



CITY OF CANNON BEACH

NOTICE OF APPEAL - ADMINISTRATIVE DECISION

Appellant's Name: _____

Email Address: _____

Mailing Address: _____

Telephone: _____

1. Appeal of Administrative Decision by _____, regarding:

as stated in letter dated _____.

2. Specific grounds relied upon for the appeal, including any Zoning Ordinance criteria or standards that you consider to be relevant:

Please attach additional pages, if needed, and any other relevant information.

FEE: \$600.00

Appellant Signature: _____ Date: _____

For Staff Use Only:

Date Appeal Received: _____ By: _____

Appeal Fee Paid: _____ Receipt No.: _____

Fee:

803 - Planning \$600

(Last revised March 2021)