



Application #: Z-22-00580
Receipt #: _____

LAND USE APPLICATION

- NON REFUNDABLE FEE -

Special Use Special Exception Variance Amendment Renewal

1. PROPERTY LOCATION INFORMATION

Property Address 10300 Eaton Place Tax Map # Part of 47 4 02 02 001
Project Name N29 WillowWood Plaza Residential Phase II Project Description To permit residential infill development on existing surface parking lot in the WillowWood office complex. Fifty (50) two-over-two or traditional townhouse units are proposed.

2. APPLICANT or AUTHORIZED AGENT INFORMATION (check as appropriate)

Applicant Name Capital City Real Estate LLC (circle one): Corporation / Gen Partnership / Ltd Partnership / Sole Proprietorship / Individual
Applicant Address c/o Cozen O'Connor, 1200 19th Street, NW, Washington, DC 20036
Phone (o) 703-304-0430 (c) _____ Email epritchard@cozen.com
Applicant or Authorized Agent Signature [Signature]
Relationship to project (circle one): Property owner / Contract purchaser / Lessee / Agent

3. APPLICANT CERTIFICATION STATEMENT Section 110-6.2.3

I certify that I have read and understand my application to comply with Zoning Ordinance Section 6.2.3 which states that an application shall be sufficient for processing when it contains all of the information necessary to decide whether or not the development as proposed will comply with the applicable requirements of this chapter; that the burden of demonstrating that an application complies with applicable review and approval criteria is on the applicant; that each application is unique and, therefore, more or less information may be required according to the needs of the particular case; that staff has the flexibility to specify submission requirements for each application and to waive requirements as appropriate; and that the applicant shall rely on the review official as to whether more or less information should be submitted.

Applicant or Authorized Agent Signature (REQUIRED) [Signature] Date 12/8/22

4. ENGINEER, ARCHITECT, SURVEYOR or LANDSCAPE ARCHITECT (Same as Applicant)

Licensed Professional's Name John Rinaldi
Licensed Professional's Address IMEG Corp. d/b/a Christopher Consultants Ltd., 4035 Ridge Top Rd, Suite 601, Fairfax, VA
Phone (o) 703-766-3912 (c) _____ Email johnrinaldi@imegcorp.com

*****OFFICE USE ONLY*****

Current status of business license and fees
Treasurer: _____
Commissioner of Revenue: _____

THE FOLLOWING MUST BE COMPLETED BY THE PROPERTY OWNER

I/We WillowWood Office Owner LLC by G. Evan Pritchard hereby certify that the applicant named above has the authority vested by me to make this application.

[Signature] (Signature of owner or authorized agent) Attorney/Agent (Title or relationship)

Address Cohen O'Connor, 1200 19th St NW, Washington, DC Phone: 703-304-0930

District of Columbia
STATE OF VIRGINIA to-wit:

I, the undersigned, a Notary Public in and for the State aforesaid, whose commission as such will expire on the 14th day of December, 2025, do hereby certify that this day personally appeared before me in the State aforesaid G. Evan Pritchard Attorney/Agent
(Name) (Title)

whose name(s) is (are) signed to the foregoing and hereunto annexed agreement bearing date of the 8th day of December, 2022, and acknowledged the same before me.

GIVEN under my hand and seal this 8th day of December, 2022.

[Signature]
Notary Public Registration #



FOR OFFICE USE ONLY

Proposal filed: _____ Received by: _____
Fee Paid: _____ Receipt No. _____
Previous Cases: _____
Current status of business license and fees: _____
Treasurer: _____
Commissioner of Revenue: _____

**AFFIDAVIT
CITY OF FAIRFAX**

I, Capital City Real Estate LLC, by G. Evan Pritchard, Attorney/Agent do hereby make oath or affirmation that
(Name of applicant or agent)

I am an applicant in Application Number Z-22-00580 and that to the best of my knowledge and belief, the following information is true:

1. (a) That the following is a list of names and addresses of all applicants, title owners, contract purchasers, and lessees of the property described in the application, and if any of the foregoing is a trustee, each beneficiary having an interest in such land, and all attorneys, real estate brokers, architects, engineers, planners, surveyors, and all other agents who have acted on behalf of any of the foregoing with respect to the application (attach additional pages if necessary):

Name	Address	Relationship
Capital City Real Estate LLC	3000 K Street, NW, Suite 270 Washington, DC 20007	Applicant/Contract Purchaser
WillowWood Office Owner LLC	c/o Ares US Real Estate Fund IX LP, 245 Park Ave 42nd Floor	Owner
Cozen O'Connor	1200 19th Street, NW, Washington, DC	Attorney

*See Attachment

(b) That the following is a list of the stockholders of all corporations of the foregoing who own ten (10) percent or more of any class of stock issued by said corporation, and where such corporation has ten (10) or less stockholders, a listing of all the stockholders (attach additional pages if necessary):

Corporation Name: _____

Name	Address	Relationship
*See Attachment		

(c) That the following is a list of all partners, both general and limited, in any partnership of the foregoing (attach additional pages if necessary):

Partnership Name: _____

Name	Address	Relationship

2. That neither the Mayor nor any member of the City Council, Planning Commission, BZA, or BAR has any interest in the outcome of the decision. EXCEPT AS FOLLOWS: (If none, so state).

none

3. That within five (5) years prior to the filing of this application, neither the Mayor nor any member of the City Council, Mayor, Planning Commission, BZA, or BAR or any member of his or her immediate household and family, either directly or by way of a corporation or a partnership in which anyone of them is an officer, director, employee, agent, attorney, or investor has received any gift or political contribution in excess of \$100 from any person or entity listed in paragraph one. EXCEPT AS FOLLOWS: (If none, so state).

none

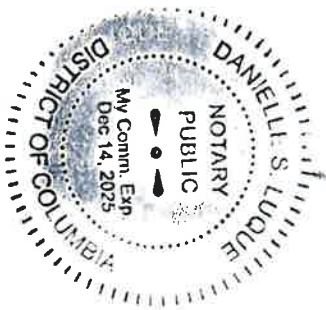
WITNESS the following signature:


Applicant or Agent

ALL APPLICANTS MUST SIGN AND HAVE THEIR SIGNATURES NOTARIZED.

The above affidavit was subscribed and confirmed by oath or affirmation before me on this 8th day of December, 2022, in the State of District of Columbia

My commission expires: December 14, 2025




Notary Public Registration #

Capital City Real Estate LLC
 Zoning Map Amendment
 Affidavit Attachment to p. 7

1(a) cont:

Name	Address	Relationship
Capital City Real Estate LLC, Agents: Chris Love, Bryan Jacob, Scott Zimmerman	3000 K street, NW Suite 270 Washington, DC 20007	Applicant/Contract Purchaser
WillowWood Office Owner LLC c/o Ares US Real Estate Fund IX, LP	245 Park Avenue, 42 nd Floor New York, NY 10167	Owner
Cozen O'Connor Agents: G. Evan Pritchard, Meridith H. Moldenhauer, Eric J. DeBear, Madeline S. Williams	1200 19 th Street, NW Washington, DC 20036	Attorney
IMEG Corp. d/b/a Christopher Consultants Ltd. Agents: Giovanni (John) B. Rinaldi, John Helms, Laurie Beth Donnachie	4035 Ridge Top Road Suite 601 Fairfax, VA 22030	Civil Engineer
Hickok Cole Architects, Inc. Agents: John Lang, Starr Ashcraft	1023 31 st Street, NW Washington, DC 20007	Architect
Wells + Associates Agents: Michael J. Workosky, John F. Cavan	1420 Spring Hill Road, Suite 610, Tysons, VA 22102	Traffic Engineer

1(b) That the following is a list of the stockholders of all corporations of the foregoing who own ten (10) percent or more of any class of stock issued by said corporation, and where such corporation has ten (10) or less stockholders, a listing of all the stockholders:

Corporation Name: Capital City Real Estate LLC

Name	Address	Relationship
Scott Zimmerman	3000 K street, NW Suite 270 Washington, DC 20007	Applicant/Contract Purchaser

Corporation Name: WillowWood Office Owner LLC

Name	Address	Relationship
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Polinger Development Company; Ares US Real Estate Fund IX, LP	245 Park Avenue, 42 nd Floor New York, NY 10167	Owner
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Corporation Name: Cozen O'Connor PC

Name	Address	Relationship
There are more than 10 stockholders, none of which owns 10% or more of any class of stock	1200 19 th Street, NW Washington, DC 20036	Attorney

Corporation Name: IMEG Corp. d/b/a Christopher Consultants Ltd.

Name	Address	Relationship
There are more than 10 stockholders. See below for stockholders that own more than 10% or more of any class of stock. IMEG ESOP (employee stock ownership plan)	623 26 th Avenue Rock Island, Illinois 61201	Civil Engineer

Corporation Name: IMEG ESOP

Name	Address	Relationship
All employees are eligible participants, none of whom owns 10% or more of any class of stock	623 26 th Avenue Rock Island, Illinois 61201	Civil Engineer

Corporation Name: Hickok Cole Architects, Inc.

Name	Address	Relationship
Michael E. Hickok Yolanda L. Cole	1023 31 st Street, NW Washington, DC 20007	Architect

Corporation Name: Wells + Associates

Name	Address	Relationship
Employee Stock Ownership Plan (ESOP). All employees are eligible participants, none	1420 Spring Hill Road, Suite 610, Tysons, VA 22102	Traffic Engineer

of whom owns 10% or more of any class of stock		
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