

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS

Certificate of Occupancy Authorization Form

Authorization Form to Act on Behalf of the Owner

To the Director, Department of Consumer and Regulatory Affairs:

This is to certify that I, Brandon Gallas
(Print Name of sole owner, general partner, or corporation officer)

Home owner
am the true Owner of the ~~Business~~ described below:

(Proposed address of ~~business~~ home you intend to occupy):
4430 9th St NW Washington DC

(Type of business you intend to operate):
NA

***I FURTHER CERTIFY THAT THE PERSON(S) NAMED
BELOW IS/ARE AUTHORIZED TO ACT ON MY BEHALF IN
EXECUTING AND PROCESSING AN APPLICATION FOR
DISTRICT OF COLUMBIA CERTIFICATE OF OCCUPANCY
RELATING TO THE AFOREMENTIONED BUSINESS
ESTABLISHMENT.***

Name of Person/s to act on behalf of owner:
Tohmas Ahmann LLC

Address/es of Person/s to act on behalf of owner:
4408 Beechwood Rd, University Park 20872

Brandon Gallas 8/14/14
(Signature of ~~Business Owner~~ Home Owner) (Date)

Sworn to before me this _____ day of _____, 20____

(Notary Public)

My Commission Expires: _____