



## DEPARTMENTAL SUBMISSION

DEPARTMENT: Legislative Policy Division - City  
Planning  
FILE NUMBER: Legislative Policy Division - City  
Planning -0242

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**\* RE:**

Submitting reso. autho.

**\* SUMMARY:**

NEZ Certificate Application for 229 Edmund Place

**\* RECOMMENDATION:**

Recommend Approval

**\* DEPARTMENTAL CONTACT:**

Name: Sabrina Shockley  
Position: Administrative Assistant

**\*=REQUIRED**