APPEAL APPLICATION FORM

Updated: September, 2020

Associated Case # - -



CONTACT INFORMATION

Appellate Name		Appellate Mailing Address		
Company		Company		
Appellate Phone #		Appellate Email		
ORIGINAL APPLICATION INFORMATION Subject Property Address: Original Application Type: REASON FOR APPEAL				
I am: Owner of Property within the Notification Area Briefly describe the reason for appeal (attach additional pages if needed):				

AUTHORIZATION

By submitting this digital application, I certify that the information on this application is complete and accurate. I understand the fees and the process for this application. I understand my responsibility, as the applicant, to be present at meetings regarding this request. Appeal, if property is located within 400ft of the subject property:

Filing Fee \$106 Technology Fee \$13 TOTAL COST \$119

All other appeals:

Filing Fee \$634 Technology Fee \$13 TOTAL COST \$647

Submittal of this digital Application shall constitute as acknowledgement and authorization to process this request.

Submit Appeal Application to: planninginfo@sanmarcostx.gov