



# APPEAL APPLICATION

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G E N E R A L	LOCATION OF PROJECT (ADDRESS)	<b>Note: This form is for appeals of Department actions only. Appeals of Commission and Board actions are filed in the City Manager's Office.</b>	
	NAME OF PROJECT		
	APPELLANT NAME	DAYTIME PHONE (    )    -	HOME PHONE (    )    -
	APPELLANT ADDRESS	CITY	STATE

A P P E A L	To the Chairman and Members of the Planning Commission / Design Review Board/Cultural Heritage Board:
	The undersigned: _____ does hereby appeal to the Planning Commission /
	Design Review Board/Cultural Heritage Board the decision of the Department of Planning and Economic Development made on _____ <span style="float: right; font-size: 0.8em;">(Date)</span>
	which _____ the application of _____ <span style="float: left; font-size: 0.8em;">(approved, denied, other)</span> <span style="float: right; font-size: 0.8em;">(Name of property owner or developer)</span>
	for a _____ <span style="font-size: 0.8em;">(State nature of request made to the Planning and Economic Development Department)</span>
	on property situated at _____ <span style="font-size: 0.8em;">(Street address of subject property)</span>
	A. The grounds upon which this appeal is filed are: (list all grounds relied upon in making this appeal. Please attach additional sheets if more space is needed.)
	1. _____ _____ _____
	2. _____ _____ _____
	B. The specific action which the undersigned wants the City Planning Commission/Design Review Board/Cultural Heritage Board to take is:  _____ _____ _____
<div style="display: flex; justify-content: space-between;"> <span>_____</span> <span>_____</span> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <span><b>Appellant's signature</b></span> <span><b>Date</b></span> </div>	