APPEAL INSTRUCTIONS

Pursuant to Division D7, Chapter II "**Appeals and Calls for Review**" of the San Ramon Municipal Code, the following information is required to be submitted in order to file an appeal with the City of San Ramon:

1) The appeal must be filed with the City Clerk's office within **10 calendar days** of the date of the decision. The appeal must be filed and received in person or by mail with the City Clerk's office at the close of business at the end of 10 calendar days, accompanied by the fee identified in the City's Fee Schedule;
2) The name and address of the project that you wish to appeal;
3) Your name, residential address, email address and daytime telephone number;
4) A statement outlining the specific reasons for the appeal;
5) Payment of fees as set forth by the City's Fee Schedule.

Upon receipt of all items listed above, the City Clerk will accept the appeal and verify the completeness of the information. A letter will then be sent to the appellant acknowledging receipt of the appeal and verifying compliance with these instructions.

Per Section D7-12:

The appeal will be scheduled for a hearing before the appellate body within 60 calendar days of the City's receipt of the appeal unless both the applicant and the appellant consent to a later date. A later date for the public hearing will be taken into consideration by the City Clerk if both the appellant and the applicant submit a stipulation in writing. All parties will be advised of the date, time and place of the rescheduled hearing by mail. A decision by the appellate body will be rendered within 30 calendar days of the close of the hearing. The notice shall be mailed within five working days after the date of the decision to the applicant, the appellant, and any other party requesting notice.

Per Section D7-13:

A decision by the Planning Commission shall become final 10 calendar days after the effective date of the decision. A decision by the City Council shall become final on the effective date of the decision.

Contact Information:

Joan Snashall
City Clerk
(925) 973-2577
jsnashall@sanramon.ca.gov

APPEAL INITIATION FORM

Appellant Information:

Appellant Name (First and Last):_____

Counsel Representing Appellant: _____

Residential Address:_____

E-mail Address: _____

Phone Number: _____

Project Name: _____

Project Address:_____

The Appellant must provide clear and specific information regarding the appeal. This includes a detailed reason for the appeal stating specifically the following information:

1. The specific determination or interpretation that is claimed to be not in compliance with the purposes of the Zoning Ordinance;
2. The specific facts that are claimed to be in error or an abuse of discretion;
3. The specific facts of the record which are claimed to be inaccurate; or
4. The specific decision that is claimed to be unsupported by the record.

Attach all pages that provide the detailed reason for your appeal.

This form must be submitted with the applicable fee payment identified in the City's Fee Schedule and received by the City Clerk in person or by mail.

City Clerk's Office:

Date Received: _____ Received By: _____ Deposit Paid: _____Deposit Paid By: _____

Notes:_____