



PUBLIC WORKS - COMMUNITY DEVELOPMENT

333 Broadalbin Street SW, PO Box 490, Albany, Oregon 97321-0144 | BUILDING 541-917-7553 | PLANNING 541-917-7550

NOTICE OF APPEAL OR REQUEST FOR PUBLIC HEARING

The undersigned, who believe they have standing to appeal, or request a public hearing as they case may be, hereby request consideration by the

\_\_\_\_\_ of a decision made on \_\_\_\_\_ (Name of Board/ Commission, or City Council) (Date)

by the Albany \_\_\_\_\_ (Community Development Director, Hearings Board, Planning Commission, Landmarks Advisory Commission)

Relating to a request for \_\_\_\_\_ (case file name and number)

I am/we are appealing this decision because of the following defect(s) in the hearing process and/or interpretation of the criteria set forth in the Albany Development Code sections which are applicable to the previously stated land use request (Attach your findings of fact):

\_\_\_\_\_

I (we) understand that a hearing will be set for this appeal and I (we) will be present at that time to answer questions regarding this appeal.

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

TO BE FILLED OUT BY STAFF

Case No. (same as application request) \_\_\_\_\_

See Fee Schedule Filing Fee: Varies (fees subject to change every July 1)

Request for Public Hearing

Appeal to City Council

Appeal to Planning Commission

Appeal to Hearings Officer (expedited land division only)

\*The fee for a public hearing on a tentative decision shall be paid by the applicant, not the person requesting the hearing.

DATE FILED \_\_\_\_\_ FEE PAID \_\_\_\_\_

RECEIPT NO: \_\_\_\_\_ RECEIVED BY \_\_\_\_\_

