

Sincerely,



Jeffrey I. Cooper
Director, Exempt Organizations
Rulings and Agreements

Letter 947

FR-500

COMBINED REGISTRATION APPLICATION FOR BUSINESS DC TAXES/FEES/ASSESSMENTS



GOVERNMENT OF THE DISTRICT OF COLUMBIA OFFICE OF TAX AND REVENUE

PART I — General Information

1(a). Federal Employer Identification Number 47-2007764 NAICS Business Code

1(b). Social Security Number 337-44-0387 [065 78 5820]

3. Reason for application: (please check)

- 3. Reason for application: (please check)
New business
Additional location
Purchased existing business
Name change
Legal form change
Street and Mobile Food Services Vendor
Employment of household/domestic help
Address change
Merger
Other
Heating oil company
Utility company

4. Legal form of business (please check):

- 4. Legal form of business (please check):
Sole Proprietor
Limited Liability Company
General partnership
Limited Liability Partnership
Corporation
Limited partnership
Government
Joint Venture
Other

5. Business Name (Individual, Partnership, Corporation)

The GRENIER FOUNDATION, INC.

6. Trade Name (if different from Line 5)

7. Business Address (PO Box is not acceptable unless located in a Rural Area)
4246 BENNING ROAD, NE
WASHINGTON, DC 20019

8. Mailing Address

9. Local Business Phone No. 202, 714 3856
10. Main Office Phone No. 202, 487 8600
10(a). Fax No.

11. Date present business began or is expected to begin in DC
Mo. 01 Day 01 Year 2017

12. If previously registered with the DC, please provide:

Former Entity Name Business Tax Registration Number

Former Trade Name Name of Former Owner(s)

13. NAME, TITLE, HOME ADDRESS, SOCIAL SECURITY NUMBER OF PROPRIETOR, PARTNERS OR PRINCIPAL OFFICERS

Table with 4 columns: Name and Title, Home Address, Zip Code, Social Security Number. Includes Roger Kaplan (Acting Deputy Pres) and Chmi Kaplan (Acting Pres).

PART II — Franchise Tax Registration

14. Indicate your profession, principal business activity or service (for example, retail grocery, wholesale auto parts, barber shop, doctor, contractor, etc.)

15. Do you or will you have an office, warehouse, or other place of business in DC, or a representative with a DC location? Yes No

16. Do you or will you have merchandise stored in a public or private warehouse in DC? Yes No

17. Do you or will you perform in DC personal services (medical, accounting, consulting); or other services such as electrical, heating, construction, etc., or installations or repairs of any type? Yes No

18. Do you or will you generate any business related income from DC sources? Yes No

19. Do you or will you have rental property in DC? Yes No

20. Date converted or expected to be converted to rental property

21. Date on which your taxable year ends: Month Day Year

22. Describe fully ALL your current or expected business activities and/or major type of services performed within DC.

MANAGE FOUNDATION, RAISE FUNDS for DONATIONS, MAKE GRANTS, MAINTAIN WEBSITE

(Rev. 03/14)

— INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED AND WILL BE RETURNED —

PART III — Employer's DC Withholding Tax Registration

23. Estimated total number of employees <u>2 or 3</u>	24. Number of DC resident employees subject to DC Withholding Tax: <u>1</u>
25a. Date when you began to employ DC resident(s) <u>01-02-19</u> mo. day yr.	26. Estimate of amount of DC tax to be withheld monthly from DC resident employees:
25b. Date when you began or when you expect to begin to withhold DC tax from resident employees <u>01-06-19</u>	27. Will you have employee(s) working in DC?
	28. Withholding from retirement accounts or plans <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

PART IV — Sales and Use Tax Registration

29. Check applicable box(es) below

- Reporting Sales Tax on retail sales or rentals.
- Reporting Use Tax on items purchased tax free inside/outside DC
- Purchasing in DC items for resale outside DC (Attach photocopy of state/county sales tax registration.)
- Purchasing in DC cigarettes for resale outside DC (Attach photocopy of state/county cigarette/tobacco license.)
- Making no taxable sales and tax is paid to vendors on all taxable purchases.
- Making exempt sales where a Certificate of Resale is issued.
- Street and Mobile Food Services Vendor.

30. Date when sales/use began in DC (mo./day/yr.) _____ or date expected to begin.

31. If you have more than one place of business where you collect taxes on sales in DC, do you wish to file a Combined Sales Tax Return for all locations? Yes No
Please attach a statement listing the additional places of business.

PART V, Section 1 — Personal Property Tax Registration

Describe the type of Personal Property at each location (ex. furniture, fixtures, machinery equipment and supplies), used for business purposes.

PART V, Section 2 — Ballpark Fee Registration

Are annual gross receipts greater than \$5 million? Yes No

Begin date (MMDDYYYY) _____ End date (MMDDYYYY) _____

PART V, Section 3 — Nursing Facility/Registration

Yes No

Begin date (MMDDYYYY) _____ End date (MMDDYYYY) _____

PART V, Section 4 — Tobacco Products Excise Tax Registration

Yes No

Begin date (MMDDYYYY) _____ End date (MMDDYYYY) _____

PART V, Section 5 — Intermediate Care Facility for Persons with Intellectual or Developmental Disabilities (ICF-ID) Tax Registration

Yes No

Begin date (MMDDYYYY) _____ End date (MMDDYYYY) _____

PART V, Section 6 — Hospital Revenue Assessment

Yes No

Begin date (MMDDYYYY) _____ End date (MMDDYYYY) _____

PART V, Section 7 — Hospital Provider Fee

Yes No

Begin date (MMDDYYYY) _____ End date (MMDDYYYY) _____

PART V, Section 8 — Miscellaneous Tax Registration

check(s) below and the appropriate payment booklet(s) will be sent to you or available on the website.

Wholesaler

Gross Receipts Tax on Heating Oil

Satellite Relay or Distribution of Video or Radio Transmission only

Interstate Bus

Resaler

Motor Vehicle Fuel Tax

Mobile Service Tax

Gross Receipts Tax on Natural or Artificial Gas by Non-Public Utility Person

Public Utility

Tax on Toll Telecommunication Service

Medical Marijuana

For questions please contact the Customer Service Administration at (202) 727-4TAX (4829).

I ON
under penalty as provided by law that this application (including any accompanying schedules and statements) has been examined
to the best of my knowledge, it is correct.

[Handwritten Signature]

ACTING DEPUTY PRES.

10/22/2018

Signature

Title

Date

APPLICATIONS WHEN COMPLETED MUST BE SIGNED BY EITHER THE OWNER, PARTNER OR PRINCIPAL OFFICER OF THE CORPORATION. (Agents or Representatives signing must attach a Power of Attorney.)

OFFICIAL USE ONLY

Type Tax	Date Lia. began	Cycle	Method	Remarks
H				
J				
W				
S				
P				
MISC				
Reviewer/Date				
Date Data Entered/Initials				

PART V, Section 8 — Miscellaneous Tax Registration

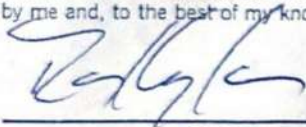
Check applicable block(s) below and the appropriate payment booklets/returns will be sent to you or available on the website.

- | | |
|--|--|
| <input type="checkbox"/> Alcoholic Beverage Wholesaler | <input type="checkbox"/> Gross Receipts Tax on Heating Oil |
| <input type="checkbox"/> Cable Television, Satellite Relay or Distribution of Video or Radio Transmission only | <input type="checkbox"/> Interstate Bus |
| <input type="checkbox"/> Cigarette Wholesaler | <input type="checkbox"/> Motor Vehicle Fuel Tax |
| <input type="checkbox"/> Commercial Mobile Service Tax | <input type="checkbox"/> Gross Receipts Tax on Natural or Artificial Gas by
Non-Public Utility Person |
| <input type="checkbox"/> Gross Receipts Public Utility | <input type="checkbox"/> Medical Marijuana |
| <input type="checkbox"/> Gross Receipts Tax on Toll Telecommunication Service | |

If you have questions please contact the Customer Service Administration at (202) 727-4TAX (4829).

CERTIFICATION

I declare under penalties as provided by law that this application (including any accompanying schedules and statements) has been examined by me and, to the best of my knowledge, it is correct.



Signature

ACTING DEPUTY PRES.

Title

10/22/2018

Date

APPLICATIONS WHEN COMPLETED MUST BE SIGNED BY EITHER THE OWNER, PARTNER OR PRINCIPAL OFFICER OF THE CORPORATION. (Agents or Representatives signing must attach a Power of Attorney.)

GOVERNMENT OF THE DISTRICT OF COLUMBIA

OFFICE OF TAX AND REVENUE

CERTIFICATE OF EXEMPTION

ISSUED PURSUANT TO DISTRICT OF COLUMBIA INCOME AND FRANCHISE TAX ACCOUNTS

THIS CERTIFIES THAT

THE GRENIER FOUNDATION, INC
DBA: THE GRENIER FOUNDATION, INC
4246 BENNING RD NE
WASHINGTON DC 20019-4549

ACCOUNT ID

250-000954829

CERTIFICATE NUMBER

L0003687771

Is entitled to the exemption described below from Corporation Franchise Tax under the authority of the District of Columbia Corporation Franchise Tax Acts.

EFFECTIVE EXPIRATION

06-Feb-2015 23-Jan-2025

THIS CERTIFICATE IS NON TRANSFERABLE



OFFICE OF TAX AND REVENUE

FR-164 EXEMPTION

IRS Code Section: 501(c)(3)

Contributions made to you **are** deductible by donors.

Your exemption from Corporation Franchise Tax is valid from the effective to the expiration date stated. See Income and Franchise Tax Exemption under DC Code §47-1802.01(a)(3).

IRS Determination Date: 06-Feb-2015



Government of the District of Columbia
Office of the Chief Financial Officer
Office of Tax and Revenue

1101 4th Street, SW
Washington, DC 20024

Date of Notice: January 27, 2020

Notice Number: L0003812778

THE GRENIER FOUNDATION, INC
4246 BENNING RD NE
WASHINGTON DC 20019-4549

FEIN: **-***7764
Customer ID: 00009-93515

NOTICE OF BUSINESS TAX REGISTRATION

You have been registered for the tax(es) shown below. Your filing basis has been determined as shown. It is important that the Employer Identification Number (FEIN) or Social Security Number (SSN) referenced above be used on all correspondence and returns.

If you registered for an Employer Withholding account, please include the associated Account ID Number listed below on all returns and payments.

<u>Tax Type</u>	<u>Account ID</u>	<u>Filing/Payment Frequency</u>	<u>Tax Year End</u>
Corporation	250-000954829	Exempt Annual	

For tax forms or to register to file or pay electronically, please visit our website at MyTax.DC.gov

If applicable you will also be registered for an Employer Use Tax (Form FR800A Sales & Use tax return). The Employer Use Tax Return Act of 2012 requires a use tax to be imposed on any employer required to file a DC withholding tax return, which is not otherwise required to collect and remit sales tax.

If applicable you will also be registered for Unemployment Compensation Taxes and will be contacted by the DC Department of Employment Services Office of Unemployment Compensation regarding your filing requirements. Any questions concerning your liability for Unemployment Compensation may be answered by calling (202) 698-7550.



Government of the District of Columbia
Office of the Chief Financial Officer
Office of Tax and Revenue

1101 4th Street, SW
Washington, DC 20024

Date of Notice: January 27, 2020

Notice Number: L0003812778

THE GRENIER FOUNDATION, INC
4246 BENNING RD NE
WASHINGTON DC 20019-4549

FEIN: **-***7764
Customer ID: 00009-93515

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<u>Tax Type</u>	<u>Account ID</u>	<u>Filing/Payment Frequency</u>	<u>Tax Year End</u>
Corporation	250-000954829	Exempt Annual	

For tax forms or to register to file or pay electronically, please visit our website at MyTax.DC.gov

If applicable you will also be registered for an Employer Use Tax (Form FR800A Sales & Use tax return). The Employer Use Tax Return Act of 2012 requires a use tax to be imposed on any employer required to file a DC withholding tax return, which is not otherwise required to collect and remit sales tax.

If applicable you will also be registered for Unemployment Compensation Taxes and will be contacted by the DC Department of Employment Services Office of Unemployment Compensation regarding your filing requirements. Any questions concerning your liability for Unemployment Compensation may be answered by calling (202) 698-7550.



Department of Consumer and Regulatory Affairs

[Home](#) [Edit Account](#) | [Log Out](#)

GRENIER FOUNDATION, INC. (THE) - Initial File Number: N00005099014

[Main](#)
[Reports](#)
[Trade Names](#)
[Governors](#)

Entity Info

Business Name	GRENIER FOUNDATION, INC. (THE)
Suffix	
Registration / Effective Date	2/06/2015
Commencement Date	2/06/2015
Entity Status	Active
Foreign Name	
Date of Organization	
State	District of Columbia
Country	USA

Business Address

Line1	4246 BENNING ROAD NE				
Line2					
City	WASHINGTON	State	District of Columbia	Zip	20019

Agent

Is non-commercial Registered Agent?	Yes
Name	ROGER KAPLAN

Address

Line1	4246 BENNING RD NE				
Line2					
City	WASHINGTON	State	District of Columbia	Zip	20019
Email	rfskap@gmail.com				

[Return to Home](#)

GRENIER FOUNDATION, INC. (THE) - Initial File Number: N00005099014

- Main
- Reports
- Miscellaneous
- Services
- Authorized Officials
- Trade Names
- Filing History
- Stocks
- Corporate Information

Entity Info

Entity Id 4150237

Key Indicators

Model Type Non-Profit Corporation
 Locale Domestic
 Qualifier None

Business Name GRENIER FOUNDATION, INC. (THE)
 Suffix
 Registration / Effective Date 2/06/2015
 Is Perpetual? No
 End Date
 Entity Status Active
 Entity Status Date 5/17/2016

Foreign Name
 Date of Organization
 State District of Columbia
 Country USA
 Suffix No

Business Address

Line1 4246 BENNING ROAD NE
 Line2
 City WASHINGTON State District of Columbia Zip 20019

Agent

Is non-commercial Registered Agent? Yes
 Name ROGER KAPLAN
 Address
 Line1 4246 BENNING RD NE
 Line2
 City WASHINGTON State District of Columbia Zip 20019
 Email rfskap@gmail.com

Active / GS

Purpose

Purpose Type	Description	File Number	Actions
Other	EVANGELISTIC MINISTRY	000005425156	View

1 to 1 of 1 rows 10

Notes

Note	Created By	Created Date
No Notes were found.		

10

Note

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



CERTIFICATE

THIS IS TO CERTIFY that all applicable provisions of the District of Columbia Business Organizations Code have been complied with and accordingly, this **CERTIFICATE OF INCORPORATION** is hereby issued to:

GRENIER FOUNDATION, INC. (THE)

Effective Date: 2/6/2015

IN WITNESS WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed as of 2/6/2015 11:02 AM

Business and Professional Licensing Administration



A handwritten signature in cursive script that reads "Patricia E. Grays". The signature is written in black ink and is positioned above a horizontal line.

PATRICIA E. GRAYS
Superintendent of Corporations
Corporations Division.

Muriel Bowser
Mayor

Tracking #: 7DIIDSDI



DCRA Corp. Div.

File Copy
 JUL 31 2018
 File Copy
 JUL 31 2018
 DCRA Corp. Div.

Form BRA-25. Ver. 5, April 2018.
Two-Year Report for Domestic & Foreign Filing Entity.

Use this form to file a two-year report for a domestic or foreign filing entity as required under § 29-102.11.

Year of Filing: 2018
 File Number: N00005099014
 Date of Filing: 7-31-2018
 Filing Fee: \$130.00

Under the provisions of the Title 29 of D.C. Code (Business Organizations Act), the domestic or foreign filing entity listed below is filing its biannual report and for that purpose submits the statement below.

1. Entity Name.
GRENIER FOUNDATION, INC. (THE)
2. Organized under the laws of which state or country.
DISTRICT OF COLUMBIA
3. Address of principal office.
4246 BENNING ROAD, NE WASHINGTON, DC 20019
4. Name of Registered Agent and address of registered office in DC.
ROGER KAPLAN 4246 BENNING ROAD NE WASHINGTON, DC 20019
5. Brief statement of business affairs conducted in DC.
PROMOTE LITERACY and preserve the literary heritage of Richard and Cynthia Grenier, notably in relation to French and American culture.

6. List all entity governors (attach list if needed)

TITLE	NAME	ADDRESS
Board member	Claudia Anderson	4246 Benning Rd., NE
Board member	Philip Terzian	4246 Benning Rd., NE
Board member	Sol W. Sanders	4246 Benning Rd., NE
Acting president	Obou Coum Diout	4246 Benning Rd., NE

7. Is foreign filing entity in good standing in state / country where it is organized?
 Yes No

If you sign this form you agree that anyone who makes a false statement can be punished by criminal penalties of a fine up to \$1000, imprisonment up to 180 days, or both, under DCOC § 22 2405;

8. Name of the Governor or Authorized Person.
 ROGER KAPLAN

8A. Signature of the Governor or Authorized Person.

Department of Consumer and Regulatory Affairs
 Corporations Division
 PO Box 92300
 Washington, DC 20090
 Phone: (202) 442 4432

Corporate Online Services Information:
 Many corporate filings are available by using CorpOnline Service.
 Go to CorpOnline site at <https://corponline.dkra.dc.gov>, create the profile, access the online services main page and proceed. Online filers must pay by using the credit card.



DEPARTMENT OF CONSUMER & REGULATORY AFFAIRS

Certified Resolution

GOVERNMENT OF THE DISTRICT OF COLUMBIA
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUSINESS CENTER
1100 4th STREET SW, 2ND FLOOR
WASHINGTON, DC 20024

I, O Bou O Diny certify that I am the President and MANAGER
(Title)
for The GRENIER FOUNDATION Inc authorize MYSELF
(Name and Title)

_____ to submit the application for Charitable Solicitation
Registration Certificate.

I hereby certify all information submitted within this package is true to the best of my knowledge.

O Bou O Diny
Signature

Subscribed and sworn before me, a Notary Public

SEAL



Notary [Signature]

Today's Date JANUARY 22, 2020

Commission Expires 4/1/2020



District of Columbia Government

mchyman

Corporations Division

Form BRA-25. Ver. 5, April 2018.

Two-Year Report for Domestic & Foreign Filing Entity.

Use this form to file a two-year report for a domestic or foreign filing entity as required under § 29-102.11.

Year of Filing: 2020
 File Number: N00005099014
 Date of Filing: 1-22-2020
 Filing Fee: \$80

Under the provisions of the Title 29 of D.C. Code (Business Organizations Act), the domestic or foreign filing entity listed below is filing its biannual report and for that purpose submits the statement below.

1. Entity Name.

GREENIER FOUNDATION, INC. (THE)

2. Organized under the laws of which state or country.

DISTRICT OF COLUMBIA

3. Address of principal office.

4246 BENNING RD NE WASHINGTON DC 20019

4. Name of Registered Agent and address of registered office in DC.

ROGETZ (KAPLAN) 4246 BENNING RD NE WASHINGTON DC 20019

5. Brief statement of business affairs conducted in DC.

PROMOTE LITERACY, PRESERVE HERITAGE OF RICHARD AND CYNTHIA GREENIER, ASSIST CULTURAL AND PROFESSIONAL LINK WITH W. AFRICAN

6. List all entity governors (attach list if needed)

TITLE	NAME	ADDRESS
PRESIDENT (ACTING)	OROUKI DIOUF	4246 BENNING RD NE
BOARD MEMBER	CLAUDIA ANDERSON	(same)
BOARD MEMBER	PATRIC TERZIAN	(same)

7. Is foreign filing entity in good standing in state / country where it is organized?

Yes No

If you sign this form you agree that anyone who makes a false statement can be punished by criminal penalties of a fine up to \$1000, imprisonment up to 180 days, or both, under DCOC § 22-2405.

8. Name of the Governor or Authorized Person.

ROGETZ KAPLAN

8A. Signature of the Governor or Authorized Person.

Department of Consumer and Regulatory Affairs
Corporations Division
PO Box 92300
Washington, DC 20090
Phone: (202) 442 4432

Corporate Online Services Information:
Many corporate filings are available by using CorpOnline Service.
Go to CorpOnline site at <https://corponline.dcrd.dc.gov>, create the profile, access the online services main page and proceed. Online filers must pay by using the credit card.



DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUSINESS LICENSING DIVISION

CHARITABLE SERVICES BUSINESS WORKSHEET

Select the applicable license category: Charitable Exempt Charitable Solicitation

AFFIDAVIT

(Charitable Exempt Only)

I, _____ certify that I am the _____
(Name) (Title)

for _____; attest the exemption under §501 of the Internal
(Organization Name)

Revenue Code of 1954 is in force and effect on the date of the submission of proof under this

section for _____
(Organization Name)

CERTIFIED RESOLUTION

(Charitable Solicitation Only)

I, ROGER KAPLAN certify that I am the AGENT & BOARD MEMBER
(Title)

for THE GREENER FOUNDATION, INC.; authorize myself
(Organization Name) (Name and Title)

to submit the application for Charitable Solicitation Registration Certificate. I hereby certify all information submitted within this package is true to the best of my knowledge.

DISTRICT OF COLUMBIA ! SS
Subscribed and sworn before me, a Notary Public

[Signature]
Signature



Notary [Signature]

Today's Date 11/24/2020

Commission Expires _____ My Commission Expires August 31, 2024





Government of the District of Columbia

CERTIFICATE OF CLEAN HANDS

**THE GRENIER FOUNDATION, INC
4246 BENNING RD NE
WASHINGTON, DC 20019-4549**

EIN : ***7764**

As reported in the Citywide Clean Hands system, the above referenced individual or entity has no outstanding liability with the District of Columbia. As of the date herein, you have complied with the following official DC code and therefore are issued this Certificate of Clean Hands.

**TITLE 47. TAXATION, LICENSING, PERMITS, ASSESSMENTS AND FEES
CHAPTER 28. GENERAL LICENSE LAW
SUBCHAPTER II. CLEAN HANDS BEFORE RECEIVING A LICENSE OR PERMIT
D.C. Code § 47-2862 (2006)
§ 47-2862. Prohibition against issuance of license or permit.**

**Authorized By Marc Aronin
Chief, Collection Division**

Date: Friday this 24th day of January 2020 11:39 AM

Tracking#: 1218423

This document is a certified, complete and true copy.

BASIC BUSINESS LICENSE

Name and Address:
GRENIER FOUNDATION, INC. (THE)

4246 BENNING ROAD NE
 WASHINGTON, DC 20019

Premise/Application's Name and Address:
GRENIER FOUNDATION, INC. (THE)

4246 BENNING RD NE
 WASHINGTON, DC 20019

Category: 1/27/2020
 License#: 4002
 License Period: 400220000200
 1/1/2020 - 12/31/2021

Registered Agent's Name and Address:
ROGER KAPLAN

4246 BENNING ROAD NE
 WASHINGTON DC 20019

Owner's Name
 Corp. Name
 Trade Name

GRENIER FOUNDATION, INC. (THE)

CofO/HOP#:HO2000332	SSL: 5087 0904	Zone: RA-1	Ward: 7	ANC:7D	PERM NO.
	UNITS: 1				

General Business

Charitable Services

Charitable Solicitation

-- THE LAW REQUIRES THIS LICENSE TO BE POSTED IN A CONSPICUOUS PLACE ON THE PREMISES --

Ernest Chappah

Director:

Ernest Chrappah

*License Effective from the later of Issued or Start of License-Period Date

GOVERNMENT
OF THE
DISTRICT OF COLUMBIA
Muriel Bowser, Mayor

Department of Consumer and Regulatory Affairs

Business License Division
1100 4th Street S.W.
Washington DC 20024

Date Issued: 1/27/2020
Category: 4002
License#: 400220000200
License Period: 1/1/2020 - 12/31/2021

BASIC BUSINESS LICENSE

Billing Name and Address:
GRENIER FOUNDATION, INC. (THE)

Premise/Application's Name and Address:
GRENIER FOUNDATION, INC. (THE)

Registered Agent's Name and Address:
ROGER KAPLAN

4246 BENNING ROAD NE
WASHINGTON, DC 20019

4246 BENNING RD NE
WASHINGTON, DC 20019

4246 BENNING ROAD NE
WASHINGTON DC20019

Owner's Name
Corp. Name GRENIER FOUNDATION, INC. (THE)
Trade Name

CofO/HOP#:HO2000332	SSL: 5087 0904	Zone: RA-1	Ward: 7	ANC:7D	PERM NO.
		UNITS: 1			

Charitable Services

General Business

Charitable Solicitation

-- THE LAW REQUIRES THIS LICENSE TO BE POSTED IN A CONSPICUOUS PLACE ON THE PREMISES --

Ernest Chrappah

Director:
Ernest Chrappah

* License Effective from the later of Issued or Start of License-Period Date

Department of Consumer and Regulatory Affairs

Permit Operations Division
1100 4th Street SW
Washington DC 20024

Tel. (202) 442 - 4589 Fax (202) 442 - 4862



HOP

HOME OCCUPATION PERMIT



Permit No. HO2000332

Date: 01/24/2020

Address: 4246 BENNING RD NE		Zipcode:	Zone: RA-1	Ward: 7	Square: 5087	Suffix:	Lot: 0904
Owner Name: Obou Oumi Diouf		Owner Address: 4246 BENNING RD NE WASHINGTON, DC 20019-4549					
Business Entity Type: Corporation	Business Type: Business Owner Home Office	Description: HOME OFFICE		Issue Date: 1/24/2020	PERMIT FEE : APPL: \$36.30 PMT: \$36.30		
Bus Owner/Tenant: The Grenier Foundation Inc.		Business Address:				BZA No:	
Total Sq. Footage: 1000	% of Use: 15 - 20	Sign: No		Sign Size and Name:			
Employees: No	No. Employees: 0	Leased Parking:		Parking Type Provided:		Off Street Parking:	
Bed & Breakfasts	Meals Served:	# Sleeping Rooms:		No. Residents:		Other Residents:	
Days of Operation: Sunday - Saturday		Hours of Operation: From: 10am AM To: 6pm PM					
Conditions/ Restrictions:							
Director: Ernest Chrappah <i>Ernest Chrappah</i>		Permit Clerk: Gwendolyn Owens <i>Gwendolyn Owens</i>					
<p>TO REPORT WASTE, FRAUD OR ABUSE BY ANY DC GOVERNMENT OFFICIAL, CALL THE DC INSPECTOR GENERAL AT 1-800-521-1639 To schedule a CONSTRUCTION INSPECTION or for INQUIRIES CALL (202) 442-9557 Call Miss Utility at 811 or 1-800-257-7777 at least 48 Hours prior to excavation to obtain a ticket. /www.missutility.net/washingtondc/dcstatelaw.asp</p>							

