CITY OF ORINDA

Notice of Appeal (file with the City Clerk)

22 Orinda Way • Orinda, CA 94563 • http://www.cityoforinda.org

Administration • (925) 253-4220 • FAX (925) 254-2068 • cityoffices@cityoforinda.org
Planning • (925) 253-4210 • FAX (925) 253-7719 • orindaplanning@cityoforinda.org

This is an appeal of the following: (please type or print the information requested below)
A written notice of appeal, specifying the grounds for appeal, is submitted to the City Clerk during normal business hours (Monday through Friday, 8:00 AM to 12:00 PM and 1:00 PM to 5:00 PM) within ten (10) calendar days, with appropriate fees. The time to file action to challenge the decision is governed by the Code of Civil Procedure, Section 1094. The fee is 25% of original application fee but not less than $576 and not more than $1,616 + cost of preparing meeting minutes for decision(s) being appealed.

Appellant's Name: _____ Telephone Number: _____

Mailing Address: _____

E-Mail Address: _____

Property Owner's Name: _____ Telephone Number: _____

Mailing Address: _____

E-Mail Address: _____

I hereby appeal the decision of the (circle one) Zoning Administrator / Planning Commission
(decision-making body)

made on _____ pertaining to _____.
(date) (application type and number)

The action I request and the reasons for this appeal are as follows: (may attach additional sheet)

_____

_____

_____

_____

_____

My interest in this matter is as:

_____ Applicant _____ Owner/renter of land in vicinity

_____ Applicant's representative _____ Other – explain: _____

All appeals must be filed with the City Clerk and accompanied by the applicable appeal fee made payable to the City of Orinda in cash or check form. Please refer to the City's fee schedule for applicable fee amount.
Appellant's signature _____

Staff Use

Type & Application Number of Action Appealed: _____

Applicant Name, Address & Contact Information: _____

Appealed To: _____ Date Appeal Filed: _____ Fee Paid: _____

Received By: _____ Date: _____