



CASSIA COUNTY ZONING AND BUILDING DEPARTMENT

1459 Overland Ave., Room 210, Burley, ID 83318 Ph: 208-878-7302

Notice of Appeal Form

Cassia County File No. _____

Date Filed: _____

APPEAL FROM:

Decision of Zoning Administrator

or

Decision of Planning and Zoning Commission

Name of Appellant _____

Address of Appellant _____

Email of Appellant _____ Telephone of Appellant _____

Description and narrative of Appellant's standing to appeal decision and the nature of the substantial rights of Appellant that are affected by the decision:

1. State the name of the applicant in the decision that you are appealing: _____

2. What is the date of that decision: _____

3. What is your bona fide interest in real property which may be adversely affected by issuance or denial of a permit authorizing the development? _____

4. What standards in Cassia County Code apply to the decision: _____

5. What standards are you claiming were wrongly decided by the Zoning Administrator/Planning and Zoning Commission: _____

6. Why should the decision of the Zoning Administrator/Planning and Zoning Commission be overturned on this appeal. Please explain in particular and specific detail the actual harm or violation of fundamental rights you will suffer if the decision is reversed: _____

(Additional pages may be attached as needed.)

Dated this _____ day of _____, 20 ____ .

Signature of Appellant

Printed Name of Appellant

FOR OFFICE USE ONLY:

FILING FEE PAID \$ _____ DATE FILING FEE PAID: _____

STAY OF PROCEEDING ISSUES: YES NO N/A

DATE SCHEDULED FOR A HEARING: _____
