



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



FORM 129 – ADVISORY NEIGHBORHOOD COMMISSION (ANC) REPORT

Before completing this form, please review the instructions on the reverse side.

Pursuant to §§ 3012.5 and 3115.1 of Title 11 DCMR Zoning Regulations, the written report of the Advisory Neighborhood Commission (ANC) shall contain the following information:

IDENTIFICATION OF APPEAL, PETITION, OR APPLICATION:

| | | | |
|---------------------------------------|--|------------|--|
| Case No.: | | Case Name: | |
| Address or Square/Lot(s) of Property: | | | |
| Relief Requested: | | | |

ANC MEETING INFORMATION

| | | | | | | | | | | | | | |
|--|---|---|---|---|---|---|---|---|---------------------------|-----|--------------------------|----|--------------------------|
| Date of ANC Public Meeting: | D | D | / | M | M | / | Y | Y | Was proper notice given?: | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| Description of how notice was given: | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| Number of members that constitutes a quorum: | | Number of members present at the meeting: | | | | | | | | | | | |

MATERIAL SUBSTANCE

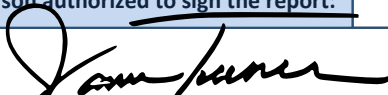
The issues and concerns of the ANC about the appeal, petition, or application as related to the standards of the Zoning Regulations against which the appeal, petition, or application must be judged (*a separate sheet of paper may be used*):

While the ANC recognizes that a new architect has taken over management of the project, there was broad concern about past issues that the project site has had, from illegal construction to neighbor complaints of holes in their walls.

The recommendation, if any, of the ANC as to the disposition of the appeal, petition, or application (*a separate sheet of paper may be used*):

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AUTHORIZATION

| | | | |
|--|---|---|-------|
| ANC | | Recorded vote on the motion to adopt the report (i.e. 4-1-1): | |
| Name of the person authorized by the ANC to present the report: | | | |
| Name of the Chairperson or Vice-Chairperson authorized to sign the report: | | | |
| Signature of Chairperson/ Vice-Chairperson: |  | | Date: |

**ANY APPLICATION THAT IS FOUND TO BE INCOMPLETE MAY NOT BE ACCORDED "GREAT WEIGHT" PURSUANT TO
11 DCMR §§ 3012 AND 3115.**