

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.:

BZA Applicant NO. 21250

Motion of:

Applicant Petitioner Appellant Party Intervenor Other ANC 4B

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

“The neighbors are unanimous in their opposition to this proposed facility.” It has been requested they first present in front of the commission. - ANC4B

Points and Authorities:

On a separate sheet of 8 1/2" 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: The attorney for the applicant stated he can not attend our May meeting. This means the earliest we can vote on the resolution as ANC4B. ANC4B recognizes the need for expanded healthcare however, this facility as it is stated raises significant concerns.

CERTIFICATE OF SERVICE

I hereby certify that on this

23

day of

March

, 2023

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:

Sophia Tekola

Address:

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Phone No.:

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Board of Zoning Adjustment

District of Columbia

CASE NO.21250

EXHIBIT NO.24

ANC4B05@anc.dg.gov