

Date Submitted: _____



City of Palmetto Florida Administrative Appeal

Appeal to Planning & Zoning Board Fee:	\$750
Appeal to City Commission Fee:	\$750

Note that appeals of the decision of the zoning administrator and/or building official are not to be used in place of requests for variances from the terms or provisions of the zoning code.

PROJECT NAME: _____

Permit Number	Permit Type Applied For	Issue Date of Permit Denial
Property Address		
DPID	Property Size	Existing Use

City of Palmetto Code Section(s) pertaining to property and project:

Grounds for Appeal - *Attach additional material if necessary.*

Owner Information

Prefix	First Name	Last Name	
Suffix	Title	Organizational Name	
Address			
City		State	County
			Postal Code
Home Phone	Work Phone	Fax Number	E-mail Address

Appellant Information (if not owner)

Prefix	First Name	Last Name	
Suffix	Title	Organizational Name	
Address			
City	State	County	Postal Code
Home Phone	Work Phone	Fax Number	E-mail Address

Other Information to be provided by appellant

Survey Map Showing Property and Vicinity (to scale)/Site Plan		Copy of Deed	Owner Authorization
--	--	---------------------	----------------------------

City records related to the decision or action being appealed will be provided by City Staff.

Appeals shall be submitted within sixty (60) days or a lesser period as may be provided by the rules of the City of Palmetto Code of Ordinances. Any person aggrieved by a decision of the planning and zoning board shall have thirty (30) days to apply for relief to the city commission. Non-refundable fees shall be paid upon filing the appeal, and no consideration shall be undertaken until all applicable fees are paid.

The owner of this property and the undersigned agree to conform to all applicable laws of the City of Palmetto and to all applicable Federal, State, and County laws

Signature of Owner/Appellant _____ Date _____

Completed by Notary Public:

State of _____ County of _____

Before me on this ____ day of _____, 20__ Personally appeared _____, who is personally known to me or produced _____ as identification, who acknowledged to me that he/she executed this petition freely and voluntarily for the purposes herein expressed. WITNESS, my hand and seal at said County and State, this day and year first above written.

Notary Public Signature _____

Print Name _____

My Commission Expires _____

Official Use

Date public notified

Date of hearing