

**REQUEST FOR
APPEALS BOARD HEARING**

Date _____

Applicant

Property Address _____ APN

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Owner _____

Address _____ (Phone) _____

Email Address _____

Protested Order or Action

A brief statement specifying order or action protested:

Further explanation attached.

Copy of protested notice attached.

A brief statement of the reason the protested order of action should be reversed, modified or otherwise set aside:

You will be notified within 10-30 days of the date of your hearing.

Payment & Signature

A check or money order for \$449, payable to the City of San Buenaventura, must accompany this application.

I certify under penalty or perjury that the foregoing, to the best of my knowledge, is true and correct.

I wish to use a payment plan.

Signature _____

Questions

For further information contact the Building & Safety Division at (805) 654-7869.

STAFF USE ONLY:

Local Appeals Board

Housing Appeals Board

HOURS: Monday, Tuesday, Wednesday and Friday*
7:30 a.m. to 5 p.m.
Thursday 9 a.m. to 5 p.m.
*Closed Alternate Fridays
NOTE: No permits issued after 4:30 p.m.

LOCATION: Ventura City Hall, 501 Poli Street, Room 117
PHONE: (805) 654-7869
MAILING ADDRESS: P.O. Box 99
Ventura, CA
93002-0099