



City of Carlsbad

Office of the City Clerk

APPEAL FORM

I (We) appeal the decision of the _____
To the Carlsbad City Council.

Date of Decision you are appealing: _____

Subject of Appeal:

BE SPECIFIC Examples: if the action is a City Engineer's Decision, please say so. If a project has multiple elements, (such as a General Plan Amendment, Negative Declaration, Specific Plan, etc.) please list them all. If you only want to appeal a part of the whole action, please state that here.

Reason(s) for Appeal: • Please Note • Failure to specify a reason may result in denial of the appeal, and you will be limited to the grounds stated here when presenting your appeal.

BE SPECIFIC How did the decision maker err? What about the decision is inconsistent with state or local laws, plans, or policy?

SIGNATURE

(_____) _____
PHONE NO.

NAME (please print)

ADDRESS: Street Name & Number

DATE

City, State, Zip Code