

# APPEAL APPLICATION

## Instructions and Checklist

**Related Code Section:** Refer to the City Planning case determination to identify the Zone Code section for the entitlement and the appeal procedure.

**Purpose:** This application is for the appeal of the Mayor and City Council determination authorized by the Randolph Municipal Code (RMC).

### A. APPELLATE BODY/CASE INFORMATION

#### 1. APPELLATE BODY

Area Planning Commission      Zoning Administrator       City Council       City Planning Commission

Regarding Case Number: \_\_\_\_\_

Project Address: \_\_\_\_\_

Final Date to Appeal: \_\_\_\_\_

#### 2. APPELLANT

**Appellant Identity:**  
(check all that apply)

Representative  
 Applicant

Property Owner  
 Operator of the Use/Site

Person, other than the Applicant, Owner or Operator claiming to be aggrieved

\_\_\_\_\_

Person affected by the determination made by the Mayor and City Council

Representative  
 Applicant

Owner  
 Operator

Aggrieved Party

#### 3. APPELLANT INFORMATION

Appellant's Name: \_\_\_\_\_

Company/Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

a. Is the appeal being filed on your behalf or on behalf of another party, organization or company?

Self       Other: \_\_\_\_\_

b. Is the appeal being filed to support the original applicant's position?       Yes       No

**4. REPRESENTATIVE/AGENT INFORMATION**

Representative/Agent name (if applicable): \_\_\_\_\_

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**5. JUSTIFICATION/REASON FOR APPEAL**

a. Is the entire decision, or only parts of it being appealed?  Entire  Part

b. Are specific conditions of approval being appealed?  Yes  No

If Yes, list the condition number(s) here: \_\_\_\_\_

Attach a separate sheet providing your reasons for the appeal. Your reason must state:

- The reason for the appeal
- How you are aggrieved by the decision
- Specifically the points at issue
- Why you believe the decision-maker erred or abused their discretion

**6. APPLICANT'S AFFIDAVIT**

I certify that the statements contained in this application are complete and true:

Appellant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**GENERAL APPEAL FILING REQUIREMENTS**

**B. ALL CASES REQUIRE THE FOLLOWING ITEMS - SEE THE ADDITIONAL INSTRUCTIONS FOR SPECIFIC CASE TYPES**

**1. Appeal Documents**

a. **Three (3) sets** - The following documents are required for each appeal filed (1 original and 2 duplicates) Each case being appealed is required to provide three (3) sets of the listed documents.

- Appeal Application (form RMC-001)
- Justification/Reason for Appeal
- Copies of Original Determination Letter

**b. Appeal Fee**

- Original Applicant - See Randolph Fee Schedule

*Please note that the appellate body must act on your appeal within a time period specified in the Section(s) of the Randolph Municipal Code (RMC) pertaining to the type of appeal being filed. The City Council will make its best efforts to have appeals scheduled prior to the appellate body's last day to act in order to provide due process to the appellant. If the appellate body is unable to come to a consensus or is unable to hear and consider the appeal prior to the last day to act, the appeal is automatically deemed denied, and the original decision will stand. The last day to act as defined in the RMC may only be extended if formally agreed upon by the applicant.*