

INDIAN RIVER COUNTY  
1801 27<sup>TH</sup> STREET, VERO BEACH FL, 32960

REQUEST FOR APPEAL

APPEAL OF:

- Decisions of the Community Development Director or His Designee; AND
- Actions/Decisions of the Planning and Zoning Commission (PZC)

FEES:

- I. Appeal of Site Plan Project Action/Decision:  
Appeal by project applicant: \$400.00  
Appeal by affected party: \$800.00
- II. Appeal of Staff Determination: \$800.00

Is this an appeal by a project applicant? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, please list the project name & number \_\_\_\_\_

OWNER: (PLEASE PRINT)

APPLICANT: (PLEASE PRINT)

NAME

NAME

ADDRESS

ADDRESS

CITY

STATE

ZIP

CITY

STATE

ZIP

PHONE

PHONE

EMAIL

EMAIL

CONTACT PERSON

CONTACT PERSON

SIGNATURE OF OWNER

(or attach letter of authorization)

SIGNATURE OF APPLICANT

Site Address (If Applicable): \_\_\_\_\_

1. What is being appealed? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INDIAN RIVER COUNTY  
1801 27<sup>TH</sup> STREET, VERO BEACH FL, 32960

2. Reason(s) for the appeal \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What staff (or P&ZC) error(s) is alleged? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. What land development regulation (LDR) provision(s) have allegedly been improperly interpreted or applied \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. What LDRs and/or Comprehensive Plan goals, objectives, policies support your position?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOTE: Supplemental or additional information may be attached. If such information is being attached, please list here what is being attached:

- 1.
- 2.
- 3.

OFFICE USE ONLY:

FEE PAID: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_ DATE ACCEPTED: \_\_\_\_\_