Important! The adopted Affidavit and Reaffirmation of Affidavit forms shall not be altered or modified in any way. Any form that is altered or modified in any way will not be accepted.

REAFFIRMATION OF AFFIDAVIT

In reference to the Affidavit dated December 16, 2009
(enter date of affidavit)

For the Application Potomac Interceptor Odor Abatement Site, with Number(s) CMPT 2010-002 SPEX 2009-0041
[enter Application name(s)] [enter Application number(s)]

I, J. Keith Sinclair, Jr., do hereby state that I am an

(check one) _____ Applicant (must be listed in Paragraph C of the above-described affidavit)
__√__ Applicant's Authorized Agent (must be listed in Paragraph C of the above-described affidavit)

And that to the best of my knowledge and belief, the following information is true:

(check one) _____ I have reviewed the above-described affidavit, and the information contained therein is true and complete as of _____, or;
(today's date)

__√__ I have reviewed the above-described affidavit, and I am submitting a new affidavit which includes changes, deletions or supplemental information to those paragraphs of the above-described affidavit indicated below:

(Check if applicable)

_____ Paragraph C-1
__√__ Paragraph C-2
_____ Paragraph C-3
_____ Paragraph C-4(a)
_____ Paragraph C-4(b)
_____ Paragraph C-4(c)

RECEIVED
MAY 04 2010
LOUDOUN COUNTY
DEPARTMENT OF PLANNING

WITNESS the following signature:

J. Keith Sinclair, Jr.
check one: [ ] Applicant or [√] Applicant's Authorized Agent

J. Keith Sinclair, Jr., Authorized Agent
(Type or print first name, middle initial and last name and title of signee)

Subscribed and sworn before me this 4th day of May, 2010, in the State/Commonwealth of Virginia, in the County/~~City of~~ Fairfax.

Myra J. Madden
Notary Public

My Commission Expires: July 31, 2010

Notary Registration Number: 152613

I, ____J. Keith Sinclair, Jr._____, do hereby state that I am an

___ Applicant

_X_ Applicant's Authorized Agent listed in Section C.1. below

in Application Number(s): CMPT 2010-002 & SPEX 2009-0041

and that to the best of my knowledge and belief, the following information is true:

C. DISCLOSURES: REAL PARTIES IN INTEREST AND LAND USE PROCEEDINGS

1. *REAL PARTIES IN INTEREST*

The following constitutes a listing of the names and addresses of all **APPLICANTS, TITLE OWNERS, CONTRACT PURCHASERS** and **LESSEES** of the land described in the application* and if any of the forgoing is a **TRUSTEE**** each **BENEFICIARY** of such trust, and all **ATTORNEYS,** and **REAL ESTATE BROKERS, and all AGENTS of any of the foregoing.**

All relationships to the persons or entities listed above in **BOLD** print must be disclosed. Multiple relationships may be listed together (ex. Attorney/Agent, Contract Purchaser/Lessee, Applicant/Title Owner, etc.) For a multiple parcel application, list the Parcel Identification Number (PIN) of the parcel(s) for each owner(s).

PIN	*NAME (First, M.I., Last)*	*ADDRESS (Street, City, State, Zip Code)*	*RELATIONSHIP (Listed in bold above)*
010-10-0295	District of Columbia Water and Sewer Authority	5000 Overlook Avenue, S.W. Washington, D.C. 20032	Applicant
010-10-0295	Northern Virginia Regional Park Authority	5400 Ox Road Fairfax Station, VA 22039	Title Owner
010-10-0295	J. Keith Sinclair, Jr. A. Morton Thomas and Associates, Inc.	14900 Conference Center Drive, Suite 180 Chantilly, VA 20151	Agent

* In the case of a condominium, the title owner, contract purchaser, or lessee of 10% or more of the units in the condominium.

** In the case of a TRUSTEE, list Name of Trustee, name of Trust, if applicable, and name of each beneficiary.

Check if applicable:

___ There are additional Real Parties in Interest. *See* Attachment to Paragraph C-1.

2. *CORPORATION INFORMATION (see also Instructions, Paragraph B.3 above)*

The following constitutes a listing of the **SHAREHOLDERS** of all corporations disclosed in this affidavit who own 10% or more of any class of stock issued by said corporation, and where such corporation has 100 or fewer shareholders, a listing of all of the shareholders, **and if such corporation is an owner of the subject land**, all **OFFICERS** and **DIRECTORS** of such corporation. (Include sole proprietorships, limited liability companies and real estate investment trusts).

Name and Address of Corporation: (complete name, street address, city, state, zip code)
District of Columbia Water and Sewer Authority.
5000 Overlook Avenue, SW
Washington, DC 20032

Description of Corporation:
X ____*There are 100 or fewer shareholders and all shareholders are listed below.*

_____*There are more than 100 shareholders, and all shareholders owning 10% or more of any class of stock issued by said corporation are listed below.*

_____*There are more than 100 shareholders but no shareholder owns 10% or more of any class of stock issued by said corporation, and no shareholders are listed below.*

_____*There are more than 500 shareholders and stock is traded on a national or local stock exchange.*

Names of Shareholders:

SHAREHOLDER NAME (First, M.I., Last)	***SHAREHOLDER NAME (First, M.I., Last)***
Non-Stock Entity	

Names of Officers and Directors:

NAME (First, M.I., Last)	***Title (e.g. President, Treasurer)***
George S. Hawkins	General Manager

Check if applicable:
_____ There is additional Corporation Information. *See* Attachment to Paragraph C-2.

2. *CORPORATION INFORMATION (see also Instructions, Paragraph B.3 above)*

The following constitutes a listing of the **SHAREHOLDERS** of all corporations disclosed in this affidavit who own 10% or more of any class of stock issued by said corporation, and where such corporation has 100 or fewer shareholders, a listing of all of the shareholders, **and if such corporation is an owner of the subject land**, all **OFFICERS** and **DIRECTORS** of such corporation. (Include sole proprietorships, limited liability companies and real estate investment trusts).

Name and Address of Corporation: (complete name, street address, city, state, zip code)
Northern Virginia Regional Park Authority.
5400 Ox Road
Fairfax Station, VA 22039

Description of Corporation:
X ____*There are 100 or fewer shareholders and all shareholders are listed below.*

_____*There are more than 100 shareholders, and all shareholders owning 10% or more of any class of stock issued by said corporation are listed below.*

_____*There are more than 100 shareholders but no shareholder owns 10% or more of any class of stock issued by said corporation, and no shareholders are listed below.*

_____*There are more than 500 shareholders and stock is traded on a national or local stock exchange.*

Names of Shareholders:

SHAREHOLDER NAME (First, M.I., Last)	***SHAREHOLDER NAME (First, M.I., Last)***
Non-Stock Entity	

Names of Officers and Directors:

NAME (First, M.I., Last)	***Title (e.g. President, Treasurer)***
Paul A. Gilbert	Executive Director

Check if applicable:
_____ There is additional Corporation Information. *See* Attachment to Paragraph C-2.

2. *CORPORATION INFORMATION (see also Instructions, Paragraph B.3 above)*

The following constitutes a listing of the **SHAREHOLDERS** of all corporations disclosed in this affidavit who own 10% or more of any class of stock issued by said corporation, and where such corporation has 100 or fewer shareholders, a listing of all of the shareholders, **and if such corporation is an owner of the subject land**, all **OFFICERS** and **DIRECTORS** of such corporation. (Include sole proprietorships, limited liability companies and real estate investment trusts).

Name and Address of Corporation: (complete name, street address, city, state, zip code)
A. Morton Thomas and Associates, Inc.
14900 Conference Center Drive, Suite 180
Chantilly, VA 20151

Description of Corporation:

X ____ *There are 100 or fewer shareholders and all shareholders are listed below.*

_____ *There are more than 100 shareholders, and all shareholders owning 10% or more of any class of stock issued by said corporation are listed below.*

_____ *There are more than 100 shareholders but no shareholder owns 10% or more of any class of stock issued by said corporation, and no shareholders are listed below.*

_____ *There are more than 500 shareholders and stock is traded on a national or local stock exchange.*

Names of Shareholders:

SHAREHOLDER NAME (First, M.I., Last)	***SHAREHOLDER NAME (First, M.I., Last)***
Max Kantzer	
Jerry Kavadias	
Richard Khalil	
Stuart Robinson	
Daniel Schriever	
Murphy Tuomey	
Michael J. Wiercinski	

Names of Officers and Directors:

NAME (First, M.I., Last)	***Title (e.g. President, Treasurer)***
Michael J. Wiercinski	President
Jerry Kavadias	Senior Vice President
Murphy Tuomey	Senior Vice President
Rich Khalil	Treasurer
Stuart Robinson	Vice President and Secretary
Gregory Osband	Director

Check if applicable:
_____ There is additional Corporation Information. *See* Attachment to Paragraph C-2.

3. *PARTNERSHIP INFORMATION*

The following constitutes a listing of all of the **PARTNERS**, both **GENERAL** and **LIMITED**, in any partnership disclosed in the affidavit.

Partnership name and address: (complete name, street address, city, state, zip)

_____

_____(check if applicable) The above-listed partnership has no limited partners.

Names and titles of the Partners:

NAME (First, M.I., Last)	*Title (e.g. General Partner, Limited Partner, etc)*

Check if applicable:
_____ Additional Partnership information attached. *See* Attachment to Paragraph C-3.

4. *ADDITIONAL INFORMATION*

a. One of the following options **must** be checked:

____In addition to the names listed in paragraphs C. 1, 2, and 3 above, the following is a listing of any and all other individuals who own in the aggregate (directly as a shareholder, partner, or beneficiary of a trust) 10% or more of the APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE of the land:

X__Other than the names listed in C. 1, 2 and 3 above, no individual owns in the aggregate (directly as a shareholder, partner, or beneficiary of a trust) 10% or more of the APPLICANT, TITLE OWNER, CONTRACT PURCHASER, or LESSEE of the land:

Check if applicable:
____Additional information attached. *See* Attachment to Paragraph C-4(a).

b. That no member of the Loudoun County Board of Supervisors, Planning Commission, Board of Zoning Appeals or any member of his or her immediate household owns or has any financial interest in the subject land either individually, by ownership of stock in a corporation owning such land, or though an interest in a partnership owning such land, or as beneficiary of a trust owning such land.

EXCEPT AS FOLLOWS: (If none, so state).
None

Check if applicable:
____Additional information attached. *See* Attachment to Paragraph C-4(b).

c. That within the twelve-month period prior to the public hearing for this application, no member of the Loudoun County Board of Supervisors, Board of Zoning Appeals, or Planning Commission or any member of his immediate household, either individually, or by way of partnership in which any of them is a partner, employee, agent or attorney, or through a partner of any of them, or through a corporation (as defined in the Instructions at Paragraph B.3) in which any of them is an officer, director, employee, agent or attorney or holds 10% or more of the outstanding bonds or shares of stock of a particular class, has or has had any business or financial relationship (other than any ordinary customer or depositor relationship with a retail establishment, public utility, or bank), including receipt of any gift or donation having a value of $100 or more, singularly or in the aggregate, with or from any of those persons or entities listed above.

EXCEPT AS FOLLOWS: (If none, so state).
None

Check if applicable:
____Additional information attached. *See* Attachment to Paragraph C-4(c).

D. COMPLETENESS

That the information contained in this affidavit is complete, that all partnerships, corporations (as defined in Instructions, Paragraph B.3), and trusts owning 10% or more of the APPLICANT, TITLE OWNER, CONTRACT PURCHASER, OR LESSEE of the land have been listed and broken down, and that prior to each hearing on this matter, I will reexamine this affidavit and provide any changed or supplemental information, including any gifts or business or financial relationships of the type described in Section C above, that arise or occur on or after the date of this Application.

WITNESS the following signature:

J Keith Sinclair Jr.

check one: [ ] Applicant or [X] Applicant's Authorized Agent

J. Keith Sinclair, Jr., Applicant's Authorized Agent

(Type or print first name, middle initial and last name and title of signee)

Subscribed and sworn before me this 4th day of May, 2010, in the State/Commonwealth of Virginia, in the County/~~City~~ of Fairfax.

Myra J. Maddy

Notary Public

My Commission Expires: July 31, 2010

Notary Registration Number: 152613