



## **APPEAL OF ADMINISTRATIVE DECISION APPLICATION**

**Instructions: Fully complete all sections of the application form  
(type or print-must be legible)**

### **Application Sections**

1. Appellant information.
2. Demonstration of compliance with appeal criteria.

### **Be sure to attach the following:**

1. Letter of authorization-if person(s) other than the appellant will be representing the case at the public hearing.
2. \$300 Application Processing Fee.
3. Proof of ownership from the property owner. If ownership cannot be verified through the Broward County Tax Roll, a copy of the recorded Warranty Deed, a copy of a valid purchase contract, or a signed and notarized letter from the owner of record must be submitted with this application.

**Submit to:  
City of Deerfield Beach  
Planning & Zoning Division  
150 NE 2<sup>nd</sup> Ave.  
Deerfield Beach, FL 33441**



Case No. \_\_\_\_\_

Date \_\_\_\_\_

## APPEAL OF ADMINISTRATIVE DECISION APPLICATION

PLEASE PROVIDE IN FULL THE FOLLOWING INFORMATION (PRINT OR TYPE)

### Section One: Appellant Information

Name of Appellant: \_\_\_\_\_

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

Relationship of Appellant to Property (property interest of appellant): \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Subject Property Address: \_\_\_\_\_  
(if different from appellant's address)

Property Owner Name: \_\_\_\_\_

Property Owner Signature: \_\_\_\_\_

### Section Two: Demonstration of Compliance with Appeal Criteria (Attach additional page(s) if more space is needed)

#### *APPEAL FROM DECISION OF ADMINISTRATIVE OFFICIAL ON LAND DEVELOPMENT CODE INTERPRETATION -SECTION 98-116*

Appeals. Any person aggrieved or any officer, board or commission of the City of Deerfield Beach affected by any decision of the director, or any other administrative official under any provision of this code may appeal such decision to the special master. Every appeal shall be in writing and in the form and manner provided by this Code.

**The application will not be accepted without a specific statement in response to each of the requirements on the following pages.**

1. PLEASE STATE THE ORDER, REQUIREMENT, DECISION OR DETERMINATION (DECISION) YOU WISH TO APPEAL (DESCRIBE THE DECISION IN DETAIL SUFFICIENT FOR THE CITY TO UNDERSTAND THE APPEAL).

Lined area for writing the appeal details, consisting of horizontal lines within a rounded rectangular box.

2. WHO RENDERED THE DECISION AND WHAT DATE WAS IT RENDERED?

Blank lined area for writing the answer to question 2.







