City of Lompoc

Community Development Department – Planning Division

NOTICE OF APPEAL OF STAFF DECISION



Site address of decision	n				_Lompoc, CA
	(Street N		(Direction)	(Street)	
Case/Reference Numb	er:				_
	C 1	lanning Comn ity of Lompoc 00 Civic Cente ompoc, CA 93	er Plaza		
In accordance with t	•		ereby appeal the de	cision, which wa	as given on:
The decision was as fo	ollows:				
The grounds of appea	l are:				
I request the Planning	Commissio	n take the follo	wing action:		
Name of Appellant:					
Address:					
Telephone Number:		E-mail:	E-mail:		
Was appellant an appl aggrieved person:	icant for, or	the subject of, t	he Staff's decision? If	not, state basis fo	or filing appeal as an
Fee: See Fee Schedu Account No. 400		C ity Treasur	Signature of A	ppellant	

NOTE: This form must be completed by the appellant and filed with the Community Services Department of the City of **Lompoc** not later than 10 calendar days after the date of decision by the Community Development Director. (In accordance with Lompoc City Code Section 17.144.030)

This appeal will be heard on the date as scheduled, unless it is in the public interest for such matter to be continued to a later date. Testimony will be taken; and failure of the appellant, or his representative, to present testimony may be cause for denial.