILY APARTMENTS - 4 FLS - UNITS 201-206, 301-306, 401-406.**

Permit Number	CO1400823		Date Issued	12/29/2015	
Seating Capacity (Zoning)			Occupant Load		
Number of Children			Zoning	RA8-18	
Use Group	R-2	Const.Type	SA	ZBZA Case Number	
Code Mod.	NONE	Use Permit		Sprinkler	Y
Site plan Number	0	V.U.S.B.C.	2009	Sprinkl Req.	Y
Comments					

This certificate does not take the place of any license required by law. Any change in the use, ownership, or occupancy of this building or land shall require a new certificate of occupancy.  
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Authorized by

*Norma J. Cozart*

*Shahriar Amiri*  
Shahriar Amiri  
Building Official

Norma J. Cozart  
Zoning Administrator

**THIS CERTIFICATE SHALL BE CONSPICUOUSLY POSTED AT ALL TIMES.**

2100 Clarendon Blvd., Suite 1000, Arlington, Va. 22201. Tel: 703-228-3883, Fax: 703-228-3896. www.Arlingtonva.us



Figure 2. *Staphylococcus aureus*

Figure 3. *Staphylococcus aureus*