

OFFICE USE ONLY
Date Recv'd _____
Pre-Hearing _____
Public Hearing _____
Application # _____
Application Fee \$200
Escrow Fee \$500

City of Cherry Hills Village Application for Appeal

Today's Date: _____

<p>Applicant Information</p> <p>Name _____</p> <p>Phone _____ Fax _____</p> <p>Address _____</p> <p>_____</p>
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<p>Property Information</p> <p>Address _____</p> <p>_____</p> <p>Legal Description of Property _____</p> <p>_____</p>
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Order, requirement, decision or determination of the City Manager that is being appealed:

1. Please describe how the City Manager or her designee acted without clear and convincing evidence to support the order, requirement, decision or determination, or
 2. Please describe how the City Manager or her designee acted beyond the authority granted to the City Manager by the Code. (attach separate sheets if necessary) _____
- _____
- _____
- _____
- _____
- _____
- _____

Signature Line

Date