



CITY of CALABASAS

Community Development Department
Planning Division
100 Civic Center Way
Calabasas, CA 91302
(818) 224-1600

www.cityofcalabasas.com

Appeal Application

GENERAL INFORMATION (print or type)

Appellant: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Cell / Other Phone: _____ E-mail: _____

Appellant's Representative: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

Cell / Other Phone: _____ E-mail: _____

SUBJECT OF APPEAL (Please check approval body who made decision being appealed)

This appeal is hereby filed pursuant to Chapter 17.74 of the Calabasas Municipal Code, appealing the action of the following reviewing authority:

Administrative/Staff (includes Director's Hearings)

Planning Commission

Date of Decision: _____

Project File No.: _____

ACTION / DECISION

Identify the specific action or decision which is being appealed: _____

TO BE COMPLETED BY PLANNING DIVISION STAFF

Application Processing

File No(s): _____

Submittal Date: _____

Staff Initials: _____

Fees: _____

Receipt No: _____



Minimum Application Filing Requirements Checklist

MINIMUM APPLICATION FILING REQUIREMENTS

This checklist will be used by staff to determine if an application is complete for processing purposes. If any items are not included the project will not be accepted for submittal.

Appeals:

The minimum requirements for filing an appeal application are listed below. An application that does not include the following plans and information will not be accepted for processing:

- Completed *Appeal Application* and filing fees.
- Public hearing information prepared in accordance with the *Public Notice Requirements* as follows:
 - Property Ownership List: A mailing list containing the names, addresses, and assessor's parcel number of all owners of real property within a radius of five hundred feet (500') of the site, measured from the exterior boundaries of the property. This information shall be obtained from the latest equalized assessment rolls of Los Angeles County (property ownership information may be obtained from Los Angeles County Assessor's Office 14340 Sylvan Street, Van Nuys, CA 91401, phone: (818) 901-3455). Include the name and address of the property owner, applicant, and representative of the mailing list.
 - Mailing Envelopes: One set of stamped (\$0.65 postage) business-size envelopes, with the name and address of each person on the mailing list. The return address shall read: "City of Calabasas, Planning Division, 100 Civic Center Way, Calabasas, CA 91302".
 - Radius Map: A map illustrating the five hundred foot (500') radius boundary and all parcels within the boundary (copies of the assessor's maps will be accepted).

Note: For a list of individuals/companies that prepare the radius map and property ownership lists, contact the City of Calabasas Planning Division.

- As an option to completing the public hearing information required for this application, the applicant may pay a fee to have the City of Calabasas provide the public hearing information required. The Fee for this service is as follows:

\$188.00 plus \$0.65 per each property within 500 feet.