



Town of Yountville
6550 Yount Street
Yountville, CA 94599
Phone: 707.944.8851
Fascimile: 707.944.9619
www.townofyountville.com

Town Use Only – do not write in this area

Date Received _____ Initial Fee Deposit _____

Received by _____

App. Number _____

Related Files _____

Acted on by _____ Date _____

Additional Fee Owed _____ Amount Returned _____

Appeal Form *please print or type*

Appellant's name _____

Appellant's address _____

Phone no. _____ Email address _____

Type of appeal

Appeal of Staff Administrative decision- Date of decision _____

Appeal of Zoning & Design Review Board decision- Date of decision _____

Description of matter appealed

Approval of project or application _____

Denial of project or application _____

Conditions of project approval – number(s) _____

Other _____

The grounds upon which this appeal is filed (attach additional sheets if more space is needed):

The specific action which the appellant wants to be taken:

INITIAL DEPOSIT AND FINAL CALCULATION OF FEES. *The Appellant(s) hereby agree(s) that he/she/they shall be jointly and severally liable for the payment of any and all processing fees consistent with the Town of Yountville Master Fee Schedule and Yountville Municipal Code. The appellant(s) hereby represent(s) and warrant(s) that he/she/they understand that fees include, but are not limited to: an initial appeal deposit amount, as defined in the Town's Master Fee Schedule; staff time billed at an hourly rate; related attorney fees; applicable consultant fees; production or reproduction of materials and exhibits; postage; or any other costs associated with processing this appeal. Any fees beyond the initial deposit amount are the responsibility of the appellant(s) and shall be invoiced separately.*

Appellant's Signature _____ **Date** _____