



# APPEAL APPLICATION

COMMUNITY & ECONOMIC DEVELOPMENT DEPARTMENT

567 EL CAMINO REAL, SAN BRUNO, CA 94066

TEL: 650. 616. 7074

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## APPLICANT INFORMATION

Name: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: ( \_\_\_\_ ) \_\_\_\_\_ Fax Number: ( \_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

## ACTION APPEALED

Project Address: \_\_\_\_\_

Case Number(s): \_\_\_\_\_ Date of Action Appealed: \_\_\_\_\_

## REASON FOR APPEAL (attach additional sheets as necessary)

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Signature (Applicant): \_\_\_\_\_ Date: \_\_\_\_\_

## TYPE OF APPLICATION

\_\_\_ Appeal to Director's Decisions - \$500.00

\_\_\_ Appeal to Planning Commission - \$510.00

\_\_\_ Appeal to City Council - \$790.00

Total Fees Paid: \_\_\_\_\_ Check #: \_\_\_\_\_