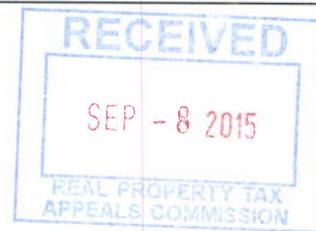


**GOVERNMENT OF THE DISTRICT OF COLUMBIA
REAL PROPERTY TAX APPEALS COMMISSION**



Real Property Assessment Appeal Form – Tax Year 2016

YOU MUST FILE YOUR APPEAL WITHIN 45 DAYS OF THE DATE OF YOUR NOTICE OF 1ST LEVEL APPEAL DECISION

*Owner's Name: WRIT 2445 M LLC *Square: 0024 *Suffix: _____ *Lot: 0871

*Property Address: 2445 M Street NW *Tax Class 002 *Neighborhood Code Central
Will you be appealing any other properties? Yes No, If Yes, please complete an appeal application for each.

*Contact Phone Numbers: 703-245-9729 703-593-6252 E-mail: jeremy.chitlik@altusgroup.com

* Required information

Assessed Value of Tax Years

Last Year 20 <u>15</u>	Proposed TY 20 <u>16</u>	First Level Assessment Appeal Decision
Land \$ <u>48,262,500</u>	\$ <u>48,262,500</u>	\$ <u>48,262,500</u>
Building \$ <u>138,922,000</u>	\$ <u>145,655,280</u>	\$ <u>135,454,600</u>
Total \$ <u>187,184,500</u>	\$ <u>193,917,780</u>	\$ <u>183,717,100</u>

Please indicate the basis for your appeal (examples of supporting documentation are shown below):

<input checked="" type="checkbox"/> Estimated Market Value	Examples: recent written appraisal; recent settlement statement; property insurance documents Please see submitted appeal.
<input checked="" type="checkbox"/> Equalization	Example: a listing of properties that you consider to be comparable to your property.
<input type="checkbox"/> Classification	Indicate current use of the property, and date the use started: Date: _____ <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Mixed Use <input type="checkbox"/> Vacant <input type="checkbox"/> Blight
<input type="checkbox"/> Property Damage or Condition	Please describe and provide evidence such as cost estimates and damage claims. Color photographs are strongly encouraged.
<input type="checkbox"/> Disputed Property Record	Explain:

Property Value Information

If your property has been privately appraised within the past 12 months prior to January 1st please attach a copy with the appeal.
Purchase price of the property \$ _____ Date of Purchase _____ Your estimate of value \$ 155,052,600

Please state the justification for your appeal. (Attach additional or supporting documents.)
Please see submitted appeal.

We conduct both telephone and in-person hearings as well as non-appearance reviews of the written record. Telephone and in-person hearings are conducted by appointment only. If you fail to appear and **have not** notified us twenty-four (24) hours in advance of the appointed time, your hearing will be converted to a non-appearance review of the written record and only the information furnished with your original petition will be considered in the review.

Please select your preferred hearing method: Non-Appearance Telephone _____ In-Person
(Contact Phone Number)

I certify under penalty of law that the information provided is true, correct and complete to the best of my knowledge and belief. Making a false statement as to material facts is punishable by criminal penalties D.C. Code Section 22-2514

Return 1 original and 4 copies of form to:
Real Property Tax Appeals Commission
441 4th Street, NW
Suite 360 North
Washington, D.C. 20001
(202) 727-6860

Print Name: Jeremy Chitlik
Owner/Agent* Signature:
Date (mm/dd/yyyy): 8/31/15
Daytime Phone: 703-245-9729
Evening Phone: 703-593-6252

*If not the owner, a notarized RPTAC Letter of Agent Authorization must be attached. OTR's Letter of Agent Authorization will not be accepted.

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
REAL PROPERTY TAX APPEALS COMMISSION**



Real Property Assessment Appeal Form – Tax Year 2016

YOU MUST FILE YOUR APPEAL WITHIN 45 DAYS OF THE DATE OF YOUR NOTICE OF 1ST LEVEL APPEAL DECISION

*Owner's Name: WRIT 1227 25th Street LLC *Square: 0024 *Suffix: _____ *Lot: 0886

*Property Address: 1227 25th Street NW *Tax Class 002 *Neighborhood Code 010

Will you be appealing any other properties? Yes No, If Yes, please complete an appeal application for each.

*Contact Phone Numbers: 703-245-9729 703-593-6252 E-mail: jeremy.chitlik@altusgroup.com

* Required information

Assessed Value of Tax Years

Last Year 20 <u>15</u>	Proposed TY 20 <u>16</u>	First Level Assessment Appeal Decision
Land \$ <u>24,366,610</u>	\$ <u>24,366,610</u>	\$ <u>24,366,610</u>
Building \$ <u>26,170,990</u>	\$ <u>29,147,970</u>	\$ <u>27,984,900</u>
Total \$ <u>50,537,600</u>	\$ <u>53,514,580</u>	\$ <u>52,351,510</u>

Please indicate the basis for your appeal (examples of supporting documentation are shown below):

<input checked="" type="checkbox"/> Estimated Market Value	Examples: recent written appraisal; recent settlement statement; property insurance documents Please see submitted appeal.
<input type="checkbox"/> Equalization	Example: a listing of properties that you consider to be comparable to your property.
<input type="checkbox"/> Classification	Indicate current use of the property, and date the use started: Date: _____ <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Mixed Use <input type="checkbox"/> Vacant <input type="checkbox"/> Blight
<input type="checkbox"/> Property Damage or Condition	Please describe and provide evidence such as cost estimates and damage claims. Color photographs are strongly encouraged.
<input type="checkbox"/> Disputed Property Record	Explain: _____

Property Value Information

If your property has been privately appraised within the past 12 months prior to January 1st please attach a copy with the appeal.
Purchase price of the property \$ _____ Date of Purchase _____ Your estimate of value \$ 37,066,400

Please state the justification for your appeal. (Attach additional or supporting documents.)
Please see submitted appeal.

We conduct both telephone and in-person hearings as well as non-appearance reviews of the written record. Telephone and in-person hearings are conducted by appointment only. If you fail to appear and **have not** notified us twenty-four (24) hours in advance of the appointed time, your hearing will be converted to a non-appearance review of the written record and only the information furnished with your original petition will be considered in the review.

Please select your preferred hearing method: Non-Appearance Telephone _____ In-Person
(Contact Phone Number)

I certify under penalty of law that the information provided is true, correct and complete to the best of my knowledge and belief: Making a false statement as to material facts is punishable by criminal penalties D.C. Code Section 22-2514

Return 1 original and 4 copies of form to:
Real Property Tax Appeals Commission
441 4th Street, NW
Suite 360 North
Washington, D.C. 20001
(202) 727-6860

Print Name: Jeremy Chitlik
Owner/Agent* Signature: [Signature]
Date (mm/dd/yyyy): 08/19/2015
Daytime Phone: 703-245-9729
Evening Phone: 703-593-6252

*If not the owner, a notarized RPTAC Letter of Agent Authorization must be attached. OTR's Letter of Agent Authorization will not be accepted.