

# Tab A



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



FORM 150 – MOTION FORM

THIS FORM IS FOR PARTIES ONLY. IF YOU ARE NOT A PARTY PLEASE FILE A  
FORM 153 – REQUEST TO ACCEPT AN UNTIMELY FILING OR TO REOPEN THE RECORD.

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.:

Motion of:

☐ Applicant

☐ Petitioner

☐ Appellant

☐ Party

☐ Intervenor

☐ Other \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Points and Authorities:

On a separate sheet of 8 ½" x 11" paper, 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 (see instructions).

Consent:

Did movant obtain consent for the motion from all affected parties?

☐ Yes, consent was obtained by all parties

☐ Consent was obtained by some, but not all parties

☐ No attempt was made

☐ Despite diligent efforts consent could not be obtained

Further Explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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:

Print Name:

Address:

Phone No.:

E-Mail: