

**APPLICANT**

Date \_\_\_\_\_

Public Hearing/Zoning Section  
Los Angeles County Board of Supervisors  
Room 383, Kenneth Hahn  
Hall of Administration  
500 West Temple Street  
Los Angeles, California 90012

**PROJECT  
NO.:**

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**APPLICANT:**

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**LOCATION:**

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**Zoned  
District:**

**Related zoning matters:**

**CUP(s) or VARIANCE No.**

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**Change of Zone Case No.**

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**Subdivision Project: YES \_\_\_\_\_ NO \_\_\_\_\_**

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This is an appeal on the decision of the Regional Planning Commission in the subject case. This form is to be presented in person with a check or money order, made payable to the "Board of Supervisors" (check or money order must be presented with personal identification), during regular business hours of 8:00 a.m. to 5:00 p.m. prior to the appeal deadline at the above address. (Appeal fees subject to change). Contact the Public Hearing/Zoning section of the Board of Supervisors for more information: (213) 974-1426.

**This is to appeal: (Check one)**

\_\_\_\_\_ **The Denial of this request \$9,460\* OR**

**2 or less conditions of the Project to be listed below: \$1,104\***

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**\*For Subdivisions \$260.00 of this amount is to cover the cost of the hearing by the Board of Supervisors**

**Briefly, explain the reason for this appeal (attach additional information if necessary):**

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**x**  
**(Signed)                      Appellant**

**Print Name**

**Street Address**

**City/Zip**

**Day Time Telephone Number**

**E-mail Address**