



CITY OF MOSCOW
COMMUNITY DEVELOPMENT
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For City Use Only			
Date Received			
Dept	Fee Type	Fees	Paid
CDV	Application Fee	\$281.00	
Receipt Number			

APPLICATION FOR APPEAL (MCC 4-8-2 and 4-8-5)

(Please type or print plainly with blue ink.)

I, _____, hereby appeal the decision of the:

- Zoning Administrator Board of Adjustment Planning & Zoning Commission

File Number: _____ **Address/Project:** _____

Grounds for Appeal:

Appeals are limited to applicant(s), city representatives, or an affected person as defined by MCC 4-1-6.D.3.

- Decision violates statutory or constitutional provisions. Decision was unsupported by substantial evidence in the records or as a whole.
- Decision exceeds statutory authority. Decision was arbitrary, capricious, or an abuse of discretion.
- Decision was made upon unlawful procedure.

Appellant(s) must attach a letter detailing the following to complete the application:

Supporting materials requested herein may be included as attachments to the letter.

1. Describe the original request and the specific final decision being appealed.
2. If you are not the original applicant or city representative, describe the testimony or evidence you presented or provided prior to the final decision being made.
3. Provide evidence supporting the grounds for appeal.
4. Provide evidence that the applicant is an “affected person”, as defined by MCC, if not the original applicant or city representative.

Once your appeal has been accepted and a public meeting is set, you have the right to request or waive an oral argument:

Are you requesting the opportunity to provide an oral argument? _____ (Y/N)

Appellant:

Name: _____ Phone: _____
 Address: _____ Email: _____

Notes:

1. The only topics which may be discussed during the hearing are the specific reasons for the appeal as stated in the application.
2. The appeal process follows specific procedures outlined in Moscow City Code Title 4, Chapter 8.

I understand this information is a public record and may be posted to a public website. I certify under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.

 Signature of Appellant

 Date