



City of Clatskanie
PO Box 9
Clatskanie, OR 97016
Phone (503) 728-2622 Fax (503) 728-3297

City of Clatskanie
APPEAL OF LAND USE DECISION FORM

You may appeal a city land use decision by completing this form and submitting it with a non-refundable payment of \$250 to the City within the time allowed for the appeal.

Required Information

What land use decision are you appealing? _____

Site Address and Tax Lot(s) pertaining to the appeal: _____

Why do you believe the decision is in error, and what specific grounds do you base your appeal?

If you are not the applicant, state why are you an aggrieved person. _____

For office use only

Received: _____ Received by: _____ Receipt # _____ Check # _____

What evidence have you provided to the decision-making authority to support your appeal? _____

I hereby certify that the information contained on this form is in all respects true and correct to the best of my knowledge. I understand that I, or my representative, must appear at any future hearing set for this appeal.

Appellant's Name: _____ Phone Number: _____

Address: _____ City _____ State _____ Zip _____

SIGNATURE: _____ Date: _____

Original Signature Required

This form and the required payment must be submitted to Clatskanie City Hall, 95 S. Nehalem Street, P.O. Box 9, Clatskanie, Oregon 97016, phone no. (503) 728-2622.

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