

PLANNING & ZONING COMMISSION REZONING APPEAL APPLICATION

Orange County Planning Division 201 South Rosalind Avenue, 2nd Floor, Post Office Box 1393 Orlando, Florida 32802-1393 Main Line: (407) 836-5600 P&ZC Secretary: (407) 836-5632

Date:			
Appellant:	//	Print or type name)	
Representing:	(Print or type com	pany, group, or organization name)	
Address:			
Telephone:	Fax:	E-mail:	
Respectfully request a	an appeal of the decision regal	rding rezoning number RZ -	,
the Applicant being _	(Print	or type Applicant name)	, rendered by the Orange
County Planning & Zo	oning Commission on		
Reason for	appeal (provide a brief summ	ary or attach additional docume	ntation if necessary):
Signature		Date _	

FEE: \$483.00 Planning & Zoning Commission appeals. Make check payable to the Orange County Board of County Commissioners

NOTE: The Clerk of the Board will notify you of the date of your appeal.