

INFORMATION

A motion is a procedural device requested by a party to the case to bring a limited, contested issue before the Zoning Commission (ZC) or the Board of Zoning Adjustment (BZA) for decision. A party may submit a motion at any point; however it is recommended that motions be submitted ahead of time for consideration by the ZC or BZA.

Use this form if you are a party to a case and you would like to request that the Zoning Commission or Board of Zoning Adjustment entertain your motion. For example:

- a). Motion to continue or dismiss; or
- b). Motion to reopen a closed record to accept a document.

A motion will be entertained by the Commission or Board at a meeting or as a preliminary matter at a hearing. At that time a decision will be rendered. Please note, in the case of a request to reopen the record, pursuant to 11 DCMR §§3024.1 and 3121.9, the request will be presented to the Chair for consideration. The request must demonstrate good cause and the lack of prejudice to any party. If granted, the materials shall be entered into the record.

INSTRUCTIONS

Any Motion as provided by the District of Columbia Zoning Regulations (11 DCMR) that is not completed in accordance with the following instructions shall not be accepted:

1. Forms must be completely filled out and must be typewritten or printed. All information shall be furnished by the Maker of the Motion or Request. If additional space is necessary, use separate sheets of 8 ½" x 11" paper to complete the form (drawings and plans may be no larger than 11" x 17").
2. On this sheet and/or on a separate sheet of 8 ½" x 11" paper, state:
 - o Case Number;
 - o Name of Movant;
 - o The relief you are requesting;
 - o Each and every reason you believe you are entitled to relief and why the ZC or BZA should grant your motion, including relevant references to the Zoning Regulations or Map;
 - o Certificate of Service;
 - o Signature and Date; and
 - o Contact Information.
3. Submit the required forms and accompanying documents to the Office of Zoning using:
 - o The Interactive Zoning Information System at www.dcoz.dc.gov for electronically filed cases;
 - o In person or by US mail at 441 4th Street, N.W., Suite 200-S, Washington, D.C. 20001; or
 - o By email to zsubmissions@dc.gov for the ZC or bzasubmissions@dc.gov for the BZA.
4. At the time of filing, Makers of Motions or Requests are required to serve all Applicants, Petitioners, Appellants, Parties, and/or Intervenors, and the Office of Planning in the above-referenced ZC or BZA case via either mailed letter, hand-delivery, or electronic mail.



If you need a reasonable accommodation for a disability under the Americans with Disabilities Act (ADA) or Fair Housing Act, please complete Form 155 - Request for Reasonable Accommodation.

**BEFORE THE ZONING COMMISSION OR
BOARD OF ZONING ADJUSTMENT OF THE DISTRICT OF COLUMBIA**

Before completing this form, please review the instructions on the reverse side. Print or type all information unless otherwise indicated. All information must be completely filled out.

CASE NO.:	
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Motion of:

Applicant

Petitioner

□ Appellant

Party

Intervenor

Other _____

PLEASE TAKE NOTICE, that the undersigned will bring a motion to:

Points and Authorities:

Please state each and every reason why the Zoning Commission (ZC) or Board of Zoning Adjustment (BZA) should grant your motion, including relevant references to the Zoning Regulations or Map and where appropriate a concise statement of material facts. If you are requesting the record be reopened, the document(s) that you are requesting the record to be reopened for must be submitted separately from this form. No substantive information should be included on this form.

CERTIFICATE OF SERVICE

I hereby certify that on this

D

D

day of

Month

,

Y

Y

Y

Y

I served a copy of the foregoing Motion to each Applicant, Petitioner, Appellant, Party, and/or Intervenor, and the Office of Planning

in the above-referenced ZC or BZA case via:

 **Mailed letter**

☐ Hand delivery

E-Mail

☐ Other _____

Signature:	
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Print Name:	
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Address:	
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Phone No.:	
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E-Mail: