Office of the City Clerk

1017 Middlefield Road
Redwood City, CA 94064-0391
Telephone (650) 780-7000

APPEAL FILING FORM

(All appeals must be received by the City within 15 days of the decision or determination being appealed).

First and Last Name: _____

Organization Name, if Any: _____

Contact Address: _____

Contact Telephone Number: _____

Contact E-mail: _____

Please note: New Appeal Filing Fee Effective January 1, 2024

a. For any permit fee/deposit less than $4,500 — See most current Master Fee Schedule
b. For any permit/deposit $4,500 or more — See most current Master Fee Schedule

Non-refundable Appeal Filing Fee attached/paid to City of Redwood City. (if multiple appeals filed each must submit a fee)

Check ☐
Cash ☐

Receipt provided to appellant:
Yes ☐
No ☐

Name of Subject or Matter Being Appealed : _____

Appeal of Decision of One of the Following:

☐ Zoning Administrator
☐ Community Development Director
☐ Planning Commission
☐ Other

Grounds for Appeal:
Explain specifically what action/s are being appealed and why the appeal should be considered. Include evidence that supports the appeal. Attach additional pages to the appeal form, if necessary.

_____

_____

_____

_____

_____

List of documents attached (all records and documents requested to be considered at the appeal hearing must be attached)_____

_____

Signed: _____ **Dated:** _____

Reference: RWC MC 1.45.5-10 (1-9-12) and RWC ZC Art. 48 (1-23-12)
Form date: May 25, 2012, Rev February 2024