



APPEAL OF ZONING CODE VIOLATION TO THE DEPARTMENT

(Pursuant to Sections 161.1001.A.2 and 161.1003 of the Los Angeles Housing Code)
CED FORM # 2. REV DATE: 08-13-2018



A. 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.

ATTENTION: 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.

B. When to file this form?

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

C. Where to file this form?

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

HCIDLA CENTRAL OFFICE 3550 Wilshire Blvd, Suite 1500 Los Angeles, CA 90010	HCIDLA EAST OFFICE 2130 E. 1 st Street, Suite 2600 Los Angeles, CA 90031	HCIDLA WEST OFFICE 1645 Corinth Ave, Suite 104 Los Angeles, CA 90025
HCIDLA NORTH OFFICE 6400 Laurel Canyon Blvd., Suite 610 North Hollywood, CA 91606		HCIDLA SOUTH OFFICE 690 Knox Street, Suite 125 Torrance, CA 90502

D. How to prepare this form?

- Read and follow all instructions provided on this page. If you are the person appealing, you are the “Appellant.”
- Complete all parts (A-C) on page 2. If you do not have the information, write N/A.
- Read, sign and date part D on page 2.
- Identify all supporting documents by writing the case number on bottom right of each page.
- The Appellant has the burden of proving the basis of the appeal by a preponderance of the evidence.
- Make sure to attach a copy of the contested order with this form.
- For more information on Appeals, please refer to Section 161.1003 of the Los Angeles Municipal Code.

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

Yes, you must submit an Appeals Processing Fee (APF) with this form. If mailing the form, attach a check or money order for exactly one hundred and twenty-eight dollars (U.S. \$128) made payable to “City of Los Angeles-HCIDLA.” Be sure to write the parcel number (APN) and statement/invoice number on your check. To pay the filing fee by credit card or cash, please visit one of the above locations. Approval of your appeal does not mean that your APF will be refunded to you. The APF will be refunded only upon finding of Department error.

F. What is the Appeals Process?

After processing your form and payment, the Department will review your appeal and make its decision within 30 calendar days of the filing of the appeal or within such further time as maybe required. The Department’s decision is NOT a final decision. You may appeal the Department’s decision to the Director of Planning in accordance with Section 12.26.K 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 HCIDLA case number.



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PART A: PROPERTY-APPELLANT INFORMATION

APN #: _____

Property Address: _____

Owner's Name: _____

Appellant's Name: _____

Appellant's status: Owner Authorized Agent/Representative

Other: _____

Appellant's Mailing Address: _____

Appellant's Phone #: _____

Appellant's Email: _____

THIS SPACE FOR HCIDLA OFFICE USE ONLY

Place received stamp here

Appeals Processing Fee Paid? Yes No

Payment Type: Cash CC Check: _____

Office: East West North South Central

Processed By: _____

PART B: ORDER INFORMATION

HCIDLA Case #: _____ Date of the Order: _____ Compliance Date on the Order #: _____

PART C: 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 cited zoning code violation 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 D: ACKNOWLEDGEMENT AND SIGNATURE OF APPELLANT

I have read and understood all instructions provided on page 1 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: _____