

Zoning Challenge and Appeal Form (for approved applications)

Must be typewritten

1 Property Information Required	Property Information Required for all challenges.							
BIS Job Number		BIS Document Number						
Borough	House No(s)	Street Name						
2 Challenger Information Option	al.							
<u>Note to all challengers</u> : This form	Note to all challengers: This form will be scanned and posted to the Department's website.							
Last Name	First Name	Middle Initial						
Affiliated Organization	Affiliated Organization							
E-Mail	E-Mail Contact Number							
3 Description of Challenge Req	B Description of Challenge Required for all challenges.							
<u>Note</u> : Use this form <u>only</u> for chall	<u>Note</u> : Use this form <u>only</u> for challenges related to the Zoning Resolution							
Select one: Initial challe	Select one: Initial challenge Appeal to a previously denied challenge (denied challenge must be attached)							
Indicate total number of pages subn	Indicate total number of pages submitted with challenge, including attachments: (attachment may not be larger than 11" x 17")							
Indicate relevant Zoning Resolution challenge.	Indicate relevant Zoning Resolution section(s) below. Improper citation of the Zoning Resolution may affect the processing and review of this challenge.							

Describe the challenge in detail below: (continue on page 2 if additional space is required)

<u>Note to challengers:</u> An official decision to the challenge will be made available no earlier than 75 days after the Development Challenge process begins. For more information on the status of the Development Challenge process see the Challenge Period Status link on the Application Details page on the Department's website.

ADMINISTRATIVE USE ONLY				
Reviewer's Signature:	Date:	Time:	WO#:	

4 **Description of Challenge** (continued from page 1)

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ADMINISTRATIVE USE ONLY		
Reviewer's Signature:	Date:	Time: