



Community Development Department  
Building & Safety Division  
130 S. Main Street, Lake Elsinore, CA  
(951) 674-3124, Ext. 220

<b>For Official Use Only</b>	
Date Received:	_____
Received By:	_____
Date Fee Paid:	_____

## APPEAL OF STRUCTURE ABATEMENT FORM

► **Policy 100-8:** The purpose of this Policy is to provide a standardized procedure for consideration of appeals from Structure Abatement decisions. Within 15 days of a Structure Abatement decision, any person may appeal a decision by filing this form and submitting a \$200 fee.

<b>Applicant Information</b>			
Name: _____		Date: _____	
Mailing Address: _____			
City: _____	State: _____	Zip Code: _____	
Phone No.: _____	Fax No.: _____		

<b>Subject of Appeal Information</b>
Subject of Appeal: _____
Project No.(s): _____
Project Applicant: _____
Project Location: _____
Date of Structure Abatement Action: _____

I, the undersigned, hereby appeal the above action of approval/denial by the Lake Elsinore Structure Abatement, for the following reasons: (Please cite specific action being appealed.) Attach additional pages as needed.

---



---



---



---



---

Signature: \_\_\_\_\_