



Name of Appellant:		Phone Number:	
Email:		Address:	
Map & Tax Lot #:	T:	R:	Section:
			Tax Lot(s)

**BASIS FOR STANDING APPEAL (please check all that apply)**

Submitted written evidence during the initial review <input type="checkbox"/>
Testified orally at the hearing <input type="checkbox"/>
Participated through?

**Grounds for the Appeal:** Attach separate page(s) stating the ground for the appeal. The appeal must be based upon issues raised during the decision-making process or hearing. You must identify the issue with sufficient information so that the reviewing body understands under what the criteria within the Sandy Development Code, the Comprehensive Plan, or Statewide Land Use Goals you are appealing.

**Relevant Code Sections:** Attach separate page(s) listing the relevant code sections, which relate to the appeal application.

**Please note:**

\* If the notice fails to confirm to the above requirements or is not actually received by the City (delivered to the City Manager, Development Services Director, City Recorder or their staff) within the timelines specified, the appeal is void and shall be dismissed.

\* An appeal stays an approval until resolution of the appeal.

Staff Use Only

Appeal Filed within 12 calendar days of Written Decision: Yes <input type="checkbox"/> No <input type="checkbox"/>			
Application complete: Yes <input type="checkbox"/> No <input type="checkbox"/>			
Scheduled for review before the: Planning Commission <input type="checkbox"/> City Council <input type="checkbox"/>			
File No.:	Date of Decision:	Date Notice of Decision Mailed:	
Appeal Fee:	Date Appeal Filed:	Date Set for Hearing:	