



**THIS SECTION TO BE COMPLETED BY THE PLANNING AND
BUILDING SERVICES DEPARTMENT STAMP OF RECEIPT:**

FEE PAID: _____

DATE: _____

TO THE RICHMOND PLANNING COMMISSION:

The undersigned hereby appeals the decision by the Design Review Board

Denial _____ of:

Approval _____ of:

Application Type: _____

DESCRIBE ITEM AS PRINTED ON DESIGN REVIEW BOARD AGENDA AND THE PLN#:

STATE REASONS FOR APPEAL:

DELIVER OR MAIL TO:

Community Development Dept.
450 Civic Center Plaza, 2nd Floor
Richmond, CA 94804

NAME _____

ADDRESS _____

TELEPHONE (HOME) _____
(WORK) _____