

II.

Planning and Building Agency Planning Division 20 Civic Center Plaza P.O. Box 1988 (M-20) Santa Ana, CA 92702 (714) 647-5804

# APPEAL APPLICATION

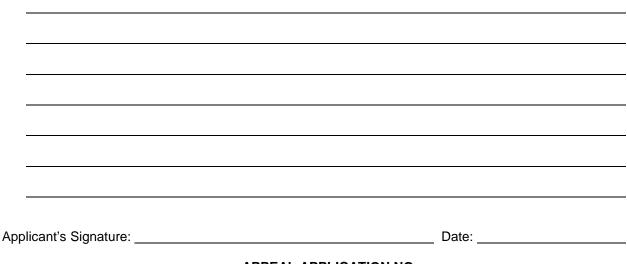
### I. OWNER/APPLICANT

Full some of Demon Firm on Composition	
Full name of Person, Firm, or Corporation	
	) Area Code Phone No.
5	Area Code Phone No.
Legal Owner Name:	
Legal Owner Address:	
Phone No.: ( ) ( ) F	Fax: ( )
PROPERTY INFORMATION	
Land Use	
Existing Land Use of Property and/or Building Zoning District	t General Plan Designatio
Location	
Street Address	Name of Nearest Intersecting Stree

## SEE REVERSE SIDE FOR SUBMITTAL REQUIREMENTS

### **III. REASON FOR REQUEST**

In the following provided space, please clearly specify and explain the error(s) of decision or requirement upon which you are basing this appeal. (If additional space is needed, please attach additional comments to the back of this application.)



APPEAL APPLICATION NO.

## SUBMITTAL REQUIREMENTS

- 1. An appeal application form (Exhibit 1).
- 2. A letter stating the nature of the appeal (in lieu of the space provided on the appeal form).
- 3. The application fee.
- 4. Any other pertinent information that the application warrants.