

APPEAL OF ZONING CODE VIOLATION TO THE DEPARTMENT

(Pursuant to the Los Angeles Housing Code)

Read all instructions before proceeding.

1. What is the purpose of this form?

Any party wishing to appeal an order issued pursuant to the Los Angeles Housing Code (Article I, Chapter XVI of the Los Angeles Municipal Code) relative to the application and enforcement of the Los Angeles Zoning Code may submit this form requesting the Department to review the order. You may consider calling staff at the number provided on the order for questions prior to submitting this form.

<u>ATTENTION</u>: This form is NOT for appealing (1) a General Manager's Hearing Officer Decision issued pursuant to Division 8 of the Los Angeles Housing Code, (2) Non-Zoning Code violations cited on the Order, or (3) Inspection fees and/or penalties.

2. When to file this form?

This form must be filed with the Department before the expiration of the compliance date specified in the order.

3. Where to file this form?

This form will be accepted at LAHD public counter or by mail at the following addresses:

- a. LAHD CENTRAL/SUNSET OFFICE: 1910 Sunset Blvd, Ste. 300, Los Angeles, CA 90026.
- b. LAHD EAST OFFFICE: 2130 East 1st St, #2600, Los Angeles, CA 90033
- c. LAHD VALLEY OFFICE: 6400 Laurel Canyon Blvd., #610, North Hollywood, CA 91606
- d. LAHD SOUTH OFFICE/Council District 8 CSC: 8475 Vermont Ave., Los Angeles, CA 90044

4. How to prepare this form?

- a. Read and follow all instructions provided on this page. If you are the person appealing, you are the "Appellant."
- b. Complete all parts (A-D). Read, sign and date part E.
- c. Identify all attachment/supporting documents by writing the case number on bottom right of each page.
- d. The Appellant has the burden of proving the basis of the appeal by a preponderance of the evidence.
- e. For more information on Appeals, please refer to Section 161.1003 of the Los Angeles Municipal Code.

5. Is there a fee required to be submitted with this form?

Yes, you must submit an Appeals Processing Fee (APF) with your appeal form. If mailing the appeal, attach a check or money order for exactly one hundred and twenty-eight dollars (U.S. \$128) made payable to "City of Los Angeles-LAHD." Be sure to write the parcel number (APN), case number, and if applicable, statement/invoice number on your check. To pay the filing fee by credit card or cash, please visit one of the locations listed above.

6. What is the Appeals Process?

After the Department accepts/receives the appeal, it is forwarded to appropriate staff for compliance review. If the appeal complies with the law, it will be processed. If the appeal does not comply with the law, it will be returned. After processing your appeal, the Department will review the appeal and issue a decision within 30 calendar days of the filing of the appeal or within such further time as maybe required. You may appeal the Department's decision to the Director of Planning in accordance with Article 13, Chapter 1A of the Los Angeles Municipal Code. Filing of the appeal shall stay enforcement of those portions of the challenged order except when the violations are found to constitute an imminent danger or hazard to life or limb, health or safety. If you have any questions regarding the appeals process or would like to know the status of your appeal, kindly call the number provided on the order and request to speak with the Senior Inspector by providing the APN and/or LAHD case number.



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PART A: PROPERTY INFORMATION						
Property Address						
Assessor Parcel Number		Council District				
Owner's Name		Owner's Phone #				

PART B: APPELLANT INFORMATION								
Appellant's Name								
Appellant's Status		□ Owner □ Authori		zed Agent/Representative		□ Other:		
Appellant's Mailing Address								
Appellant's Phone #	·			Appellant's Email				

PART C: CASE INFORMATION

LAHD Case #

Date Notice/Order Issued

Compliance Date

PART D: BASIS FOR APPEAL (JUSTIFICATION)

The Department may only reverse or modify an action upon finding an error of law, error of fact, or abuse of discretion. Please describe specifically, how the issuance of the order was in error or constituted an abuse of discretion. Check this box if you are attaching additional sheets and/or documents/photos/permits etc.

PART E: ACKNOWLEDGEMENT AND SIGNATURE OF APPELLANT

I have read and understood all instructions and I declare that the information stated in this form and any accompanying documents is true and correct to the best of my knowledge.

Appellant's Signature:

Date:

THIS SPACE FOR LAHD OFFICE USE ONLY					
Stamp	Code				
	Reviewed By:				
	Status: Process Return				
	Return Reason:				