

CITY OF SANTA ANA Clerk of the Council Office 20 Civic Center Plaza, 8th Floor Santa Ana, CA 92702 Phone: (714) 647-6520 Fax: (714) 647-6956 CityClerk@santa-ana.org CHAPTER 3 APPEALS

| For COTC Office Use Only |
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| |
| Received by: |
| Payment received: |
| Date Agency notified: |

INSTRUCTIONS

The procedure for filing an appeal is specified in Chapter 3 of the Santa Ana Municipal Code and shall apply to specified hearings, whether on matters of initial application or on appeal from the decision of city officials, boards or commissions.

Note that Chapter 3 Appeal provisions do not apply to:

- (1) Hearings to consider the master plan or the general plan.
- (2) Hearing to determine whether public convenience and necessity require acquisition of property for public use.
- (3) Hearings to consider parcel maps.
- (4) Hearings to review or consider on appeal any action of the planning commission or zoning administrator (Refer to Chapter 41 of the SAMC).

In an effort to assist citizens with the appeal process, the Clerk of the Council Office has developed an appeal form. Please complete and sign this form before mailing or delivering to the Clerk's Office, along with the fee payment (see page 2), and supporting documentation, letters, etc. (if any).

All appeals must be filed in the Clerk's Office within 10 calendar days after notified of determination.

APPELLANT DECLARATION

In accordance with the provisions of the Municipal Code of the City of Santa Ana, State of California, I hereby appeal the following action:

| Name of decision making body being appea | aled: | |
|--|-----------------|---------------------------|
| Date of Action: | Case No.: | |
| Applicant's Name: | | |
| Street Address: | | |
| City, State, Zip Code: | | |
| Home Phone: | Work Phone: | |
| FAX: | E-mail address: | |
| I:\Appeals\APPEAL - FORM_2020.doc Revised 4/21/2020 | | Page 1 of 2 |

APPELLANT STATEMENT

Action being appealed:

| APPEAL FEES: | | |
|--------------------------------------|-------------|------------------------|
| Application Fee | Per Request | \$144.42 |
| Processing Fee | Per Request | \$48.93 |
| Labor Charges | Per Hour | \$48.93 |
| TOTAL DEPOSIT DUE | | \$ <mark>242.28</mark> |
| (Appellant to be billed ACTUAL cost) | | |

Fee payment must be received by the City of Santa Ana before this form submittal can be certified as complete. Checks or money orders should be made payable to City of Santa Ana and mailed or delivered to Clerk of the Council Office, 20 Civic Center Plaza, Santa Ana, California 92702.

An Appeal may be withdrawn at any time prior to a final decision. Proceedings on the appeal shall terminate as of the date of withdrawal. The City Manager may refund the appeal fee in part, depending on the amount of staff work and/or noticing fees that have been expended preparing the appeal for a Hearing.

Certification of Authenticity

Beware, you are subject to prosecution if you unlawfully submit this form, under penalty of law, transmission of this form to the City of Santa Ana is your certification that you are authorized to submit it and that the information presented is true.

Signature of Applicant

Date Signed