

**APPEAL APPLICATION**

**CITY OF HUBBARD**

FILE: \_\_\_\_\_

DATE: \_\_\_\_\_

FEE: \_\_\_\_\_

RECEIPT NO: \_\_\_\_\_

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APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

OWNER(S): \_\_\_\_\_ PHONE: \_\_\_\_\_

(If different from above)

ADDRESS: \_\_\_\_\_

REQUEST: \_\_\_\_\_

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**PROPERTY DESCRIPTION:**

ADDRESS: \_\_\_\_\_

MAP PAGE AND TAX LOT NO: \_\_\_\_\_ ZONE: \_\_\_\_\_

CURRENT USE/STRUCTURES: \_\_\_\_\_ SQUARE FOOTAGE OF SITE: \_\_\_\_\_

IS THE SITE OF HISTORIC SIGNIFICANCE? \_\_\_\_\_

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**LAND USE FILE INFORMATION:**

LAND USE FILE NUMBER(S): \_\_\_\_\_

DATE OF PLANNING COMMISSION HEARING: \_\_\_\_\_

DATE OF NOTICE OF DECISION: \_\_\_\_\_

APPEAL PERIOD: \_\_\_\_\_

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**SUBMITTAL REQUIREMENTS:**

1. State the alleged errors of the City staff decision or in the Planning Commission action based upon the approval criteria or any other local, state, or federal regulations that applied to the application.

**NOTE: ALL OWNERS MUST SIGN THIS APPLICATION OR SUBMIT LETTERS OF CONSENT. INCOMPLETE OR MISSING INFORMATION MAY DELAY THE APPROVAL PROCESS.**

_____	_____
Date	Applicant
_____	_____
Date	Owner(s)
_____	_____
Date	Owner(s)