



**Appeal Decision
City of Sacramento Planning Director**

Date: _____

To the Planning Commission:

I do hereby make application to appeal the decision of the City Planning Commission on _____
(approval date), for project number P _____
(date)

_____ Plan review _____ for _____
_____ Other _____ for _____

_____ Granted by the City Planning Director
_____ Denied by the City Planning Director

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.

THIS BOX FOR OFFICE USE ONLY	
Received By: _____	Date: _____
Distribute Copies to: Planning Director _____	
Zoning Administrator _____	Original & Receipt in File _____