

INFORMATION

A request is functionally similar to a motion. The difference is that requests are filed by those who are not parties, whereas motions are filed by those who are parties.

Use this form if you are not a party to a case and would like to request that the Zoning Commission (ZC) or Board of Zoning Adjustment (BZA) accept an untimely filing or to request the record to be reopened. For example:

- a). A party status request filed within 13 days of hearing; or
- b). A request to reopen a closed record to accept a document.

A request to accept an untimely filing will be entertained by the ZC or BZA 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 Subtitle Z § 602.6 and Subtitle Y § 602.6, the request will be presented to the Chairperson 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 Request, 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. All information shall be furnished by the maker of the 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;
 - 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 Request, including relevant references to the Zoning Regulations or Map;
 - o Signature and Date; and
 - o Contact Information.
3. Submit the required Form 153 to the Office of Zoning using:
 - a. The Interactive Zoning Information System at www.dcoz.dc.gov for electronically filed cases;
 - b. In person or by US mail at 441 4th Street, N.W., Suite 200-S, Washington, D.C. 20001; or
 - c. By email to zcsubmissions@dc.gov for the ZC or bzasubmissions@dc.gov for the BZA.
 - d.
4. Please note, if you are requesting to reopen the record through IZIS, you will not be able to upload documents you are seeking to be accepted in to the record. You will need to submit those documents separately using options b or c of line 3 above.
5. Pursuant to 11 DCMR Subtitle Z § 407.3 and Subtitle Y § 407.3 At the time of filing, requestor is 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 FOR THE DISTRICT OF COLUMBIA**



FORM 153 – REQUEST TO ACCEPT AN UNTIMELY FILING OR TO REOPEN THE RECORD

THIS FORM IS FOR NON-PARTIES ONLY. IF YOU ARE A PARTY, PLEASE FILE A FORM 150 – MOTION.

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.:

I, _____ hereby request the following relief:

Accept an untimely filing of _____

To reopen the record to accept _____

Points and Authorities:

Accept an untimely filing: Please state each and every reason you believe the Zoning Commission (ZC) or Board of Zoning Adjustment (BZA) should grant your request to accept an untimely filing, including relevant references to the Zoning Regulations or Map. If you require more space, please use a separate piece of paper.

Reopen the Record: Please state each and every reason you believe the ZC or BZA should grant your request to reopen the record, including relevant references to the Zoning Regulations or Map. **The document(s) that you are requesting the record to be reopened for must be submitted separately from this form (see instructions). No substantive information is to be included on this form.**

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 application/petition 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)

Date:		Signature:	
Name:			
Address:			
Phone No(s):		E-Mail:	

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