

Planner:

Appeals Form

General Information: This form is required for filing an appeal of a Staff, Design Review Board or Planning and Environmental Commission action/decision. A complete form and associated requirements must be submitted to the Community Development Department within twenty (20) calendar days of the disputed action/decision.

Action/Decision being appealed: _____

Date of Action/Decision:			
Board or Staff person rendering action/decision: Does this appeal involve a specific parcel of land? Yes No If yes, are you an adjacent property owner? Yes No Name (s) of Appellant (s):			
		Mailing Address:	
			Phone:
Physical Address in Vail:			
Legal Description of Appellant (s) Pr	operty in Vail: Lot: Block: Subdivision:		
Appellant (s) Signature (s):			
(Attach a list of signatures if more space is	• ,		
	SUBMITTAL REQUIREMENTS		
 On a separate sheet or separate sheets of paper, provide a detailed explanation of how you are an "aggrieved or adversely affected person". 			
2. On a separate sheet or separate sh	neets of paper, specify the precise nature of the appeal. Please site		
specific code sections having releva			
	ses (both mailing and physical addresses in Vail) of all owners of prop- eal and all adjacent property owners (including owners whose proper-		
ties are separated from the subject	property by a right-of-way, stream or other intervening barrier).		
•	opes for each property owner listed in (3).		
Submit this form and all submittal re Town of Vail	quirements to:		
Community Development Depa	rtment		
75 South Frontage Road Vail, CO 81657			
Vall, CO 81057			
For Office Use Only:			
For Office Use Only: Date Received:	Activity No.:		

Project No: