

## **Notice to Appeal Application**

Department of Planning & Development Services 300 North Park Avenue, Sanford, Florida 32771 Phone: 407.688.5140 Fax: 407.688.5141

			icer, board or agency of the City
concerning an application	for a		_ , to wit:
Legal description of propert	v.		
Tax Parcel No:		om the Seminole County Property App	praiser)
2. Address of property:			
Original request:			
Date of action and decision	n:		
5. Action taken by:			
		ee to pay all city fees relate the city's adopted Fee Reso	
			d to this lution.
Signature:  This application is subm Applicant/Agent:	itted by:	Date:	
Signature:  This application is subm Applicant/Agent: Signature:	litted by:	Date:	
Signature:  This application is subm Applicant/Agent: Signature: Address:	iitted by:	Date: Print Name:	
Signature:  This application is subm Applicant/Agent: Signature: Address:	iitted by:	Date: Print Name:	
Signature:  This application is submapplicant/Agent: Signature: Address: Phone:  Property Owner: Signature:	Fax:	Print Name: Email:	
Signature:  This application is submapplicant/Agent: Signature: Address: Phone:  Property Owner: Signature: Address:	Fax:	Print Name: Email: Print Name:	Date:
Signature:  This application is submapplicant/Agent: Signature: Address: Phone:  Property Owner: Signature: Address:	Fax:	Date: Print Name: Email: Print Name:	Date:
Signature:  This application is submate Applicant/Agent: Signature: Address: Phone:  Property Owner: Signature: Address:	Fax:	Print Name: Email: Print Name:	Date:
Signature:  This application is submapplicant/Agent: Signature: Address: Phone:  Property Owner: Signature: Address: Phone:	Fax: Fax:	Print Name:  Email:  Print Name:	Date:
Signature:  This application is submapplicant/Agent: Signature: Address: Phone:  Property Owner: Signature: Address:	Fax:  Fax:  Fax:  Fax:  Fee:	Print Name: Email: Email: Email: Email:	Date:
Signature:  This application is subm Applicant/Agent: Signature: Address: Phone:  Property Owner: Signature: Address: Phone:	Fax:  Fax:  Fax:  Fee:	Print Name: Email: Email: Email: Email:	Date: Date: Date:
Signature:  This application is submapplicant/Agent: Signature: Address: Phone:  Property Owner: Signature: Address: Phone:  Application No:  Mail Notice to Applicant and Owner	Fax:  Fax:  Fax:  Fax:  Office  Fee:	Print Name: Email: Email: Email: Email: Notice to Administration	Date: Date: Date: ve Official (date):

September 2010 Intent to Appeal.pdf