Notice of Appeal



216 SE 4th ST, Pendleton, OR 97801, (541) 278-6252 Email: planning@umatillacounty.gov

Process taken from UCDC 152.766

APPEALS

- (A) An appeal from a ruling of the Planning Director. An appeal of an administrative review decision or a ministerial action on a land use request made by the Planning Director or authorized agent shall be made to the Planning Commission. Such appeals must be made within 15 days of the date of the ruling or decision.
- (B) An action or ruling of the Planning Commission pursuant to this chapter may be appealed to the County Board of Commissioners within 15 days after the Planning Commission has signed its findings of facts and conclusions of law.
 - (1) If the appeal is filed it shall be in writing stating the reasons for appeal pursuant to the criteria for review.
 - (2) The County Board of Commissioners shall receive the written findings of the decision and the minutes from the Planning Commission hearing and shall hold a public hearing on the appeal.
 - (3) The Board may amend, rescind, affirm or remand the action of the Planning Commission.
- (C) All appeals shall be made in writing, accompanied by the appropriate fee, and shall state the reasons for the appeal and the alleged errors made on the part of the Planning Director or authorized agent or the Planning Commission. If the decision being appealed utilized criteria for review established elsewhere in this chapter, the reasons for the appeal shall be stated pursuant to these criteria.

- (D) All appeals shall be on a de novo basis. The body hearing the appeal shall be able to receive any additional testimony presented by the applicant or proponent.
- E) Appeals of a Board of Commissioners decision shall be made to the Land Use Board of Appeals within 21 days of the date of the decision. Such appeals shall not be based on issues that are not raised at the local hearings with "sufficient specificity" as to afford the decision-makers and parties involved an opportunity to respond to the issue.

FILING FEE

Filing of an Appeal - \$800.00

(Effective July 1, 2007 via Ord. #2007-06)

It is the responsibility of the applicant to submit a complete application with all necessary attachments. Planning staff can refuse an incomplete application.

Version: December 21, 2023

File Location: H:\shared\Forms_Master\Application_Notice of Appeal_DEC 2023.doc

Section 1: Request and De This information deals with the Land Use Req	scription of Application uest Application that an Appeal is being filed against.
THE REQUEST IS FOR (Check the or	ne that applies)
	sion from a decision of the Planning Department sioners from a decision of the Planning Commission
DESCRIPTION OF THE LAND USE REQU	EST APPLICATION IN QUESTION:
• Land Use Request Application	File Number:
• Type of Land Use Request App	olication:
• Decision-Making Body: Pl	anning Director or Planning Commission
• Date of Decision (date on Find	ings):
Date you received notice of the	e decision or learned of the decision:
Section 2: Contact Informa	ation
Name of Appellant(s):	
Address:	
City, State, Zip:	
Telephone Number & Email Address:	
Date of Submittal for the Appeal:	

Section 3: Basis of Appeal

Complete only when appealing a decision made by the Planning Department or Planning Commission.

The Appeal is based on the belief that certain policies and/or procedures of the Comprehensive Plan and/or provisions of the Development Code were not properly administered or followed. Please specify the chapter, section and page numbers of the Comprehensive Plan and/or Development Code where the policies and/or procedures are found; as well as a narrative explaining the issues that the Appeal is based upon (use additional pages if necessary):

Section 4: Certification

I/We, the undersigned, swear under penalty of perjury that the above responses are made truthfully and to the best of my knowledge.

X		
Signature of Appellant	Date	
Printed Name of Applicant		
X		
Signature of Appellant	Date	
Printed Name of Applicant		
X		
Signature of Appellant	Date	
Printed Name of Applicant		
X Signature of Appellant	Doto	
Signature of Appellant Date		
Printed Name of Applicant		
Office Use Only		
Date this paperwork was received:		
Accepted by:		
Fee Paid? Yes No	Receipt Number:	