



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



**FORM 125 - APPEAL**

Before completing this form, please review the instructions on the reverse side.  
Print or type all information unless otherwise indicated.

Pursuant to §§ 3100 and 3101 of the Zoning Regulations of the District of Columbia, an appeal is hereby taken from the

<b>administrative decision of:</b>	DCRA/Zoning Administrator Matt LeGrant	<small>Name of administrative officer and title</small>
<b>made on</b>	<small>Date of decision</small> March 27, 2015	<b>that states</b>

Approval of revision to B1409828 that eliminates the 3rd floor, to result in a 3 unit apt. building on a 3126 sq. ft. lot, w/two stories and cellar levels

Address(es) of Affected Premises	Square(s)	Lot(s)	Zone Districts
1117 Allison Street, NW	2918	0059	R-4

<b>Present use of Property:</b>	Single Family Dwelling				
<b>Proposed use of Property:</b>	Convert to three (3) 2 bedroom/2.5 bath apartments with cellar and balconies				
<b>Name of Owner of Property:</b>	1117 Allison, LLC c/o Mr. Musa Aslanturkm, Registered Agent				
<b>Address:</b>	1242 Pennsylvania Avenue, SE; Washington, DC 20003				
<b>Phone No(s):</b>	202-352-5058	<b>Fax No.:</b>		<b>E-Mail:</b>	

<b>Name of Lessee:</b>					
<b>Address:</b>					
<b>Phone No(s):</b>		<b>Fax No.:</b>		<b>E-Mail:</b>	

<b>Name of Appellant, if other than Owner:</b>	Advisory Neighborhood Commission 4C				
<b>Address:</b>	801 Shepherd Street, NW; Washington, DC 20011				
<b>Phone No(s):</b>	202-421-8945	<b>Fax No.:</b>	202-291-1185	<b>E-Mail:</b>	4C01@anc.dc.gov

I/We certify that the above information is true and correct to the best of my/our knowledge, information and belief. Any person(s) using a fictitious name or address and/or knowingly making any false statement on this appeal is in violation of D.C. Law and subject to a fine of not more than \$1,000 or 180 days imprisonment or both. (D.C. Official Code § 22-2405)

<b>Date:</b>	6/11/2015	<b>Signature of Appellant*:</b>	Vann-Di M. Galloway, Chair
--------------	-----------	---------------------------------	----------------------------

**Waiver of Fee - Status of Appellant**

<input checked="" type="checkbox"/> ANC	<input type="checkbox"/> DC Government Agency	<input type="checkbox"/> NCPD	<input type="checkbox"/> Citizens' Association/Association created for civic purposes that is not for profit
---	---	-------------------------------	--

**To be notified of hearing and decision (Appellant or Authorized Agent\*):**

<b>Name:</b>	Ms. Lyn Abrams				
<b>Address:</b>	1119 Allison Street, NW; Washington, DC 20011				
<b>Phone No(s):</b>	202-726-0389	<b>Fax No.:</b>		<b>E-Mail:</b>	lynster3@hotmail.com

\* If an appeal is filed by the agent of the Appellant, Form 125 - Appeal shall be accompanied by a letter signed by the Appellant authorizing the agent to act on its behalf in this appeal.

Board of Zoning Adjustment  
Appellants Authority  
CASE NO. 19067  
EXHIBIT NO 1

**ANY APPLICATION THAT IS NOT COMPLETED IN ACCORDANCE WITH THE INSTRUCTIONS ON THE BACK OF THIS FORM WILL NOT BE ACCEPTED.**