



22 Reade Street, 1st Floor  
 New York, NY 10007  
 Phone:(212) 386-0009 Web:  
 www.nyc.gov/bsa

BSA APPLICATION NO.:	_____
COMMUNITY BOARD NO.:	_____
BOROUGH:	_____

## Community Board Recommendation Report

### I. Identification *(Information from the application)*

Applicant(s) Information:  	Property Information:  Address:  Block:                      Lot(s):
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### II. Project Description

### III. Recommendation of Community Board

Date of Recommendation:

Recommendation submitted by:	Community Board
Recommendation	Vote
Approve	_____ In Favor
Approve with Modifications/Conditions	_____ Against
Disapprove	_____ Abstaining
Recommendation Waived	_____ Number of Community Board Members

### IV. Conditions/Comments

*Summarize the reasons for the Community Board Recommendation or attach a copy of the full report, if necessary*

  
  
  
  
  
  
  
  
  
  

Is there a minority report?      NO      YES *(If yes, summarize on attached copy)*

<i>Name of CB officer completing this form</i>	<i>Title</i>	<i>Date</i>
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Return completed form to the Board of Standards and Appeals and any attachments via E-mail to: [submit@bsa.nyc.gov](mailto:submit@bsa.nyc.gov)