

APPEAL OF DECISION CHECKLIST

GENERAL APPEAL PROCEDURE CCZO - Section 07-05-05 or 07-05-07

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH THIS APPLICATION TO BE DEEMED COMPLETE (PLEASE CHECK OFF THE ITEMS REQUIRED):

Description	Applicant	Staff					
Master Application completed and signed							
Letter of Intent/Statement of Reason							
Fee: \$600.00							
Fees are non-refundable							

*DISCLAIMER: The subject property shall be in compliance with the public nuisance ordinance, the building code and the zoning code before the Director can accept the application.



APPEAL OF DECISION APPLICATION

	NAME:							
APPELLANT	MAILING ADDRESS:							
	PHONE:		EMAIL:					
Property owner:								
Signature: Date:								
		NAME:						
REPRESENTATI		COMPANY NAME:						
FROM THE APPELLANT		MAILING ADDRESS:						
AFFELLANI		PHONE: EMAIL:						
	ST	REET ADDRESS:						
SITE INFO	PARCEL NUMBER:							
	PARCEL SIZE:							
CASE NUMBER OF REQUESTED APPEAL:								
FOR DSD STAFF COMPLETION ONLY:								
CASE NUMBER DATE RECEIVED:								
RECEIVED BY:		APPLICATION FEE: CK CC CASH						
KECEIVED BY:	D B1. APPLICATION FEE. CK CC CF							