



City of Costa Mesa

- Appeal of Planning Commission Decision/Rehearing: **\$1,220.00**
- Appeal of Zoning Administrator/ Building Official / Fire Marshal / Staff Decision: **\$690.00**

APPLICATION FOR APPEAL OR REVIEW

Applicant Name* _____

Address _____

Phone _____

REQUEST FOR: **APPEAL** **REVIEW****

Decision of which appeal or review is requested: (give application number, if applicable, and the date of the decision, if known.)

Decision by: _____

Reasons for requesting appeal or review:

Date: _____

Signature: _____

*If you are serving as the agent for another person, please identify the person you represent and provide proof of authorization.
 **Review may be requested only by Planning Commission, Planning Commission Member, City Council, or City Council Member

For office use only – do not write below this line

SCHEDULED FOR THE CITY COUNCIL/PLANNING COMMISSION MEETING OF:

If appeal, rehearing, or review is for a person or body other than City Council/Planning Commission, date of hearing of appeal, rehearing, or review: