



# City of Malibu

23825 Stuart Ranch Road · Malibu, California · 90265-4861  
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## WIRELESS PERMIT APPEAL SUBMITTAL

**Actions Subject to Appeal:** Pursuant to [Ordinance No. 484](#) (Malibu Municipal Code Section 17.46.030(E)), any person adversely affected by a decision of the Community Development Director or Planning Commission may request an administrative hearing to appeal the decision. "Person Adversely Affected" means the applicant, or owners/occupants who reside within a 1,000-foot radius of the project property.

**Deadline to File Appeal:** An appeal shall be filed with the City Clerk within 10 days following the date of action for which the appeal is made. Appeals shall be accompanied by the filing fee as specified by the City Council, this form completed and a letter setting forth the grounds for appeal. If the appeal is incomplete, the City Clerk shall return the filing fee and the appeal shall be deemed to have been withdrawn.

Please note that if the appeal is granted, the appeal fee shall be refunded to the appellant.

**To Submit an Appeal:** The appeal must be timely received by the City Clerk or his/her designee either in person or by mail addressed to City of Malibu, Attn: City Clerk, 23825 Stuart Ranch Road, Malibu, CA 246.

**Community Development Director or Planning Commission Date of Action:** \_\_\_\_\_

**Case No.:** \_\_\_\_\_

**Site Address/Location:** \_\_\_\_\_

***ALL of the following must be timely filed to perfect an appeal.***

1. Appeal Checklist -This form with the appellant's signature.
2. Grounds for Appeal - An appeal letter setting forth the grounds for the appeal
3. Appeal Fees(s) In the form of a check or money order made payable to the City of Malibu. Cash or credit cards will not be accepted.

### Certification

I hereby certify that I meet the definition of adversely affected person. I am \_\_\_\_\_ an applicant, or \_\_\_\_\_ owner(s), / \_\_\_\_\_ occupant(s) who resides within a 1,000-foot radius of the project property.

I hereby certify the appeal submittal contains all of the above items. I understand that if any of the items are missing or subsequently deficient, the appeal shall be deemed to have been withdrawn and the filing fee shall be returned.

\_\_\_\_\_  
PRINT APPELLANT'S NAME

\_\_\_\_\_  
TELEPHONE NUMBER

\_\_\_\_\_  
APPELLANT'S SIGNATURE

\_\_\_\_\_  
DATE

Appellant's mailing address: \_\_\_\_\_

Appellant's telephone: \_\_\_\_\_