



**City of Sweet Home**

Community and Economic Development Department- Planning Program  
 3225 Main Street, Sweet Home, OR 97386 541-367-8113

**Land Use Appeal Application**

Date Received: \_\_\_\_\_  
 Date Complete: \_\_\_\_\_  
 File Number: \_\_\_\_\_  
 Application Fee \$: \_\_\_\_\_  
 Receipt #: \_\_\_\_\_  
 Hearing Date: \_\_\_\_\_

<b>1. APPELLANT</b>			
Name:			
Street Address:	City:	State:	Zip Code:
E-mail Address:			
Phone Number:			
Signature:		Date:	
<b>2. APPELLANT'S REPRESENTATIVE (or Professional to be contacted regarding matters on this application, if other than appellant listed above)</b>			
Name:			
Street Address:	City:	State:	Zip Code:
E-mail Address:			
Signature:		Date:	
<b>3. GENERAL DATA REQUIRED</b>			
Case Number Being Appealed:		Decision Date:	
		Notice Mailing Date:	
Address of Subject Property:			
<b>4. REASON FOR APPEAL –Briefly summarizing the reason for the Appeal. (Attach a letter if needed.)</b>			