



# City of Victor, Idaho Appeal Application

Permit #: \_\_\_\_\_

Date Received: \_\_\_\_\_

IWORQ #: \_\_\_\_\_

Unit 101, 10 South Main St. | PO Box 122 Victor, ID 83455 | Ph: 208-787-2940 | Fax: 208-787-2357 | www.victorcityidaho.com

An applicant or any person affected by an application decision may appeal that decision. An affected person is defined as one having a bona fide interest in real property which may be adversely affected by the decision (see State Statute 67-6521).

**Appeals must be received no later than 14 days after the written decision was issued.**

**\*APPLICANT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

\* If the applicant is someone other than the owner, a notarized statement authorizing applicant to act as an agent for the owner must accompany this application.

**APPLICANT MAILING ADDRESS:** \_\_\_\_\_

**APPLICANT EMAIL ADDRESS:** \_\_\_\_\_

**PROJECT ADDRESS:** \_\_\_\_\_

**PROJECT PARCEL NUMBER(S):** \_\_\_\_\_ **CURRENT ZONE:** \_\_\_\_\_

**PROJECT NAME OR DECISION THAT IS BEING APPEALED:** \_\_\_\_\_

**REASONS FOR APPEAL, BASED UPON RELEVANT APPROVAL CRITERIA (ATTACH ADDITIONAL PAGES IF NECESSARY):** \_\_\_\_\_

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**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE** \_\_\_\_\_

**\*OFFICE USE ONLY\***

**FEE - \$1,205.00**

RECEIPT #: \_\_\_\_\_ DATE RECEIVED: \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_