



1995 Third Street, Suite 160
 Baker City, OR 97814
 Phone 541-523-8219
 Fax 541-523-5925

**BAKER COUNTY
 Planning**

Date: _____/_____/_____

APPEAL

Appeal number _____

Regarding application _____

APPELLANT/APPLICANT INFORMATION

1. Appellant _____ Phone _____ email _____

Address _____ City _____ State _____ Zip _____

2. Original Applicant _____ Phone _____ email _____

Address _____ City _____ State _____ Zip _____

PROPERTY INFORMATION

1. Township _____ Range _____ Section _____ Tax Lot 1 _____ TL 2 _____ TL 3 _____

Township _____ Range _____ Section _____ Tax Lot 1 _____ TL 2 _____ TL 3 _____

2. Acres _____ Inside Urban Growth Boundary Yes [] No []

3. Site Address _____ 4. High Value Soils Yes [] No []

5. Zoning _____ 6. Overlay Zone _____ 7. NWI Wetlands Yes [] No []

8. Existing Development _____

******* FOR OFFICE USE ONLY *******

PLANNING DEPARTMENT / PLANNING COMMISSION / BOARD OF COMMISSIONERS REVIEW

Appeal Fee **\$450.00**

Appeal is [] Received [] Approved [] Denied [] Remanded to _____

Reason for denial _____

County Official Signature _____

Title _____ Date _____

ACTION INFORMATION

Action Being Appealed (include approval number)

APPEAL INFORMATION

Reasons for Appeal

****For Department Use Only****

Revenue Line #		Amount
Planning Fee	101131-3404105	\$
Addressing Fee	101131-3404106	\$
Road Inspection Fee	230100-3404105	\$
	Total	\$
Fee to be paid to Baker County Treasurer	\$	
Date	Amount Received:	\$
Received by:		