



## APPLICATION FOR APPEAL

City of San Mateo  
330 W. 20th Avenue  
San Mateo, CA 94403

Date Filed: \_\_\_\_\_

TO:  City Council  
 Commission \_\_\_\_\_  
 Zoning Administrator  
 Other: \_\_\_\_\_

Office Use Only

File #: \_\_\_\_\_

Fee: \_\_\_\_\_  
Tentative Hearing Date:  
\_\_\_\_\_

Appeals to the City Council of a decision are subject to a fee of \$565 in fiscal year 2024-25.  
Per the San Mateo municipal code, appeals must be filed within 10 days of the decision being appealed.

### APPELLANT

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

### SUBJECT

Project BeingAppealed: \_\_\_\_\_  
Address / Location: \_\_\_\_\_

State Reasons for Appeal and Particular Areas of Concern (if an appeal of Planning Applications conditions of approval, please list each condition appealed and the reason for your appeal):

Added Comments or Proposal (if any):

Appellant's Signature

Date

(Attach additional sheets if necessary)

Please refer to Comprehensive Fee Schedule for appeal filing fees.