



**Appeal Decision  
City of Sacramento Design Director/ Commission**

Date: \_\_\_\_\_

To the Planning Director:

I do hereby make application to appeal the decision of the City Design Director/ Commission on \_\_\_\_\_, when the following entitlement(s):  
(date)

- \_\_\_\_\_ Structural Review
- \_\_\_\_\_ Building Move
- \_\_\_\_\_ Sign Review
- \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ Was/ Were Granted by the City Design Director/ Commission  
 \_\_\_\_\_ Was/ Were Denied by the City Design Director/ Commission

Property Location: \_\_\_\_\_

Grounds For Appeal: (explain in detail, you may attach additional pages)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Appellant: \_\_\_\_\_ Daytime Phone: ( ) \_\_\_\_\_  
 (please print)

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

Appellant's Signature: \_\_\_\_\_

Please note that once this application is submitted to the City of Sacramento, your information may be subject to public record.  
 However, please note that the City will not sell your data or information for any purposes.

<b>THIS BOX FOR OFFICE USE ONLY</b>	
Filing Fee Received: Applicant (\$596 Commission/ \$1,192 ENA or Council) _____	Or Third Party (\$298) _____
Received By: _____	Date: _____
Distribute Copies to: Planning Director _____	Urban Design Manager _____
Design Director _____	Original & Receipt in File _____