

City of Richland Development Services

APPEAL APPLICATION

Note: This is to be used for appeals to Type I applications only.

APPELLANT	Contact Person
Name:	
Mailing Address:	
Phone:	Email:
APPELLANT'S REPRESENTATIVE (if applicable)	Contact Person
Company:	
Contact:	
Mailing Address:	
Phone:	Email:
IDENTIFY THE CASE FILE TO BE APPEALED	
Case File Number (i.e. BLA2021-101):	Date of Decision:
Site Address of the Subject Property:	
APPLICATION MUST INCLUDE	
 Completed, signed application form A full, electronic version of all submitted materials in PDF format 	

3. Filing fee

DESCRIPTION OF DECISION BEING APPEALED:

REASON FOR APPEAL – Please detail the basis of the appeal, including which process, approval criteria, development standards, or conditions of approval were allegedly improperly evaluated or applied to the decision. Attach an additional sheet if necessary.

CERTIFICATION

I certify the information on this application is true and correct to the best of my knowledge.

Appellant's Signature: _____ Date _____