

INSTRUCTIONS FOR FILING A PERMIT APPEAL APPLICATION

WHO MAY APPEAL

The applicant, or any property owner or tenant of a property within one thousand (1,000) feet of the subject site, may appeal a development permit, development variance, or development exception. The applicant, or such property owner or tenant, must sign the permit appeal form. Alternatively, the signature of the applicant's, property owner's or tenant's lawful power of attorney or attorney-in-fact may be accepted so long as a writing evidencing that person's authority to sign the permit appeal for the applicant, property owner or tenant also is provided with the permit appeal form.

Exceptions:

For a **Tree Removal Permit**, property owners or tenants/occupants of the subject site, or property owners or tenants/occupants of properties immediately adjacent or across the street from the subject site may appeal.

For **Tentative Maps**, the subdivider or any interested party may appeal.

TIME LIMIT

A complete Notice of Permit Appeal (see back page) must be filed on or before **ten calendar days** after a copy of the decision by the Planning Commission or the Director of Planning has been placed in the mail to the applicant.

Exceptions:

For **Tentative Maps**, the appeal must be filed within **ten calendar days of the permit approval**.

APPEAL REQUIREMENTS

1. A complete Notice of Permit Appeal including the following within the appropriate time limit:
 - a. Application filing fee, (see Filing Fee Schedule) (applicable only to 1st filing).
 - b. Assessor's parcel map with subject site outlined.
 - c. **If you are the applicant for the permit being appealed you must also provide the following:**
 1. Public Noticing Fee, then

2. If appealed to:

- City Council, 45 (forty-five) copies of 11" x 17", Z-folded, 3 hold punched, stapled plan sets and/or other supporting documents.
- Planning Commission, 30 (thirty) copies of 11" x 17", Z-folded, stapled plan sets and/or other support documents.

- d. **For Tree Removal Permits.** A Public Noticing Fee will be charged.

PROCESSING SCHEDULE

Planning Staff:

- Checks the application for completeness.
- Logs and collects fees.
- Reviews application with previous files and obtains pertinent data.
- Sets a public hearing date and places the item in the agenda.
- Prepares a recommendation to the appropriate decision making body.

Planning Commission:

- considers and acts upon the appeal of a Planned Development, Special Use, Tree Removal Permits, Use Exceptions/Fence Variance and Variance in a public hearing.
- If the appeal is denied, the decision is final.
- If the appeal is granted, the decision shall be effective immediately.

City Council:

- considers and acts upon the appeal of a Conditional Use Permit, and a Tentative Map in a public hearing.
- If the appeal is denied, the decision is final.
- If the appeal is granted, the decision shall be effective immediately.

Please submit this application **IN PERSON** to the Development Services Center, **1ST FLOOR**, City Hall. Appointments are not required but may be accommodated by calling (408) 535-3555 or by visiting the Planning Division's website: <http://www.sanjoseca.gov/index.aspx?nid=3839>. For Assistance, call (408) 535-5680.



CITY OF SAN JOSE

Planning, Building and Code Enforcement
200 East Santa Clara Street
San José, CA 95113-1905
tel (408) 535-3555 fax (408) 292-6055
Website: www.sanjoseca.gov/planning

NOTICE OF PERMIT APPEAL

TO BE COMPLETED BY PLANNING STAFF

FILE NUMBER	RECEIPT # _____
PROJECT LOCATION	AMOUNT _____
	DATE _____
	BY _____

TO BE COMPLETED BY PERSON FILING APPEAL

PLEASE REFER TO PERMIT APPEAL INSTRUCTIONS BEFORE COMPLETING THIS PAGE. THIS FORM MUST BE ACCOMPANIED BY THE APPROPRIATE FILING FEE.

THE UNDERSIGNED RESPECTFULLY REQUESTS AN APPEAL FOR THE PROPERTY WHICH IS LOCATED AT:

REASON(S) FOR APPEAL (For additional comments, please attach a separate sheet.):

PERSON FILING APPEAL

NAME	DAYTIME TELEPHONE ()		
ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE		
RELATIONSHIP TO SUBJECT SITE: (e.g., adjacent property owner, property owner within one thousand (1,000) feet)			

**CONTACT PERSON
(IF DIFFERENT FROM PERSON FILING APPEAL)**

NAME		
ADDRESS	CITY	STATE ZIP CODE
DAYTIME TELEPHONE ()	FAX NUMBER ()	E-MAIL ADDRESS

PROPERTY OWNER

NAME	DATE
ADDRESS	CITY STATE ZIP CODE

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