APPEALS FORM FOR NOTICE OF APPEAL

Notice of Zoning Appeal **must be accompanied** by appeal fee of $250.00 when filing notice of appeal with the City Clerk. Resolution 06-24(S), Zoning Appeals - fee $250.00 subject to refund if the appellant is successful on any aspect of appeal.

APPELLANT: ____________________________

ADDRESS: ____________________________________________________________

APPELLEE: ____________________________________________________________

SUBJECT OF APPEAL: ________________________________________________

Description of the action or determination from which the appeal is sought: ____________________________________________________________

Date upon which the action or determination became final: ________________

Street address and legal description of the property that is the subject of the action or determination being appealed, and the name and address of property owner(s):

____________________________________________________________________

____________________________________________________________________

Detailed and specific allegations of error, including reference to applicable provisions of the zoning code or other law:

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Statement of whether the action or determination should be reversed, modified, or remanded for further proceedings, or any other desired relief:

____________________________________________________________________

____________________________________________________________________

01/05/09 - clerk
City of Homer
Notice of Appeal Form

Proof showing that the appellant is an aggrieved person with standing to appeal under Homer City Code 21.93.050 or 21.93.060, whichever is applicable.

Additional pages may be attached. Number of pages attached, if none put "0". ____________

ZONING APPEAL FEE PAID: _______________

SIGNATURE OF APPELLANT ________________________ DATE ________________________

Clerk initial fee received for zoning appeal: __________
HCC 21.93 attached

01/05/09 - clerk