



20816 44<sup>th</sup> Ave W, Suite 230 Lynnwood, WA 98036 www.LynnwoodWA.gov/DBS

## APPEAL OF ADMINISTRATIVE DECISION TO HEARING EXAMINER

## Note:

- The right to appeal is granted under <u>LMC 1.35.700</u> and must be filed within 14 days of the issuance of the hearing examiner's decision
- The burden of proof rests with the applicant, petitioner, or proponent
- Appeals are considered by the City Council, who may issue a determination at the time of the meeting
- Additional information may be required during the review process in order to respond to or resolve particular issues
- An application may be amended only in writing
- Please submit a written statement with the specific decision being appealed and the groups for the appeal
  - Please use 10-point font or larger for all supporting documents
- Submittals are not complete until fees have been paid
  - For fees, please see LMC 3.104 or contact our office for current fee information

File Name:		File N	Number:			
Appellant:			Email:			
Address:				Phone:		
City:	State:	Zip:		Cell:		
Property Owner(s):			Email:			
Address:				Phone:		
City:	State:	Zip:		Cell:		
Site Address:						
City:	State:	Zip:				
Parcel Number(s):						
Legal Description:						
I/We certify that the information	n provided in th	is application, in	cluding all su	ıbmittals ar	nd attach	ments. is true
and correct to the best of my/ou		a a fatherina and the				- 115, 12 5. <b>0.0</b>
Signature of Appellant/Agent:					Date:	
Please print name:					1	