

# Covenants Appeal Request Resolution Worksheet

Date: January 20, 2015

## Suggested Motion:

"I move to approve to schedule a hearing on February 17, 2016 in relation to the Covenants Committee's decision to deny an HVAC application submitted by the unit owner at 1516 Mount Eagle Place".

2<sup>nd</sup>:

## Summary:

On December 8, 2015 the Covenants Committee denied an HVAC- split system application based on the HVAC unit not being installed in an approved location. The application and denial letter are included in the January 2016 Board package.

## Vote:

	In Favor	Opposed	Abstained	Absent
Susan Cox				
Anna Fernezian				
Jarrod Grimsley				
Ralph Heinze				
Rich Moha				
Phil Saims				
Kathy Schramek				
Randy Sparks				
Robin Woods				



## Sarah Clark

---

**From:** Geoff Burke <gsburke@gmail.com>  
**Sent:** Monday, December 14, 2015 10:46 AM  
**To:** Jennifer Jett-Bowling  
**Cc:** Jim Workman; Mark Miller; Sarah Clark  
**Subject:** Re: PDF Document burke project options.pdf

Greetings;

I have no heat. I appeal the covenants decision.

Pursuant to the bylaws, I request an emergency meeting before the Board. I need a decision on this matter as soon as possible. January is simply not an option, with no heat ...

Thanks,

Geoff

On Dec 14, 2015, at 9:20 AM, Jennifer Jett-Bowling <[JJett-Bowling@parkfairfax.info](mailto:JJett-Bowling@parkfairfax.info)> wrote:

Good morning,

Wednesday is the Board Meeting not a Covenants Meeting. You can come to the Board Meeting. However, the Board will direct you to submit the application to the Covenants Committee at their upcoming meeting January 12, 2016. I can put the revised application on January's agenda for the Covenants Committee to review at their meeting January 12, 2016.

*Thank you,*

*Jennifer Jett-Bowling*  
*[jjett-bowling@parkfairfax.info](mailto:jjett-bowling@parkfairfax.info)*

*Covenants Director*  
*Tel: (703) 998-6315 x 107*  
*Fax: (703) 998-8764*  
*3360 Gunston Road*  
*Alexandria, Va. 22302*

**From:** Jim Workman [<mailto:jworkman@selectheatingandcooling.com>]  
**Sent:** Friday, December 11, 2015 4:53 PM  
**To:** Jennifer Jett-Bowling <[JJett-Bowling@parkfairfax.info](mailto:JJett-Bowling@parkfairfax.info)>  
**Subject:** PDF Document burke project options.pdf

Jennifer

Mr. Burke wants me to come to the meeting on Wednesday and he would like to propose 2 options on the front of the building and one hanging off the back of the building.

What do we need to do?

Thank you for the help.

Have a good weekend

Jim Workman

<image001.jpg>

Select Heating and Cooling Corporation

5799L Burke Centre parkway, Burke, VA 22015

703-764-0005

703-991-4442 fax

[www.selectheatingandcooling.com](http://www.selectheatingandcooling.com)

[jworkman@selectheatingandcooling.com](mailto:jworkman@selectheatingandcooling.com)

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Best Pick Reports

Angies List

Home Advisor

Rheem Top Contractor

Fujitsu pro contractor

Rinnai preferred dealer

Regency gas fireplace contractor

Honeywell Contractor

*We have moved,*

*5799L Burke Centre Parkway*

*Burke, VA 22015*

---

# Parkfairfax Condominium

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## UNIT OWNERS ASSOCIATION

3360 GUNSTON ROAD • ALEXANDRIA, VIRGINIA 22302-2198

TELEPHONE (703) 998-6315 FAX (703) 998-8764

### Non-Routine Change Denial

December 9, 2015

Geoffrey Burke  
1516 Mount Eagle Place  
Alexandria, VA 22302

Re: 95505/1516 Mount Eagle Place-Application for Non-Routine Change-HVAC Installation

Dear Mr. Geoffrey Burke,

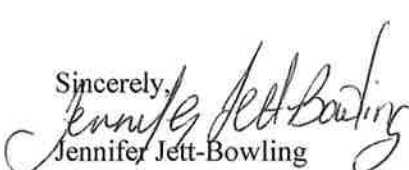
This letter is to inform you that your application to install an HVAC – Split System has been **denied** based on the HVAC unit not being installed in an approved location. Per the Parkfairfax HVAC specifications. A HVAC - Split System unit can only be installed on the ground at the front of the unit, or mounted to the rear of the building for your unit.

The Covenants Committee encourages you to resubmit your request/application. With one of the approved locations that is within the specifications. You have the right to appeal this decision within ten days from the date of this letter.

Enclosed you will find a copy of the original application. Please file this letter and your copy of the application away with your permanent papers. The original application will be kept on file at Parkfairfax for future reference.

If you have any questions or concerns, please do not hesitate to reach out to me at my contact information provided below.

Sincerely,

  
Jennifer Jett-Bowling  
Covenants Director

[jjett-bowling@parkfairfax.info](mailto:jjett-bowling@parkfairfax.info)  
703.998.6315 ext. 107

Enclosure

Cc: Unit file  
Read file  
Enclosure



COVENANTS APPLICATION FOR NON-ROUTINE CHANGES

BY: \_\_\_\_\_

Application No.: \_\_\_\_\_  
(Office use)

GENERAL INFORMATION

Date: 12-01-15 Unit Owner(s): Geoffrey S. Burke Phone#: 703 501 4447  
Building # 955 Unit Address: 1516 Mt. Eagle Place Type: \_\_\_\_\_  
OWNERS ADDRESS (if different from above): \_\_\_\_\_

I WISH TO DO THE FOLLOWING (Please mark the appropriate box)

For the following changes an illustration or detailed description is required.

Install or Replace:	_____	Brick Patio (ask for specifications and indemnification waiver)
	_____	Flagstone Patio (ask for specifications and indemnification waiver)
	_____	Alteration to A/C (ask for specifications and indemnification waiver)
	_____	Wooden Deck (ask for specifications and indemnification waiver)
	_____	Plantings (ask for specifications and indemnification waiver)
	_____	Garden (ask for specifications and indemnification waiver)
	_____	Gate (ask for specifications and indemnification waiver)
	_____	Arbor (ask for specifications and indemnification waiver)
	_____	Trellis (ask for specifications and indemnification waiver)
	_____	Resident Installed Walkways (ask for specifications and indemnification waiver)
	<input checked="" type="checkbox"/>	Central System Packages Split System Electric Heat Pump (ask for specifications and indemnification waiver)
	_____	Brick Modifications (ask for specifications and indemnification waiver)
	_____	Wall Removal Only
	_____	Wall Removal and Electrical Panel Upgrade and or Relocation
	_____	Other: _____

**BY MY SIGNATURE BELOW, I AFFIRM THE FOLLOWING:**

1. The change identified herein and the manner of installation of that change meets all applicable codes and ordinances of the City of Alexandria.
2. I understand maintenance and repair of changes by me is my responsibility and I am obligated for all expenses relating to maintenance and repair.
3. I understand that I am personally liable for all damages and expenses to my unit, other units and/or the common elements resulting from improper installation or failure to properly maintain such changes by me or at my direction.
4. I understand changes are subject to inspection by the Association Management up 30 thirty days after changes are completed.

# Parkfairfax Condominium

## UNIT OWNERS ASSOCIATION

3360 GUNSTON ROAD • ALEXANDRIA, VIRGINIA 22302-2198

TELEPHONE (703) 998-6315 FAX (703) 998-8764

### Non-Routine Change Denial

December 9, 2015

Geoffrey Burke  
1516 Mount Eagle Place  
Alexandria, VA 22302

Re: 95505/1516 Mount Eagle Place Non-Routine Change-HVAC Installation

Dear Mr. Geoffrey Burke:

This letter is to inform you of the decision based on the HVAC unit application submitted based on the HVAC unit specifications. A HVAC unit, or mounted to the

The Covenants Committee has reviewed the application for the proposed location of the HVAC unit at the approved locations that are listed in the Covenants. The decision was made within ten days from the date of the application.

Enclosed you will find a copy of the decision letter and your copy of the application away with your copy of the decision. The decision will be kept on file at Parkfairfax for future reference.

If you have any questions or concerns, please do not hesitate to reach out to me at my contact information provided below.

Sincerely,

Jennifer Jett-Bowling  
Covenants Director

[jjett-bowling@parkfairfax.info](mailto:jjett-bowling@parkfairfax.info)  
703.998.6315 ext. 107

Enclosure

Cc: Unit file  
Read file  
Enclosure

ASK  
MARK/SARAH  
Before sending out

Split System has been denied  
per the Parkfairfax HVAC  
specifications. The unit is to be installed on the ground at the front of the

application. With one of the  
to appeal this decision within

letter and your copy of the  
will be kept on file at



5. I affirm that I am installing/replacing the above items exactly as represented here. I understand that any variation from the above constitutes a violation of the architectural guidelines and automatically voids approval.

6. I understand and agree that no work on this proposed change shall commence without prior written approval of the Covenants Committee.

7. I understand asbestos is present in Parkfairfax units and the common elements. If the change I am proposing requires work which may disturb asbestos, I agree that I must specifically advise the Covenants Committee of the nature and extent of this work in writing prior to commencement of such work. I also agree I will endorse a separate indemnification agreement if such asbestos disturbing work is necessary. I also agree I and my contractor (if appropriate) will abide by all Federal, State and Local ordinances regarding the disturbance and removal of asbestos containing materials and will agree to have air testing conducted at my expense.

Date: 12/1/15 Unit Owner: \_\_\_\_\_

Geoffrey S. Burke

Date: \_\_\_\_\_ Unit Owner: \_\_\_\_\_

=====

Action Taken: \_\_\_\_\_ Approved ☒ Disapproved

\_\_\_\_\_ Deferred \_\_\_\_\_ Acknowledged

\_\_\_\_\_ Preliminary Approval, subject to receipt of City Permit and Inspection

\_\_\_\_\_ Final Approval, copy of City Permit and Inspection received

Stipulations/Conditions: Not in approved location. No  
valid reason for alternate.

Date:

12/8/15

Signature:

[Signature]

Covenants Committee Chair

INDEMNIFICATION AGREEMENT AND COVENANT

THIS INDEMNIFICATION AND COVENANT AGREEMENT is made this 1<sup>ST</sup>  
day of December, 2015, by and between Geoffrey S. Burke  
("OWNER"), and the PARKFAIRFAX CONDOMINIUM UNIT OWNERS  
ASSOCIATION, ("ASSOCIATION").

WITNESSETH:

WHEREAS, Owner is the Unit Owner of condominium Unit No.  
in Parkfairfax Condominium located at 1516 Mt. Eagle Place  
Alexandria, Virginia; AND

WHEREAS, the Association is charged by the Condominium  
Instruments for Parkfairfax Condominium (recorded on February 7,  
1977 in Deed Book 847 at Page 72 among the land records of the  
City of Alexandria, Virginia) with responsibility for maintaining  
the Common Elements of the Condominium and enforcing the  
provisions of the Condominium Instruments; AND

WHEREAS, the Condominium Instruments require the approval of the  
Board of Directors of the Association prior to the making of any  
alterations by the Unit Owner affecting the Common Elements; AND

WHEREAS, Owner wishes to make alterations affecting the common  
Elements and has approval therefore; AND

WHEREAS, The Board of Directors of the Association will not  
approve such alterations in the absence of an indemnification  
against damages and assumption of responsibility by Owner; AND

WHEREAS, In order to induce the Board of Directors of the  
Association to grant such approval owner is willing to indemnify  
the Association and affected Unit Owners and assume  
responsibility for damages.

NOW, THEREFORE, IT IS AGREED AS FOLLOWS:

1. Installation, alteration or removal of Split System Heat Pump  
(specify) must be in accordance with any and all Guide  
Specifications and Exhibits approved by the Board of  
Directors.
2. Owner undertakes, of himself and his heirs, successors and  
assigns, to indemnify and hold harmless the Association and  
any Unit Owner from and against any loss or damage which the  
Association or any Unit Owner may suffer as a consequence of  
such improvements and alterations; including without  
limitations: (i) loss or damage caused by negligence in the  
design, construction or maintenance of such improvements and  
alterations; ii) loss or damage not the result of negligence

but caused by the effect of such improvements and alterations on the structural components previously existing; (iii) expenses and consequential damage caused by or resulting from such improvements and alterations; and, (iv) fees, costs and expenses of any claims or suits arising as a result of such improvements and alterations.

3. Owner undertakes, for himself and his heirs, successors and assigns, to maintain and pay cost of maintaining such improvements and alterations, and all other appurtenant components.
4. Owner hereby warrants that the improvements and alterations have been and will be made in compliance with all applicable requirements of insurance policies covering the condominium and all applicable laws, governmental regulations, ordinances and codes. Owner hereby indemnifies the Association and any Unit Owner from and against any loss or damage attributable to the incorrectness of such warranty. Further, Owner hereby agrees to pay any increase in the cost of insurance coverage occasioned by the construction or maintenance of the improvements and alterations.
5. The approval by the Board of Directors of the Improvements and alterations set forth in paragraph 1 above does not constitute approval of any other improvements and alterations made without obtaining the express prior written approval of the Board of Directors pursuant to the provisions of the Condominium instruments and the procedures of the Board of Directors.
6. The parties agree that this Indemnification Agreement and Covenant shall be filed in the unit file at the Association office, and shall operate as a covenant running with the land, forevermore encumbering the condominium unit and binding Owner's heirs, successors and assigns, including without limitation all future owners of the condominium unit.
7. Wherever used herein the singular shall include the plural, the plural the singular, and the use of any gender shall include all genders, as context may require.

IN WITNESS WHEREOF, The parties have executed this instrument as of the date first written above.

OWNER

Geoffrey S. Burke

STATE OF VIRGINIA     )  
                                  )  
CITY OF ALEXANDRIA    )

ss

I, the undersigned, a Notary Public in and for the State and City aforesaid, do hereby certify that Geoffrey S. Burke, whose names are signed to the foregoing instrument bearing date on the 1<sup>st</sup> day of December, 20 15, have acknowledged the same before me in the aforesaid jurisdiction to be their act and deed.

GIVEN under my hand and seal this 1<sup>st</sup> day of December 20 15.

R. Schlosberg (seal)  
NOTARY PUBLIC

My commission expires:

3/31/2018



IN WITNESS WHEREOF, The parties have executed this instrument as of the date first written above.

PARKFAIRFAX CONDOMINIUM UNIT  
OWNERS ASSOCIATION:

BY: \_\_\_\_\_  
PRESIDENT

STATE OF VIRGINIA    )  
                          )    ss  
CITY OF ALEXANDRIA    )

I, the undersigned, a Notary Public in and for the State and City aforesaid, do hereby certify that \_\_\_\_\_, President of Parkfairfax Condominium Unit Owners Association, whose name is signed to the foregoing instrument bearing date on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, has acknowledged the same before me in the foresaid jurisdiction on behalf of the Association.

GIVEN under my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC (seal)

My commission expires:

\_\_\_\_\_



**City of Alexandria, Virginia**  
Office of Real Estate Assessments

301 King Street, City Hall, Room 2600  
Alexandria, VA 22314  
Tel: 703.746.4646  
Fax: 703.706.3979  
realestate@alexandriava.gov

**Detailed Property Description**

1516 MOUNT EAGLE PL,  
ALEXANDRIA, VA

Account Number: 50219630

Map-Block-Lot Number: 013.02-0A-955.1516

Primary Property Class: CONDO (GARDEN) (130)

Study Group: 0766

**General Information & Description**

Owner Name:

Mailing Address:

BURKE GEOFFREY

1516 MOUNT EAGLE PL  
ALEXANDRIA VA 22302

Census Tract: 2010.00

Census Block:

Legal Description:

UNIT 955-1516 PARKFAIRFAX

[Explore in Parcel Viewer](#)

**Assessment Information**

Tax Status: TAXABLE

Assessment Date	Land Value	Building Value	Total Value
01/2015	\$100,445	\$206,048	\$306,493
01/2014	\$100,445	\$198,123	\$298,568
01/2013	\$100,445	\$195,121	\$295,566
01/2012	\$105,732	\$200,949	\$306,681
01/2011	\$105,732	\$200,949	\$306,681
01/2010	\$105,732	\$204,055	\$309,787
01/2009	\$108,707	\$210,366	\$319,073
01/2008	\$108,707	\$214,659	\$323,366
01/2007	\$105,369	\$231,290	\$336,659
01/2006	\$113,300	\$248,700	\$362,000
01/2005	\$80,900	\$222,700	\$303,600
01/2004	\$67,400	\$169,700	\$237,100
01/2003	\$44,900	\$144,500	\$189,400
01/2002	\$27,200	\$106,900	\$134,100
01/2001	\$25,900	\$84,000	\$109,900
01/2000	\$25,900	\$70,400	\$96,300

**Sales Information**

Sale Date	Sale Price	Grantor	Sale Code	Sale Ref. ID
08/28/2015	\$315,900	TRAHOS NORMAN M OR VICTORIA J	A	150014856
07/22/2013	\$300,000	ZIEGLER CHARLES P AND JANET TRS	A	130017597
06/23/2006	\$0	ZIEGLER LINDA J AND VICTORIA J	J	060017454

11/21/2002 \$222,900  
01/13/1998 \$104,000  
10/21/1978 \$35,000

CARY LIZA MARIE

A 020038335  
A 1626-393  
A 0918-612

**Land Description**

**Lot Size (Sq. Ft.):** 0

**Zoning:** RB

**Building Description**

**Year Built:** 1941

**Construction Quality:** VERY GOOD

**Building Condition:** GOOD

**HVAC:** ELECTRIC BASEBOARD

**Building Type:** CONDO <= 3 STORIES

**Unit Size (Sq. Ft.):** 930

**Full Baths:** 1

**Half Baths:** 0

**Bedrooms:** 0

**Parking Spaces:** 0

There may be additional data for this property; contact Office of Real Estate Assessments for more information.

**NOTE: Building area is above grade and does not include basement area.**

Document generated for printing on 11/30/2015.

11/30/15, 8:17 PM

## **Select Heating And Cooling Corporation**

5799L Burke Center Parkway

Burke VA 22015

703.764.0005



## **Proposal**

**DATE :** 11/6/2015

Jeff Burke  
1525 Mt. Eagle Place  
Alexandria, VA 22302.

Job Address:  
Same

### ***We are pleased to submit the following cost estimate:***

Fujitsu heat pump duct less mini split outdoor unit, 24000 BTU M#AOU24RLFZ

3 indoor wall mount units, 2-9000 BTU and 1-7000 BTU M#ASU9RLS M#ASU7RLS

Copper line set with rubber tex pipe insulation, pipes will be in the wall, drain line,  
copper wiring, and 3 temperature remote controls.

Complete installation

Total installed price \$ 10,100.00

For placing the outdoor unit in the front of the building.

If we can put the outdoor unit on the back of the building you can deduct \$1000

### **Additional cost, Permit: I will need electrical, building and mechanical \$1100**

*This includes all of the paper work that I need to submit for the permit*

### **Warranty**

5 year parts and labor warranty (Annual inspections required)

7 Year compressor warranty

### **Patching and painting around \$2000**

We will have a contractor come in to patch the walls and paint (color match as close as possible)

*If you would like to contract directly with the contractor below is his information, he is very familiar with these projects.*

*Martier Hernandez Capital builders group 703-622-1054*

This includes cutting the drywall/plaster and inclosing the piping as much as possible.

We may have box in some piping in the corner of the room upstairs.

Not included: Painting the outdoor unit as required by the association

### **Payment Terms:**

40% due at the start of work the balance is due upon completion.

Acceptance of proposal ☒ date \_\_\_\_\_

**Thank You** **Jim Workman**



**From:** Jim Workman [mailto:jworkman@selectheatingandcooling.com]

**Sent:** Thursday, December 03, 2015 4:14 PM

**To:** Jennifer Jett-Bowling <JJett-Bowling@parkfairfax.info>

**Subject:** Burke Project.

- Select Agrees to paint all exterior units, conduit, and electrical disconnect box paint to match the color of the building. Paint shall be purchased at the onsite Park Fairfax office.
- Outdoor unit will set on a preformed concrete composite pad
- To clean the Fujitsu condensate line, it can be cleaned by removing the front cover and use a funnel to pour a Clorox and water mix into the opening. This is a proposed method of cleaning the indoor unit.
- The maximum electrical load will not exceed the maximum load of the panel.

Jim Workman



Select Heating and Cooling Corporation  
5799L Burke Centre parkway, Burke, VA 22015

703-764-0005

703-991-4442 fax

[www.selectheatingandcooling.com](http://www.selectheatingandcooling.com)

[jworkman@selectheatingandcooling.com](mailto:jworkman@selectheatingandcooling.com)

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Regency gas fireplace contractor

Honeywell Contractor

*We have moved,*

*5799L Burke Centre Parkway*

*Burke, VA 22015*



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/11/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Jack Braddon Insurance Agency Ltd 5201B LYNATE CT 703-425-4666 BURKE VA 22015-1632		<b>CONTACT</b> NAME: PHONE (A/C, No, Ext): E-MAIL: ADDRESS: <b>INSURER(S) AFFORDING COVERAGE</b> INSURER A : NATIONWIDE MUTUAL INSURANCE COMPANY NAIC # 23787 INSURER B : NATIONWIDE MUTUAL FIRE INSURANCE COMP/ NAIC # 23779 INSURER C : KEY RISK INSURANCE COMPANY NAIC # 00000 INSURER D : INSURER E : INSURER F :	
<b>INSURED</b> SELECT HEATING AND COOLING INC 5799 BURKE CENTRE PKWY STE L BURKE VA 22015-2262			

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			ACP GLO 2464070719	07/17/2015	07/17/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			ACP BA 2464070719	07/17/2015	07/17/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> CLAIMS-MADE DED RETENTION \$			ACP CAF 2464070719	07/17/2015	07/17/2016	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$ PER STATUTE OTH-ER
C	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N	N/A	7905305114	10/14/2015	10/14/2016	E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Commercial Personal Property-Replacement Cost			ACP CPP 2464070719	07/17/2015	07/17/2016	Pers Prop Limit 28,200

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Full Workers Comp Policy#: 790000508004114  
Umbrella Follows Form.

**CERTIFICATE HOLDER****CANCELLATION**

Jeff Burke 1516 Mount Eagle Ct. Alexandria VA 22301	<b>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</b>  <b>AUTHORIZED REPRESENTATIVE</b> J Braddon
---	--

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**DEPARTMENT OF PROFESSIONAL AND OCCUPATIONAL REGULATION  
COMMONWEALTH OF VIRGINIA**

EXPIRES ON  
07-31-2017

9980 Mayland Dr., Suite 400, Richmond, VA 23233  
Telephone: (804) 367-8500

NUMBER  
2705130017

**BOARD FOR CONTRACTORS  
CLASS B CONTRACTOR  
INVALID ON JOBS \$120,000 OR MORE  
\*CLASSIFICATIONS\* GFC HVA PLB**

**SELECT HEATING AND COOLING CORP  
9108 BLUE JUG LANDING  
BURKE, VA 22015**



*John W. DeBoer*  
John W. DeBoer, Director

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(SEE REVERSE SIDE FOR NAME AND/OR ADDRESS CHANGE)

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**COMMONWEALTH OF VIRGINIA  
CLASS B BOARD FOR CONTRACTORS  
CONTRACTOR**

**\*CLASSIFICATIONS\* GFC HVA PLB  
NUMBER: 2705130017 EXPIRES: 07-31-2017**

**SELECT HEATING AND COOLING CORP  
9108 BLUE JUG LANDING  
BURKE, VA 22015**



(DETACH HERE)

**DEPARTMENT OF PROFESSIONAL AND OCCUPATIONAL REGULATION  
9980 Mayland Dr., Suite 400, Richmond, VA 23233**

ALTERATION OF THIS DOCUMENT, USE AFTER EXPIRATION, OR USE BY PERSONS OR FIRMS OTHER THAN THOSE NAMED MAY RESULT IN CRIMINAL PROSECUTION UNDER THE CODE OF VIRGINIA.

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Products

Find a Contractor

Learn About It

Service & Support



**Products**

**WALL MOUNTED**

- Wall Mounted
- Universal Floor / Ceiling
- Large Ceiling
- Slim Duct
- Compact Cassette
- Cassette

**MULTI-ZONE**

- Multi Zone (2 to 4 Zones)
- Flex Zone (2 to 8 Zones)

Locate A Contractor

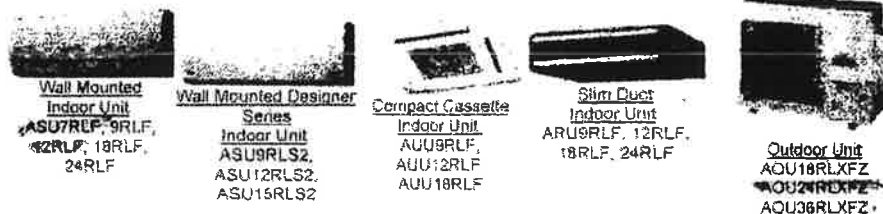


Download the Multi-Zone Brochure (2 - 4 Zones)



Products > Halcyon Hybrid Flex Inverter

**Halcyon Hybrid Flex Inverter - 2 to 4 Zone Models**



Outdoor models AOU18RLXFZ, AOU24RLXFZ and AOU36RLXFZ allow you to connect 2 to 4 indoor units, depending on the outdoor unit selected. These systems provide both heating and cooling for year-round comfort. Choose from three indoor unit styles - wall mounted, cassette and slim duct - to best match your decor. Create the right combinations, the right quantity, the right style indoor units, and the right capacity. It's the right choice for your home or business.

Ask Fujitsu

Need Pricing?  
Contact a local contractor.



**Wall Mounted RLF Series  
Wall Mounted Designer Series  
Compact Cassette  
Slim Duct**

**Wall Mounted RLF Series Specifications**

SYSTEM	ASU7RLF	ASU9RLF	ASU12RLF	ASU18RLF	ASU24RLF
Cooling BTU/h	7000	9000	12000	18000	24000
Outdoor Design Temp	95/75	95/75	95/75	95/75	95/75
Heating BTU/h	8100	10200	13500	20000	27000
Outdoor Design Temp	47/43	47/43	47/43	47/43	47/43
SEER*	17	17	17	17	17
HSPF*	9.8	9.8	9.8	9.8	9.8
EER Clg/Htg*	9.25	9.25	9.25	9.25	9.25
Power Supply (V)	208-230	208-230	208-230	208-230	208-230
Noise Level db (A) Cooling					
Hi	36	37	40	43	49
Med	32	33	36	37	42
Lo	29	29	30	33	37

*Handwritten notes:*  
2- 12000 BTU wall mount  
1- 12000 BTU slim duct

Noise Level db (A) Heating					
Hi	36	37	40	44	48
Med	32	33	36	37	42
Lo	29	29	31	33	37
Weight (lbs.)	18	18	18	31	31

#### Wall Mounted Designer Series Specifications

SYSTEM	9RLS2	12RLS2	15RLS2
<b>CAPACITIES:</b>			
Cooling BTU/h	9,000	12,000	14,000
Outdoor Design Temp F DB/WB	95/75	95/75	95/75
Heating BTU/h	10,200	13,500	16,300
Outdoor Design Temp F DB/WB	47/43	47/43	47/43
Power Supply (V)	208-230	208-230	208-230
Noise Level db (A) Cooling			
Hi	36	37	41
Med	32	34	36
Lo	28	31	33
Quiet	21	21	25
Noise Level db (A) Heating			
Hi	36	37	41
Med	32	34	36
Lo	28	31	33
Quiet	21	21	25
Weight (lbs.)	21	21	21

#### Compact Cassette Specifications

SYSTEM	AU17RLF	AU19RLF	AU12RLF
Cooling BTU/h	9000	12000	18000
Outdoor Design Temp	95/75	95/75	95/75
Heating BTU/h	10,200	13,500	20,000
Outdoor Design Temp	47/43	47/43	47/43
SEER *	17	17	17
HSPF *	9.8	9.8	9.8
EER Clg/Htg *	9.25	9.25	9.25
Power Supply (V)	208-230	208-230	208-230
Noise Level db (A) Cooling			
Hi	33	37	42
Med	31	33	37
Lo	29	31	33
Noise Level db (A) Heating			
Hi	34	37	44
Med	32	33	40
Lo	29	31	37
Weight (lbs.)	33	33	33

#### Slim Duct Specifications

SYSTEM	ARU9RLF	ARU12RLF	ARU18RLF	ARU24RLF
Cooling BTU/h	9000	12000	18000	24000
Outdoor Design Temp	95/75	95/75	95/75	95/75
Heating BTU/h	10200	13500	20000	27000
Outdoor Design Temp	47/43	47/43	47/43	47/43
SEER *	14.7	14.7	14.7	14.7
HSPF *	9.3	9.3	9.3	9.3
EER Clg/Htg *	8.7	8.7	8.7	8.7
Power Supply (V)	208-230	208-230	208-230	208-230
Noise Level db (A) Cooling				

**From:** Jim Workman [mailto:jworkman@selectheatingandcooling.com]  
**Sent:** Thursday, December 04, 2015 10:10 AM  
**To:** Jennifer Jett-Bowling <JJett-Bowling@parkfairfax.info>  
**Subject:** Burke Project.

The electrical scope.

The election will install a 220 volt 20-amp circuit from the panel box to the outside disconnect and then to the outdoor unit, the indoor units are powered by the outdoor unit each indoor unit will have a 220 volt switch as per code to disconnect power if needed while servicing. .  
All wiring will use the same path as the line sets.

The maximum electrical load will not exceed the maximum load of the panel.

Jim Workman



Select Heating and Cooling Corporation  
5799L Burke Centre parkway, Burke, VA 22015  
703-764-0005  
703-991-4442 fax  
[www.selectheatingandcooling.com](http://www.selectheatingandcooling.com)  
[jworkman@selectheatingandcooling.com](mailto:jworkman@selectheatingandcooling.com)

***Now offering special pricing on our plumbing services***

Please like us in facebook @ <https://www.facebook.com/Selectva>  
Follow us on twitter @ <https://twitter.com/selecthvac>

BBB Accredited business  
BNI NOVA member  
Best Pick Reports  
Angies List  
Home Advisor  
Rheem Top Contractor

Fujitsu pro contractor  
Rinnai preferred dealer  
Regency gas fireplace contractor  
Honeywell Contractor

*We have moved,  
5799L Burke Centre Parkway  
Burke, VA 22015*



# CERTIFICATE OF INSURANCE

— THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY —

DATE ISSUED (MM/DD/YY)  
12/2/15

Home Office • 100 Erie Insurance Place • Erie, Pennsylvania 16530 • 814.870.2000  
Toll free 1.800.458.0811 • Fax 814.870.3126 • www.erieinsurance.com

NAME AND ADDRESS OF AGENCY BRIDGE FIRST FINANCIAL INC 1727 KING ST STE 300 ALEXANDRIA, VA 22314-2761  (571)249-3857		AGENT'S NO. DD3060	COMPANY(IES) AFFORDING COVERAGE Co.: C ERIE INSURANCE COMPANY Co.: D ERIE INSURANCE PROPERTY & CASUALTY COMPANY Co.: E ERIE INSURANCE EXCHANGE (Not Applicable) Erie Indemnity Co., Attorney-in-Fact in NY Co.: F ERIE INSURANCE COMPANY OF NEW YORK Co.: G FLAGSHIP CITY INSURANCE COMPANY	
NAME AND ADDRESS OF NAMED INSURED  Anderson Electrical Services 4196 Merchant Plaza Woodbridge, VA 22192		This certificate is issued for information purposes only and confers no rights on the certificate holder. It does not affirmatively or negatively amend, extend, or otherwise alter the terms, exclusions and conditions of insurance coverage contained in the policy(ies) indicated below. The terms and conditions of the policy(ies) govern the insurance coverage as applied to any given situation. Limits shown may have been reduced by claims paid. This certificate of insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer and the certificate holder.		
This is to certify that policies, as indicated by the Policy Number below, are in force for the Named Insured at the time that the Certificate is being issued.				
CO. (Add'l LTRs to)	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)
E	<input checked="" type="checkbox"/> <b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR  <input type="checkbox"/> <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Q26 1121073	2/11/15	2/11/16
		LIMITS		
		EACH OCCURRENCE \$ 1,000,000		
		FIRE DAMAGE (Any One Fire) \$ 1,000,000		
		MED EXP (Any One Person) \$ 5,000		
		PERSONAL & ADV. INJURY \$ 1,000,000		
		GENERAL AGGREGATE \$ 2,000,000		
		PRODUCTS-COMP/OP AGG \$ 2,000,000		
<input type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> "ANY AUTO" (OWNED, HIRED, NON-OWNED) <input type="checkbox"/> OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> NON-OWNED <input type="checkbox"/> GARAGE				
		BODILY INJURY (EACH PERSON) \$		
		BODILY INJURY (EACH ACCIDENT) \$		
		PROPERTY DAMAGE \$		
		BODILY INJURY AND PROPERTY DAMAGE COMBINED \$		
<input type="checkbox"/> <b>EXCESS LIABILITY</b> <input type="checkbox"/> OCCURRENCE  <input type="checkbox"/> RETENTION \$				
		EACH OCCURRENCE \$		
		AGGREGATE \$		
		\$		
		\$		
		\$		
<input type="checkbox"/> <b>WORKERS COMPENSATION &amp; EMPLOYERS LIABILITY</b>				
		STATUTORY		
		BODILY INJURY BY	ACCIDENT \$ DISEASE \$ DISEASE \$	EACH ACCIDENT POLICY LIMIT EACH EMPLOYEE
<input type="checkbox"/> <b>OTHER</b>				
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS				

**CANCELLATION:** SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

**NAME AND ADDRESS OF CERTIFICATE HOLDER**

Anderson Electrical Services  
4196 Merchant Plaza  
Woodbridge, VA 22192

AUTHORIZED REPRESENTATIVE

*Jack M. Cordery*

**DEPARTMENT OF PROFESSIONAL AND OCCUPATIONAL REGULATION  
COMMONWEALTH OF VIRGINIA**

**EXPIRES ON  
05-31-2015**

**9900 Mayland Dr., Suite 400, Richmond, VA 23233  
Telephone: (804) 367-8500**

**NUMBER  
2705140746**

**BOARD FOR CONTRACTORS  
CLASS B CONTRACTOR  
INVALID ON JOBS \$120,000 OR MORE  
"CLASSIFICATIONS" ELE ESC FAS**

**ANDERSON ELECTRICAL SERVICES, LLC  
4196 MERCHANT PLAZA  
WOODBIDGE, VA 22192**



*Gordon N. Dixon*  
Gordon N. Dixon, Dir

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**(SEE REVERSE SIDE FOR NAME AND/OR ADDRESS CHANGE)**

**POCKET CARD**

**COMMONWEALTH OF VIRGINIA  
CLASS B BOARD FOR CONTRACTORS  
CONTRACTOR**

**"CLASSIFICATIONS" ELE ESC FAS  
NUMBER: 2705140746 EXPIRES: 05-31-2015**

**ANDERSON ELECTRICAL SERVICES, LLC  
4196 MERCHANT PLAZA  
WOODBIDGE, VA 22192**



**(FOLD)**

**(DETACH HERE)**

**DEPARTMENT OF PROFESSIONAL AND OCCUPATIONAL REGULATION  
9900 Mayland Dr., Suite 400, Richmond, VA 23233**

ALTERATION OF THIS DOCUMENT, USE AFTER EXPIRATION, OR USE BY PERSONS OR FIRMS OTHER THAN THOSE NAMED MAY RESULT IN CRIMINAL PROSECUTION UNDER THE CODE OF VIRGINIA.

1001C





Historic Masonry Restoration  
*Residential & Commercial*

December 1, 2015

Mr. Geoff Burke  
1516 Mt. Eagle Place  
Alexandria, VA 22302

RE: 1516 Mt. Eagle Place:  
Masonry Infill

Dear Mr. Burke:

Dominion Restoration, LLC proposes to perform the following scope of work for the sum of \$2,500.00 (two thousand five hundred dollars and no cents):

1. Install CMU back-up wall in 2ea. second floor penetrations and 1ea. first floor penetration left by the removal of HVAC units.
2. Tooth-in new brick per Parkfairfax specifications.

<b>Grand Total</b>	<u><b>\$2,500.00</b></u>
--------------------	--------------------------

Alt. If 3ea. HVAC units are to be disposed of ADD

<u>225.00</u>
---------------

Any revisions required at a later date will be subject to a price review and will only be executed upon written orders signed by all parties. The workmanship is guaranteed for one year after completion of the project, during which time any imperfections which may develop will be made good without cost to the owner. The warranty for materials shall be the responsibility of the manufacturer. Any delay caused by events beyond the control of Dominion Restoration, LLC shall not constitute abandonment and are not included in calculating time frames for payment or performance. This proposal is firm for 90 days and then automatically expires.

Please do not hesitate to contact us should you require further information.

Sincerely Yours,  
**Dominion Restoration, LLC**

Accepted,

By: Mariana Vonder Born  
Co-Owner

By: \_\_\_\_\_  
Name:



**Erie Insurance**

# CERTIFICATE OF INSURANCE

— THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY —

DATE ISSUED (MM/DD/YY)

8/31/15

Home Office • 100 Erie Insurance Place • Erie, Pennsylvania 16530 • 814.870.2000  
Toll free 1.800.458.0811 • Fax 814.870.3126 • www.erieinsurance.com

NAME AND ADDRESS OF AGENCY <b>ARONOW INSURANCE AGENCY INC</b> 3416 OLANDWOOD CT STE 209 OLNEY, MD 20832-1373  (301)774-0175		AGENT'S NO. BB1760		Co.: C ERIE INSURANCE COMPANY Co.: D ERIE INSURANCE PROPERTY & CASUALTY COMPANY Co.: E ERIE INSURANCE EXCHANGE (Not Applicable) Erie Indemnity Co., Attorney-in-Fact In NY Co.: F ERIE INSURANCE COMPANY OF NEW YORK Co.: G FLAGSHIP CITY INSURANCE COMPANY	
NAME AND ADDRESS OF NAMED INSURED  <b>Capitol Builders Group, Inc.</b> 5613 Leesburg Pike Suite 32 Falls Church, VA 22041				This certificate is issued for information purposes only and confers no rights on the certificate holder. It does not affirmatively or negatively amend, extend, or otherwise alter the terms, exclusions and conditions of insurance coverage contained in the policy(ies) indicated below. The terms and conditions of the policy(ies) govern the insurance coverage as applied to any given situation. Limits shown may have been reduced by claims paid. This certificate of insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer and the certificate holder.	
This is to certify that policies, as indicated by the Policy Number below, are in force for the Named Insured at the time that the Certificate is being issued.					
CA 0022 OR 0023	TYPE OF INSURANCE	POLICY NUMBER	DATE EFFECTIVE	DATE EXPIRATION	LIMITS
<input checked="" type="checkbox"/>	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Q33 0121969	9/1/15	9/1/16	EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (per occurrence) \$ 1,000,000 MED EXP (per day/acc) \$ 5,000 PERSONAL AND ADJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
<input type="checkbox"/>	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> "ANY AUTO" (OWNED, HIRED, NON-OWNED) <input type="checkbox"/> OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> NON-OWNED <input type="checkbox"/> GARAGE				BODILY INJURY (each person) \$ BODILY INJURY (each accident) \$ PROPERTY DAMAGE \$ BODILY INJURY AND PROPERTY DAMAGE (combined) \$ EACH OCCURRENCE \$ AGGREGATE \$ \$
<input type="checkbox"/>	<b>EXCESS LIABILITY</b> <input type="checkbox"/> OCCURRENCE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$
<input type="checkbox"/>	<b>WORKERS COMPENSATION &amp; EMPLOYERS LIABILITY</b>				ACCIDENT \$ EACH ACCIDENT DISEASE \$ POLICY LIMIT DISEASE \$ EACH EMPLOYEE
<input checked="" type="checkbox"/>	OTHER BPP	Q33 0121969	9/1/15	9/1/16	\$8,000
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS Certificate holder is additional insured.					

**CANCELLATION:** SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

NAME AND ADDRESS OF CERTIFICATE HOLDER	AUTHORIZED REPRESENTATIVE 
--	-------------------------------

*Keep this letter for your records.*

## City of Alexandria Business License

Revenue Administration Division, City of Alexandria, 301 King Street, Room 1700, Alexandria, VA 22314



**License Number:** 135333-2015  
**Account Number:** 135333  
**Tax Period:** 2015  
**Business Name:** CAPITOL BUILDERS GROUP INC  
**Trade Name:** CAPITOL BUILDERS GROUP INC  
**Business Location:** No City Address  
FALLS CHURCH, VA 22041

This license has been issued by the Revenue Administration Division of the City of Alexandria and is granted to:

CAPITOL BUILDERS GROUP INC  
No City Address  
FALLS CHURCH, VA 22041

**License Classification(s):** Reciprocity Contractor  
1-111-111  
Reciprocity Contractor

# HART, CALLEY, GIBBS & KARP, P.C.

ATTORNEYS AND COUNSELLORS AT LAW

307 NORTH WASHINGTON STREET  
ALEXANDRIA, VIRGINIA 22314-2557

TELEPHONE (703) 836-5757

FAX (703) 548-5443

hcgk.law@verizon.net

HARRY P. HART  
MARY CATHERINE H. GIBBS  
HERBERT L. KARP

OF COUNSEL  
CONSTANCE H. PIERCE

RETIRED  
CYRIL D. CALLEY, 2005

LURAY OFFICE:

170 KIBLER DRIVE  
LURAY, VA 22835

TELEPHONE: 540-743-2922

FAX: 540-743-2422

April 22, 2014

Mr. Peter Leiberg, Zoning Manager  
Department of Planning and Zoning  
City Hall, Room 2100  
Alexandria, VA 22314

Re: Parkfairfax – Ground Mounted AC Condenser Units

Dear Mr. Leiberg,

Based on our discussions and emails, I'm writing this letter to memorialize the solution we agreed to regarding the installation of the majority of ground level air conditioning units at Parkfairfax. Any ground level unit that will be installed at the front of any unit (ie., where the unit's front door is located) cannot project beyond any front stoop that is open or covered. Placement of shrubs to screen the units will be required. Any ground level unit (condenser, etc.) that will be installed adjacent to a rear or side wall of a condominium building is considered appropriate. When Parkfairfax representatives or their mechanical contractor file for permits to install the units, they will be instructed to ask for you since you are aware of the topic and will expedite the matter in Planning.

As for the remaining units where the ground level air conditioning units may be installed at the front of a unit that does not have a front stoop, that may require additional approvals beyond the Staff level which will need to be determined on a case by case basis. Those units may require variance approval by the Board of Zoning Appeals or possibly a minor amendment that is handled administratively by staff or by major amendment to the site plan that requires a hearing before the Planning Commission. Staff realizes that Parkfairfax was constructed prior to the site plan process but was approved under the Community Unit Plan (CUP) process which is no longer in effect.

Construction drawings submitted must be in full conformance with all plans approved by the Planning Commission, Board of Zoning Appeals and the Board of Architectural Review. Planning and Zoning Department approval of a building permit does not constitute approval of any changes, additions or amendments to such plans unless they are specifically identified by the applicant and approved by the City.

N

- B.L. - BEVERLEY DRIVE
- F.L. - CORYELL LANE
- G.P. - FITZGERALD LANE
- A.R. - GREENWAY PLACE
- L. - GUNSTON ROAD
- H. - HOLMES LANE
- C. - LYONS LANE
- C. - MARTHA CUSTIS DRIVE
- M.E. - MOUNT EAGLE PLACE
- P.R. - PRESTON ROAD
- G.L. - QUAKER LANE
- R.A. - RAVENSWORTH PLACE
- R.P. - RIPON PLACE
- V.D. - VALLEY DRIVE
- M.R. - WELLINGTON ROAD





# City of Alexandria, Virginia



Department of Code Administration  
301 King Street, Suite 4200  
Alexandria, Virginia 22314  
email: [permit.center@alexandriava.gov](mailto:permit.center@alexandriava.gov)

## MECHANICAL PERMIT

Case Number: MEC2015-01050 Issued: 12/01/2015 Expires: 06/01/2016

MASTER BUILDING PERMIT NUMBER: BLD2015-02404

PARCEL RESTRICTIONS:  
Marine Clay Soil

Project Address: 1516 MOUNT EAGLE PL 955

Project Name: MINI SPLIT

Project Description:

INSTALL DUCTLESS MINI SPLIT

### Project Details:

CODE EDITION: 2012

USE GROUPS: R-2 Residential, apartment/condo units,

CONSTR TYPE: 5A Building Elmts Combustible or Non-combustible

OCCUPANT LOAD: N/A

### OWNER INFORMATION:

GEOFFREY BURKE

1516 MOUNT EAGLE PL

ALEXANDRIA VA 22302

### BUILDING AREA:

GROSS < 3000 sf

ALTERED: N/A sf

NEW N/A sf

### EST. CONSTRUCTION COST:

\$5,000

### CATEGORIES OF WORK:

Alteration

### FEES:

ALTER, REPAIR, RECONST, SPEC ITEM	\$97.50
Admin - Alt, Rpr, Recon, Spec	\$13.65
InfoTech- Alt, Rpr, Recon, Spec	\$4.88
PermCtr- Alt, Rpr, Recon, Spec	\$10.73
Training - Alt, Rpr, Recon, Spec	\$0.20
VA Tng - Alt, Rpr, Recon, Spec	\$1.95
<b>Total:</b>	<b>\$128.91</b>

### CONTRACTOR INFORMATION:

JIM R SELECT HEATING AND COOLING

5795G BURKE CENTRE PARKWAY

BURKE VA 22015

### Contact Information:

Primary Phone: N/A

### License Information:

License Type: Contractor, Class B

License Number: 2705130017

License Exp. Date: 07/31/2017

### Prohibited Hours of Construction:

Day	Before	After
Mon-Fri	7 a.m.	6 p.m.
Saturday	9 a.m.	6 p.m.
Sunday	All hours	

Holidays per 11-5-5(a)5(a)\* All Hours

\* Section 11-5-5 (a)5(a) defines holidays as

January 1st, Memorial Day, July 4th, Labor Day,

Thanksgiving Day, Christmas Day.

BUILDING OFFICIAL: GREGG FIELDS

Please visit the Online Alexandria Permit Center at [permits.alexandriava.gov](http://permits.alexandriava.gov) to apply for additional permits.

RIGHT IS RESERVED TO INSPECT WORK AUTHORIZED BY THIS PERMIT AS OFTEN AS NECESSARY TO DETERMINE COMPLIANCE WITH THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE. AUTHORIZATION TO ALTER, USE, OR CROSS PUBLIC SIDEWALKS, CURBS, OR OTHER PUBLIC SPACES MUST BE OBTAINED FROM THE DEPARTMENT OF TRANSPORTATION AND ENVIRONMENTAL SERVICES. THIS PERMIT EXPIRES IF WORK IS NOT STARTED OR IF WORK IS ABANDONED FOR SIX MONTHS. ONE & TWO-FAMILY DWELLING CONSTRUCTION PERMITS, INCLUDING NEW DWELLINGS, ADDITIONS, ALTERATIONS, AND/OR ACCESSORY STRUCTURES, MUST BE COMPLETED WITHIN THREE YEARS OF PERMIT ISSUANCE. IF WORK WILL BE PERFORMED WITHIN 15 FEET OF OVERHEAD ELECTRICAL WIRES, PERMITTEE MUST OBTAIN ASSISTANCE FROM THE VIRGINIA POWER OFFICE. CALL 703.934.9660. THIS PERMIT MUST BE POSTED ON THE WORK SITE AND VISIBLE FROM THE PUBLIC WAY UNTIL THE WORK RECEIVES AN APPROVED FINAL INSPECTION.

PLEASE CALL 703.838.4900 TO SCHEDULE OR CANCEL INSPECTIONS AND OBTAIN INSPECTION RESULTS 24 HOURS A DAY.

Please fill out our Customer Service Survey at

[<http://alexandriava.gov/Code>](http://alexandriava.gov/Code)

Permits for One and Two Family Dwelling, including new dwellings, additions, alterations and/or accessory structures, must be completed within 3 years of the permit issue date.

1110	CA STOP WORK ORDERS	None	MET	AUTO 12/1/2015 BTCH
	Work started without benefit of required permits or that exceed the scope of issued permits may be subject to STOP WORK ORDERS. Work must remain stopped until permits are obtained/amended and applicable fees paid.			
11	CA WALL CHECK SURVEY	None	MET	AUTO 12/1/2015 BTCH
	A Wall Check Survey may be required after the foundation or first floor walls are in place. Wall check surveys shall be submitted to the Permit Center. Work that proceeds without an approved Wall check Survey is at the owner's risk and may be required to be removed or relocated.			
1130	CA RODENT CONTROL MEASURES	None	MET	AUTO 12/1/2015 BTCH
	Approved rodent control/abatement measures must be in place 7 days before site disturbance begins and must remain in place until exterior work is complete. Site and dumpsters must be clean and secure at the end of each work day to prevent rodent harborage and the accumulation of loose trash.			
1140	CA TRADE PERMITS	None	MET	AUTO 12/1/2015 BTCH
	Separate trade permits and inspections required - Plumbing, Electrical and Mechanical.			
1150	CA ELEVATOR PERMITS	None	MET	AUTO 12/1/2015 BTCH
	Separate permits and inspections required for elevators, escalators, dumb waiters, chair lifts, and elevating equipment such as motorized masonry scaffolding.			
1160	CA FPS PERMITS	None	MET	AUTO 12/1/2015 BTCH
	Separate permits required for fire alarm, fire detection, fire suppression, access control, and fire sprinkler systems. A Knox Box is required to be installed in buildings where any fire alarm, fire detection, fire suppression or sprinkler systems are installed. The Alexandria Department of Communications must be notified in advance whenever a fire protection system is taken out of service for any reason - 703.838-4660.			
1170	CA CERTIFICATE OF OCCUPANCY	None	MET	AUTO 12/1/2015 BTCH
	An issued Certificate of Occupancy (CO) is required before occupancy. When applicable, a height survey must be approved by Planning & Zoning before a CO is considered. Please allow a minimum of 3-5 work-days when scheduling CO inspections 703.746.4200. When planning for Grand Opening Events, please allow sufficient time for the CO and Business License process - 703.746.3914 or 3903.			
1180	CA FPP STORAGE	None	MET	AUTO 12/1/2015 BTCH
	A Fire Prevention Code Permit is required for storage of chemicals.			
1190	CA FPP ASSEMBLY	None	MET	AUTO 12/1/2015 BTCH
	A Fire Prevention Code Permit is required for Assembly Uses. Assembly permits are not the same as a Certificate of Occupancy.			
1200	CA SPECIAL INSPECTIONS	None	MET	AUTO 12/1/2015 BTCH
	This job has been approved for Special Inspections (SI). Only inspection reports generated by pre-approved personnel will be accepted. For more information on SI process and required submission of electronic inspection results, please refer to the City's "Special Inspection Program Guidelines & Procedures" handout (alexandriava.gov/code) or contact a New Construction Supervisor on 703.746.4200.			
1210	CA SHOP DRAWINGS	None	MET	AUTO 12/1/2015 BTCH
	Shop drawings are required as indicated on plans. Shop drawings must be signed and sealed by the manufacturer and a Commonwealth of Virginia registered design professional. Shops must be submitted to Code Administration for review and approval prior to installation and an approved copy must be on site for inspection.			
1220	CA SPECIAL CONDITION	None	MET	AUTO 12/1/2015 BTCH



# City of Alexandria, Virginia



Department of Code Administration  
301 King Street, Suite 4200  
Alexandria, Virginia 22314  
email: [permit.center@alexandriava.gov](mailto:permit.center@alexandriava.gov)

## ELECTRICAL PERMIT

**Case Number:** ELE2015-01991 **Issued:** 12/01/2015 **Expires:** 06/01/2016

**MASTER BUILDING PERMIT NUMBER:** ELE2015-01991

**PARCEL RESTRICTIONS:**  
Marine Clay Soil

**Project Address:** 1516 MOUNT EAGLE PL 955

**Project Name:** MINI SPLIT HEAT PUMP ELECTRIC

**Project Description:**

ELECTRICAL WIRING FOR DUCTLESS MINI SPLIT HEAT PUMP

### Project Details:

CODE EDITION: 2012 N/A

USE GROUPS: R-2 Residential, apartment/condo units,

CONSTR TYPE: 5A Building Elmts Combustible or Non-combustible

OCCUPANT LOAD: N/A

### OWNER INFORMATION:

GEOFFREY S. BURKE

1516 MOUNT EAGLE PLACE

ALEXANDRIA VA 22302

### BUILDING AREA:

GROSS < 3000 sf

ALTERED N/A sf

NEW N/A sf

### EST. CONSTRUCTION COST:

\$200

### CATEGORIES OF WORK:

Alteration

### FEES:

ADD,ALTER,REPAIR,RECONST,SPEC	\$85.00
Admin - Alt,Rpr,Recon,Spec	\$11.90
InfoTech-Alt,Rpr,Recon,Spec	\$4.25
PermitCtr-Alt,Rpr,Recon,Sp	\$9.35
Training - Alt,Rpr,Recon,Sp	\$0.17
VA Tng - Alt,Rpr,Recon,Spec	\$1.70
<b>Total:</b>	<b>\$112.37</b>

### CONTRACTOR INFORMATION:

ANDERSON ELECTRICAL SERVICE

4196 MERCHANT PLAZA

WOODBIDGE VA 22192

### Contact Information:

Primary Phone: N/A

### License Information:

License Type: Contractor, Class C

License Number: 2705140746

License Exp. Date: 05/31/2017

### Prohibited Hours of Construction:

Day	Before	After
Mon-Fri	7 a.m.	6 p.m.
Saturday	9 a.m.	6 p.m.
Sunday	All hours	

Holidays per 11-5-5(a)5(a)\* All Hours

\* Section 11-5-5 (a)5(a) defines holidays as

January 1st, Memorial Day, July 4th, Labor Day,

Thanksgiving Day, Christmas Day.

**BUILDING OFFICIAL: GREGG FIELDS**

Please visit the Online Alexandria Permit Center at [permits.alexandriava.gov](http://permits.alexandriava.gov) to apply for additional permits.

RIGHT IS RESERVED TO INSPECT WORK AUTHORIZED BY THIS PERMIT AS OFTEN AS NECESSARY TO DETERMINE COMPLIANCE WITH THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE. AUTHORIZATION TO ALTER, USE, OR CROSS PUBLIC SIDEWALKS, CURBS, OR OTHER PUBLIC SPACES MUST BE OBTAINED FROM THE DEPARTMENT OF TRANSPORTATION AND ENVIRONMENTAL SERVICES. THIS PERMIT EXPIRES IF WORK IS NOT STARTED OR IF WORK IS ABANDONED FOR SIX MONTHS. ONE & TWO-FAMILY DWELLING CONSTRUCTION PERMITS, INCLUDING NEW DWELLINGS, ADDITIONS, ALTERATIONS, AND/OR ACCESSORY STRUCTURES, MUST BE COMPLETED WITHIN THREE YEARS OF PERMIT ISSUANCE. IF WORK WILL BE PERFORMED WITHIN 15 FEET OF OVERHEAD ELECTRICAL WIRES, PERMITTEE MUST OBTAIN ASSISTANCE FROM THE VIRGINIA POWER OFFICE. CALL 703.934.9660. THIS PERMIT MUST BE POSTED ON THE WORK SITE AND VISIBLE FROM THE PUBLIC WAY UNTIL THE WORK RECEIVES AN APPROVED FINAL INSPECTION.

PLEASE CALL 703.838.4900 TO SCHEDULE OR CANCEL INSPECTIONS AND OBTAIN INSPECTION RESULTS 24 HOURS A DAY.

Please fill out our Customer Service Survey at

[<http://alexandriava.gov/Code>](http://alexandriava.gov/Code)



1100	Permits for One and Two Family Dwelling, including new dwellings, additions, alterations and/or accessory structures, must be completed within 3 years of the permit issue date.					
1110	CA STOP WORK ORDERS	None	MET	AUTO	12/1/2015	BTCH
	Work started without benefit of required permits or that exceed the scope of issued permits may be subject to STOP WORK ORDERS. Work must remain stopped until permits are obtained/amended and applicable fees paid.					
1120	CA WALL CHECK SURVEY	None	MET	AUTO	12/1/2015	BTCH
	A Wall Check Survey may be required after the foundation or first floor walls are in place. Wall check surveys shall be submitted to the Permit Center. Work that proceeds without an approved Wall check Survey is at the owner's risk and may be required to be removed or relocated.					
1130	CA RODENT CONTROL MEASURES	None	MET	AUTO	12/1/2015	BTCH
	Approved rodent control/abatement measures must be in place 7 days before site disturbance begins and must remain in place until exterior work is complete. Site and dumpsters must be clean and secure at the end of each work day to prevent rodent harborage and the accumulation of loose trash.					
1140	CA TRADE PERMITS	None	MET	AUTO	12/1/2015	BTCH
	Separate trade permits and inspections required - Plumbing, Electrical and Mechanical.					
1150	CA ELEVATOR PERMITS	None	MET	AUTO	12/1/2015	BTCH
	Separate permits and inspections required for elevators, escalators, dumb waiters, chair lifts, and elevating equipment such as motorized masonry scaffolding.					
1160	CA FPS PERMITS	None	MET	AUTO	12/1/2015	BTCH
	Separate permits required for fire alarm, fire detection, fire suppression, access control, and fire sprinkler systems. A Knox Box is required to be installed in buildings where any fire alarm, fire detection, fire suppression or sprinkler systems are installed. The Alexandria Department of Communications must be notified in advance whenever a fire protection system is taken out of service for any reason - 703.838-4660.					
1170	CA CERTIFICATE OF OCCUPANCY	None	MET	AUTO	12/1/2015	BTCH
	An issued Certificate of Occupancy (CO) is required before occupancy. When applicable, a height survey must be approved by Planning & Zoning before a CO is considered. Please allow a minimum of 3-5 work-days when scheduling CO inspections 703.746.4200. When planning for Grand Opening Events, please allow sufficient time for the CO and Business License process - 703.746.3914 or 3903.					
1180	CA FPP STORAGE	None	MET	AUTO	12/1/2015	BTCH
	A Fire Prevention Code Permit is required for storage of chemicals.					
1190	CA FPP ASSEMBLY	None	MET	AUTO	12/1/2015	BTCH
	A Fire Prevention Code Permit is required for Assembly Uses. Assembly permits are not the same as a Certificate of Occupancy.					
1200	CA SPECIAL INSPECTIONS	None	MET	AUTO	12/1/2015	BTCH
	This job has been approved for Special Inspections (SI). Only inspection reports generated by pre-approved personnel will be accepted. For more information on SI process and required submission of electronic inspection results, please refer to the City's "Special Inspection Program Guidelines & Procedures" handout ( <a href="http://alexandriava.gov/code">alexandriava.gov/code</a> ) or contact a New Construction Supervisor on 703.746.4200.					
1210	CA SHOP DRAWINGS	None	MET	AUTO	12/1/2015	BTCH
	Shop drawings are required as indicated on plans. Shop drawings must be signed and sealed by the manufacturer and a Commonwealth of Virginia registered design professional. Shops must be submitted to Code Administration for review and approval prior to installation and an approved copy must be on site for inspection.					
1220	CA SPECIAL CONDITION	None	MET	AUTO	12/1/2015	BTCH



# City of Alexandria, Virginia



Department of Code Administration  
301 King Street, Suite 4200  
Alexandria, Virginia 22314  
email: [permit.center@alexandriava.gov](mailto:permit.center@alexandriava.gov)

## BUILDING PERMIT

Case Number: *BLD2015-02404* Issued: *12/01/2015* Expires: *06/01/2016*

MASTER BUILDING PERMIT NUMBER: *BLD2015-02404*

PARCEL RESTRICTIONS:  
*Marine Clay Soil*

Project Address: *1516 MOUNT EAGLE PL 955*

Project Name: *MINI SPLIT*

### Project Description:

DRILL A HOLE IN THE WALL FROM INSIDE TO OUTSIDE REAR OF BUILDING FOR A  
DUCTLESS MINI SPLIT HEAT PUMP. ADD 3 MINI SPLITS

### Project Details:

CODE EDITION: *2012 Virginia Construction Code*  
USE GROUPS: *R-2 Residential, apartment/condo units,*  
CONSTR TYPE: *5A Building Elms Combustible or Non-combustible*

BUILDING AREA:  
GROSS *2,000*  
ALTERED *10*  
NEW *0*

EST. CONSTRUCTION COST:  
*\$300*  
CATEGORIES OF WORK:  
*Non-Residential Alteration*

### OCCUPANT LOAD:

### OWNER INFORMATION:

*GEOFFREY S. BURKE*  
*1516 MOUNT EAGLE PL*  
*ALEXANDRIA VA 22302*

### CONTRACTOR INFORMATION:

*CAPITOL BUILDERS GROUP INC*  
*5613 LEESBURG PIKE #32*  
*FALLS CHURCH VA 22041*

### Contact Information:

Primary Phone: *703-622-1054*

### License Information:

License Type: *Contractor, Class A*  
License Number: *2705124006A*  
License Exp. Date: *08/31/2016*

### Prohibited Hours of Construction:

Day	Before	After
Mon-Fri	7am	6pm
Saturday	9am	6pm
Sunday	All hours	

Holidays per 11-5-5(a)5(a)\* All Hours  
\* Section 11-5-5 (a)5(a) defines holidays as  
January 1st, Memorial Day, July 4th, Labor Day,  
Thanksgiving Day, Christmas Day.

### FEES:

BUILDING PERMIT	\$85.00
Admin - Permit	\$11.90
InfoTech - Permit	\$4.25
PermCtr- Permit	\$9.35
Training - Permit	\$0.17
Va Tng - Permit	\$1.70
Total:	\$112.37

BUILDING OFFICIAL: GREGG FIELDS

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RIGHT IS RESERVED TO INSPECT WORK AUTHORIZED BY THIS PERMIT AS OFTEN AS NECESSARY TO DETERMINE COMPLIANCE WITH THE VIRGINIA UNIFORM STATEWIDE BUILDING CODE. AUTHORIZATION TO ALTER, USE, OR CROSS PUBLIC SIDEWALKS, CURBS, OR OTHER PUBLIC SPACES MUST BE OBTAINED FROM THE DEPARTMENT OF TRANSPORTATION AND ENVIRONMENTAL SERVICES. THIS PERMIT EXPIRES IF WORK IS NOT STARTED OR IF WORK IS ABANDONED FOR SIX MONTHS. ONE & TWO-FAMILY DWELLING CONSTRUCTION PERMITS, INCLUDING NEW DWELLINGS, ADDITIONS, ALTERATIONS, AND/OR ACCESSORY STRUCTURES, MUST BE COMPLETED WITHIN THREE YEARS OF PERMIT ISSUANCE. IF WORK WILL BE PERFORMED WITHIN 15 FEET OF OVERHEAD ELECTRICAL WIRES, PERMITEE MUST OBTAIN ASSISTANCE FROM THE VIRGINIA POWER OFFICE. CALL 703.934.9660. THIS PERMIT MUST BE POSTED ON THE WORK SITE AND VISIBLE FROM THE PUBLIC WAY UNTIL THE WORK RECEIVES AN APPROVED FINAL INSPECTION.

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1120	CA WALL CHECK SURVEY	None	MET	AUTO	12/1/2015	BTCH
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1180	CA FPP STORAGE	None	MET	AUTO	12/1/2015	BTCH
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1210	CA SHOP DRAWINGS	None	MET	AUTO	12/1/2015	BTCH
	Shop drawings are required as indicated on plans. Shop drawings must be signed and sealed by the manufacturer and a Commonwealth of Virginia registered design professional. Shops must be submitted to Code Administration for review and approval prior to installation and an approved copy must be on site for inspection.					
1220	CA SPECIAL CONDITION	None	MET	AUTO	12/1/2015	BTCH
2001	TES ELECTRIC WARNING	None	MET	AUTO	12/1/2015	BTCH
	Prior to the performance of work within 15 feet of overhead power lines, the applicant must contact Dominion Virginia Power at 1.888.667.3000.					

## PRE-APPLICATION SUBMISSION MEETING CHECKLIST

Prior to submission of the application, the Owner, Contractor and Association personnel (Parkfairfax Maintenance or Assistant Maintenance Director) must meet at the condominium unit where the work is to be performed to review the proposed installation and resolve any questions/issues.

Once Parkfairfax personnel, the Owner and Contractor have met and discussed installation requirements, the owner and the Association representative shall sign this checklist indicating the pre-application meeting has occurred and they are in agreement with installation requirements. The applicant is to include this checklist with their submission.

ADDRESS: 1516 Mount Eagle Drive DATE 12/02/15

yes

1. The location of where the outdoor compressor unit will be installed is identified and agreed upon.

Questionable

2. For wall-mounted units, the location of where the support brackets will be installed is identified and agreed upon.

yes

3. The location of the condensate drain exit point through the exterior wall and to the nearest downspout is identified and agreed upon.

yes

4. Are snowbirds required for installation?

Parkfairfax personnel signature indicating the pre-application submission meeting has been completed and is satisfied that the owner and contractor understand the requirements for installation of HVAC system.

L. L. 12-1-15

Owner signature indicating the pre-application submission meeting has been completed and understands the requirements for installation of HVAC system.

[Signature] 12-1-2015  
[Signature] 12/1/15

All drain  
lines and  
wires will be  
covered  
with a  
plastic  
covering.

PVC Drain Line

3 Copper  
line set  
covered in  
black  
rubber tex  
w/ high  
voltage wire  
to outdoor  
unit and  
power wire  
for indoors

Core drill  
through  
wall

Will Core drill hole  
through wall so that  
it will come out  
behind the unit





The condensate line will exit the wall and a single core drill hole  
directly above the leaf deflector box and terminate at that point  
directly above the leaf deflector box

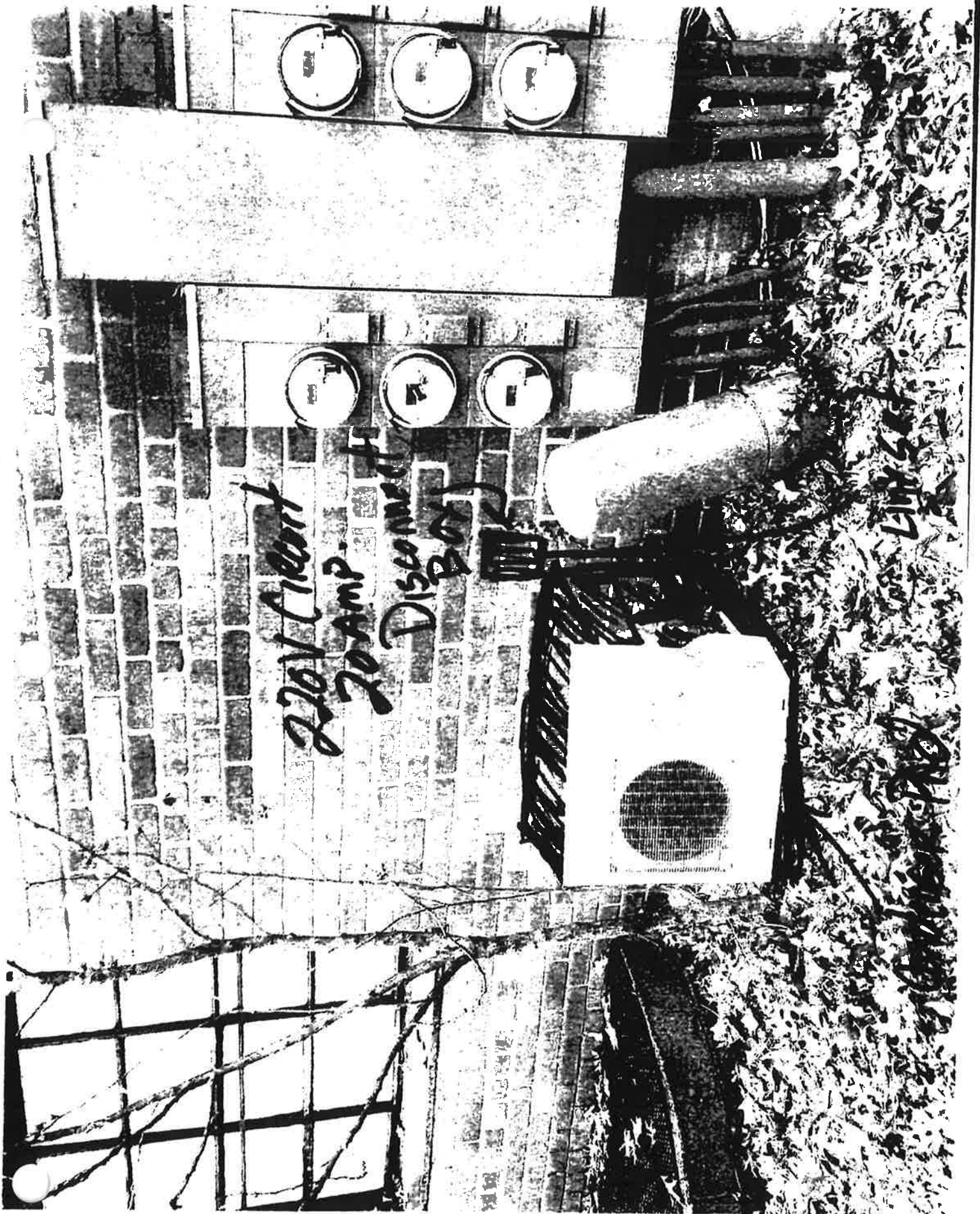
220V Circuit

20 AMP

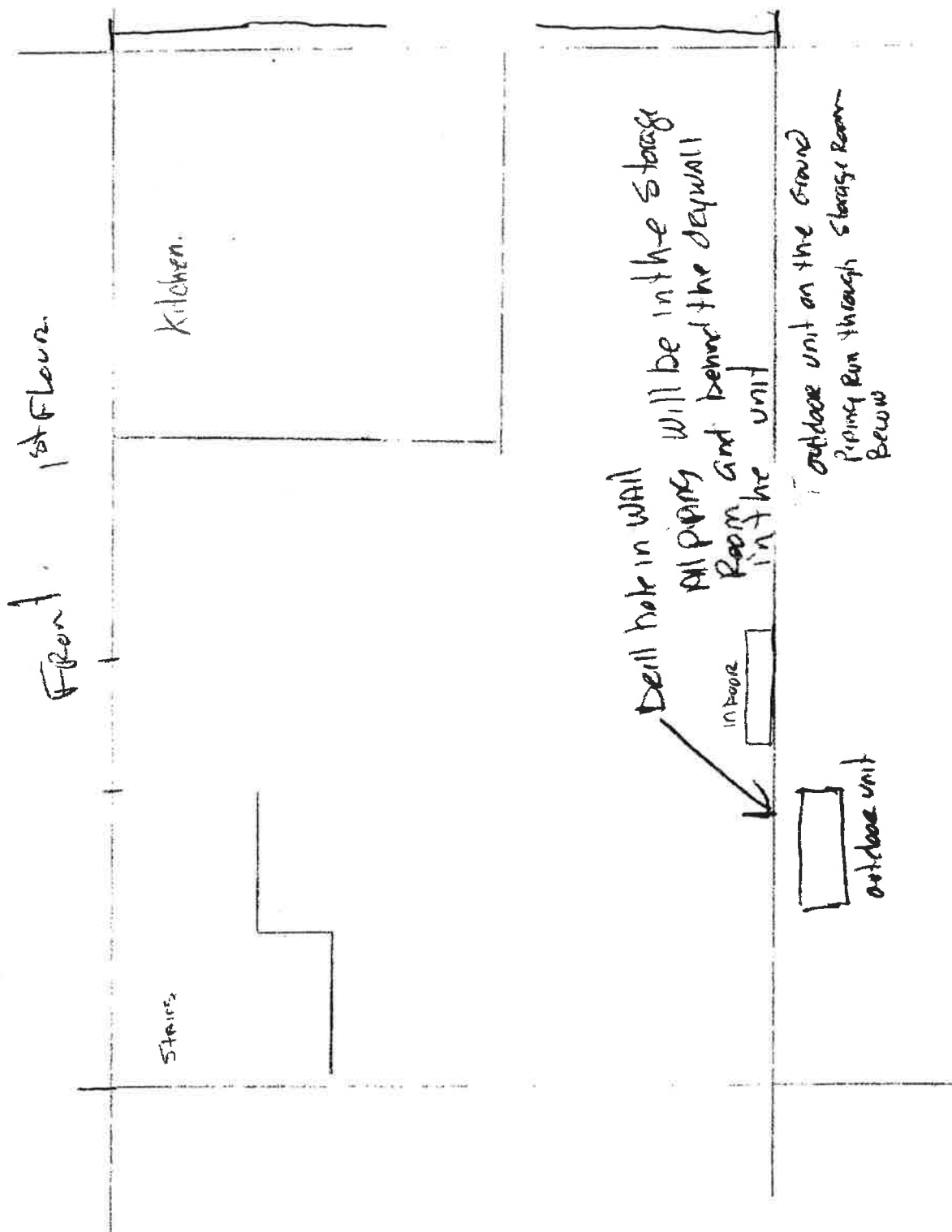
Disconnected  
Box

LINE SET

TRANSFORMER



1516 Mt. Eagle Place.



Storage unit Below



1516 Mt. Eagle Place  
Alexandria VA.

2nd floor

STAIRS

Entry Room

Master

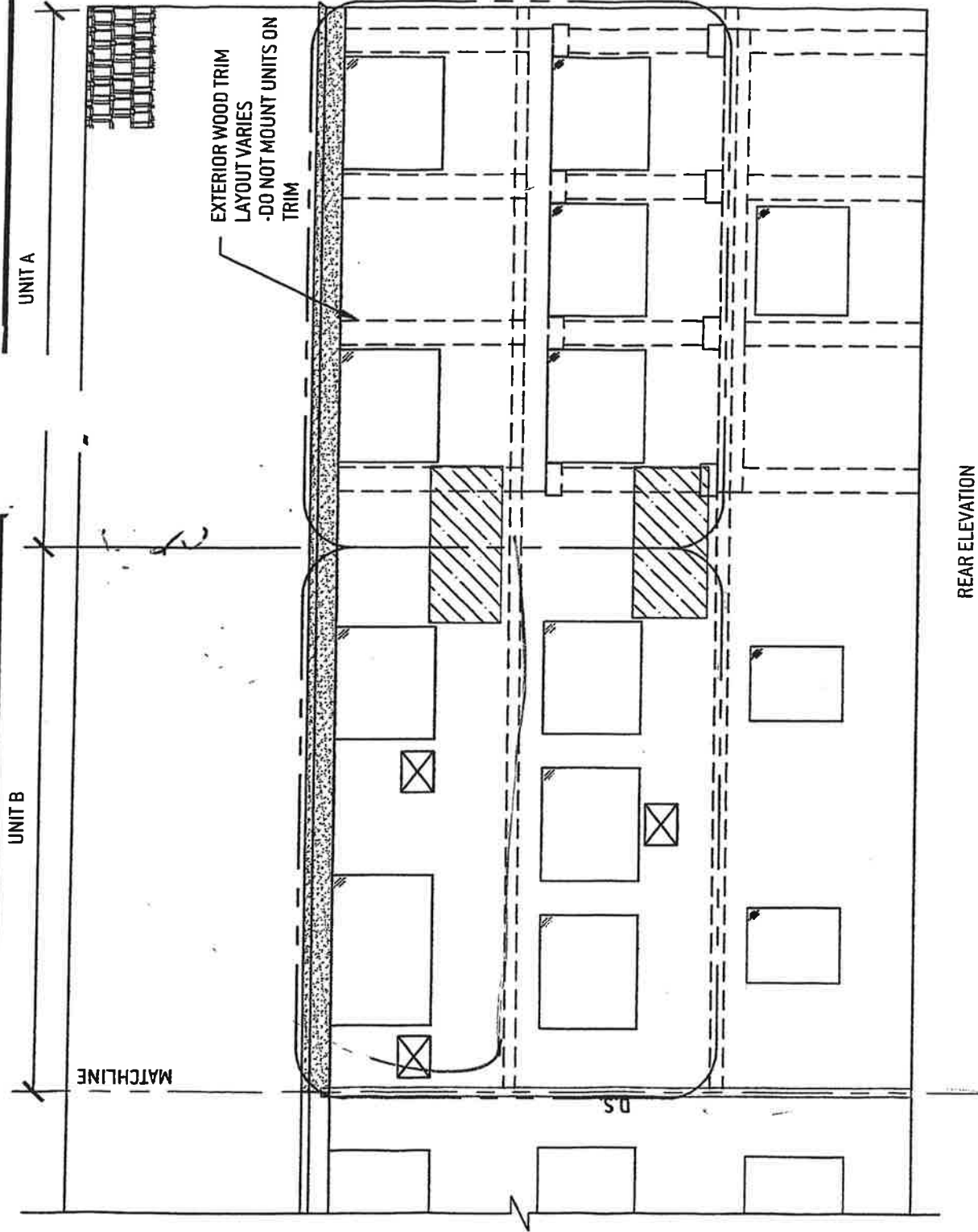
Bedroom

Indoor

Indoor

Living Room  
Dining  
Kitchen

Bldg #	Unit #	Street Name	Model Number	Bldg Type	Subfloor	PRIMARY LOCATION				SECONDARY LOCATION		Additional Reference Sketches (SK4 & SK5)
						Location	Rear	Side	Front	Rear	Side	
950	1655 #	Preston Road	Monroe 1C	C-1	Concrete	GROUND			YES			SK1
950	1653 #	Preston Road	Adams 1D	C-1	Concrete	GROUND	YES		YES	*C-I		
950	1651 #	Preston Road	Adams 1D	C-1	Concrete	GROUND	YES		YES			
950	1649 #	Preston Road	Monroe 1C	C-1	Concrete	GROUND			YES	C-I		SK1
950	1647 #	Preston Road	Monroe 1C	C-1	Concrete	WALL	*C-I	*C-II				SK1
950	1645 #	Preston Road	Adams 1D	C-1	Concrete	GROUND	YES	YES				
951	L Rm	Mount Eagle Place	Laundry Room	BB-7	Concrete	GROUND	YES	YES				
951	1517	Mount Eagle Place	Madison 2B	BB-7	Concrete	GROUND			YES	B-III (A)	B-V	SK1
951	1515	Mount Eagle Place	Madison 2B	BB-7	Concrete	GROUND			YES	B-III (B)	B-V	SK1
951	1513	Mount Eagle Place	Madison 2B	BB-7	Concrete	GROUND			YES	*B-XI (B)		SK1
951	1511	Mount Eagle Place	Madison 2B	BB-7	Concrete	GROUND			YES	*B-XI (A)	*B-VIII	SK1
951	1509	Mount Eagle Place	Lincoln 2A	BB-7	Concrete	GROUND	YES	YES				
952	1667	Preston Road	Washington 2C	B-15	Concrete	GROUND	YES	YES		B-IV (A)	B-II	SK1
952	1665	Preston Road	Washington 2C	B-15	Concrete	GROUND	YES		YES	B-IV (B)		SK1
952	1663	Preston Road	Washington 2C	B-15	Concrete	GROUND	YES		YES	*B-IV (B)		SK1
952	1661	Preston Road	Washington 2C	B-15	Concrete	GROUND	YES	YES		*B-VI (A)	*B-II	SK1
953	1507	Mount Eagle Place	Jefferson 1B	ACC-20	Concrete	GROUND			YES	A-VII (B)	A-VI (B)	SK1
953	1505	Mount Eagle Place	Jackson 1A	ACC-20	Concrete	GROUND	YES	YES	YES	A-VII (B)	A-VI (A)	SK1
953	1503	Mount Eagle Place	Jefferson 1B	ACC-20	Concrete	GROUND	YES		YES	A-VIII(A)		SK1
953	1501	Mount Eagle Place	Coolidge	ACC-20	Concrete	GROUND	YES		YES	A-VIII(B)		SK1
953	1500	Mount Eagle Place	Cleveland	ACC-20	Concrete	GROUND	YES	YES	YES			
953	1502	Mount Eagle Place	Jefferson 1B	ACC-20	Concrete	GROUND	YES	YES	YES			
953	1504	Mount Eagle Place	Jackson 1A	ACC-20	Concrete	GROUND			YES	*A-VII (A)	*A-VI (A)	SK1
953	1506	Mount Eagle Place	Jefferson 1B	ACC-20	Concrete	GROUND			YES	*A-VII (B)	*A-VI (B)	SK1
954	1677	Preston Road	Washington 2C	ABC-19	Concrete	GROUND	YES	YES	YES	A-IV	A-V	SK1
954	1675	Preston Road	Van Buren 3A	ABC-19	Concrete	GROUND	YES	YES		A-III (A)		SK1
954	1673	Preston Road	Harrison 3B	ABC-19	Concrete	GROUND	YES			A-III (B)		SK1
954	1671 #	Preston Road	Jackson 1A	ABC-19	Concrete	GROUND	YES	YES	YES			
954	1669 #	Preston Road	Jefferson 1B	ABC-19	Concrete	GROUND			YES	*A-I	*A-I	SK1
955	1508	Mount Eagle Place	Lincoln 2A	BB-7	Concrete	GROUND	YES	YES				
955	1510	Mount Eagle Place	Madison 2B	BB-7	Concrete	GROUND			YES	B-XI(A)	B-VIII	SK1
955	1512	Mount Eagle Place	Madison 2B	BB-7	Concrete	GROUND			YES	B-XI(B)		SK1
955	1514	Mount Eagle Place	Madison 2B	BB-7	Concrete	GROUND			YES	*B-III (B)	*B-V	SK1
955	1516	Mount Eagle Place	Madison 2B	BB-7	Concrete	GROUND			YES	*B-III (B)	*B-V	SK1
955	S Rm	Mount Eagle Place	Storage Room	BB-7	Concrete	GROUND	YES	YES				
956	1709 #	Preston Road	Jefferson 1B	ABC-18	Concrete	GROUND	YES		YES	A-II	A-I	SK1
956	1707 #	Preston Road	Jackson 1A	ABC-18	Concrete	GROUND	YES	YES	YES			
956	1705	Preston Road	Harrison 3B	ABC-18	Concrete	GROUND	YES			A-III(A)		SK1
956	1703	Preston Road	Van Buren 3A	ABC-18	Concrete	GROUND	YES			A-III(B)		SK1
956	1701	Preston Road	Washington 2C	ABC-18	Concrete	GROUND	YES	YES	YES	*A-IV	*A-V	SK1
957	1520	Mount Eagle Place	Lincoln 2A	BB-7	Concrete	GROUND	YES	YES	YES			



BUILDING TYPES:  
BB-7

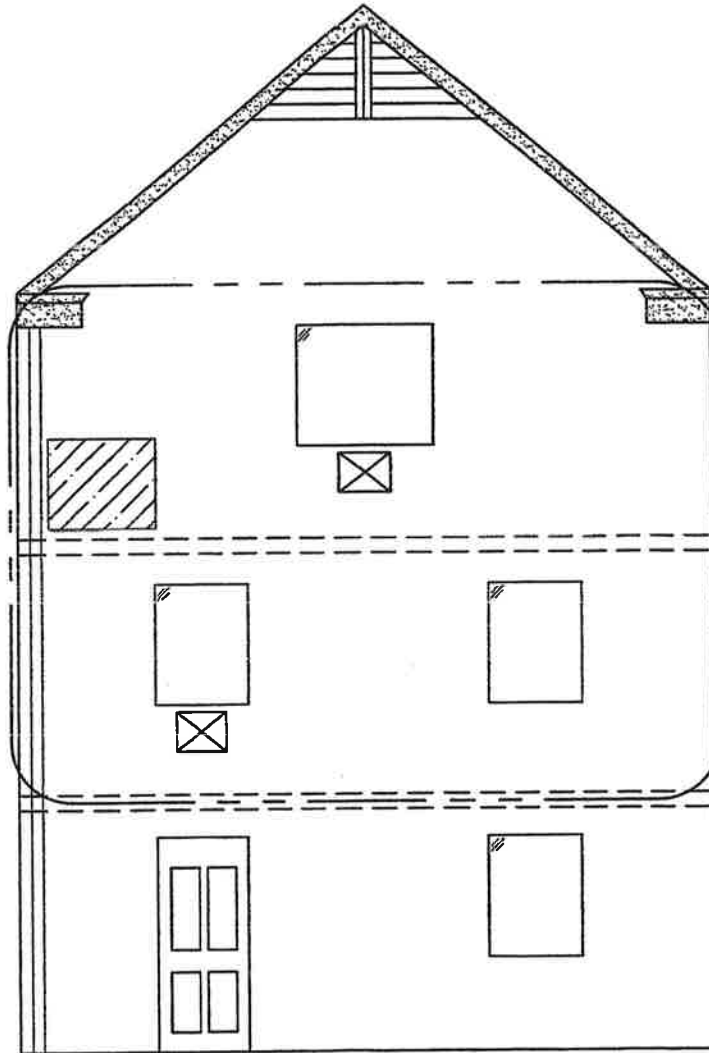
B-III

**PARKFAIRFAX**  
ALEXANDRIA, VIRGINIA

NOTE: CHIMNEY NOT DEPICTED AT BUILDINGS  
WITH BOILER ROOMS

DECEMBER 17, 2012

SPECIFICATIONS FOR CENTRAL PACKAGED  
SPLIT SYSTEM ELECTRIC HEAT PUMPS



SIDE ELEVATION

**B-V**

**BUILDING TYPES:**

BB-7  
BB-8  
BB-9  
B-BB-12  
B-BB-13

DECEMBER 17, 2012

**PARKFAIRFAX**

ALEXANDRIA, VIRGINIA

SPECIFICATIONS FOR CENTRAL PACKAGED  
SPLIT SYSTEM ELECTRIC HEAT PUMPS



