



# MENDOCINO COUNTY BOARD OF SUPERVISORS PLANNING APPEAL FORM

Appeals must be received in the Executive Office within the appeal period, 10 days from the date of the hearing\* (post-marks will NOT be accepted). The Clerk of the Board or Planning and Building Services will verify appeal fee amounts\*. The appeal fee must accompany the appeal letter/form in order to be considered valid.

*\*Verify with Planning and Building Services or with the Clerk of the Board of Supervisors*

Date Appeal Submitted*: _____	Appeal Fee*: \$ _____ <input type="checkbox"/> Verified <input type="checkbox"/> Receipt Generated
Case No.: _____	Applicant: _____
Heard by: _____	Hearing Date: _____
Source: Planning Commission • MHRB • Zoning Administrator • Administrative (Planning) • Coastal Permit Administrator	

Printed Name, Address, and Phone No. of Appealing Party:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(     ) \_\_\_\_\_ - \_\_\_\_\_

Basis for Appeal (*Please provide sufficient detail to describe the nature of the appeal. Letters describing appeal may also be attached*):

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Signature \_\_\_\_\_

**Submit completed form to:**  
Mendocino County Clerk of the Board  
501 Low Gap Road, Room 1010  
Ukiah, CA 95482  
(707) 463-4221

**Fee made out to :**  
County of Mendocino

**Staff Use:**

- Obtain Agenda for meeting/appeal verification (*distribute with appeal form to all parties listed below*)
- Appeal period verified and confirmed
- Appeal fee verified and confirmed
- Form distribution completed/Date Stamp form
- Copy of receipt and check attached to original appeal form and provided to DCOB
- Other \_\_\_\_\_