APPEAL FORM

1. Application No.: ________________________________________________________________

2. Applicant(s) Name: _____________________________________________________________

3. Project Planner: ________________________________________________________________

4. Appellant(s) Name: ____________________________________________________________

   Address: _______________________________________________________________________

   Phone Number: _________________________________________________________________

   Email: ________________________________________________________________________

5. Please check one:
   
   Note: Do not use this form for Administrative Citation decisions (1.16), Petitions for Reconsideration (2.08.096), or Damage to Public Trees (14.12)

   a. Appeals regarding Title 19 (Zoning) and 14.18 (Protected Private Trees):
      - ☐ Administrative decision (14 calendar days after decision to appeal)
      - ☐ Planning Commission decision (14 calendar days after decision to appeal)
      - ☐ Design Review Committee decision (14 calendar days after decision to appeal)

   b. Other appeals:
      - ☐ Director of Community Development decision regarding Tentative Maps (18.20) (14 calendar days after decision to appeal)
      - ☐ Street Improvements (14.04) (30 calendar days after date of decision to appeal)
      - ☐ Code Enforcement regarding Massage Permits (9.06) (5 business days after receipt of notice of decision to appeal)
      - ☐ Solicitor’s Identification Permit (5.20) (10 calendar days after denial notice to appeal)

6. Date of decision or mailing of notice of decision: ________________________________

7. Specifically state the grounds and basis for appeal: ______________________________

   ____________________________________________________________________________

   ____________________________________________________________________________

G:\City Clerk\Appeals & Call For Review\Appeal Forms\Appeal form.docx
(Attach additional pages if necessary)

Please complete form, include appeal fee of $277.00 pursuant to Resolution No. 19-038 ($685.38 for massage application appeals), and return to the attention of the City Clerk, 10300 Torre Avenue, Cupertino, (408) 777-3223.

Signature(s): ____________________________________________
19.12.170 Appeals.

A. An appeal may be filed by any person, firm or corporation aggrieved or affected by any grant, denial, modification or revocation of any permit, or any determination or interpretation related to any provision of this title.

B. Filing:

1. An appeal shall be in writing on forms prescribed by the City and shall be filed during regular office hours with the City Clerk within fourteen calendar days after the City decision or if a notice of decision is not required, from the date of the decision or determination, under this title. An appeal not filed within such time shall be barred. The appeal shall state the grounds and basis thereof.

2. Appeals under this chapter are subject to an appeal fee as prescribed by resolution of the City Council.

C. Noticing: Notice of hearing shall be given in the same manner in which the original notice was given. If a project with no noticing is appealed, appropriate noticing shall be determined by the Director of Community Development.

D. Appeal hearing body shall be determined in accord with Section 19.12.030.

E. Decision of the appeal hearing body: The decision or determination of the appeal hearing body on any appeal shall be final and effective immediately.

F. Notice of Decision: Notice of the appeal hearing body’s decision shall be mailed to the original applicant, to the person filing the appeal, and to any other person who has filed a written request with the City Clerk.