

## Code Enforcement Short Term Rental Appeal Form Surrounding Property Owners

Office Use Only

Today's Date:Permit Nu	mber:
Permit Property Address:	
Permit Property Parcel Number (APN):	Permittee Name:
Your Name:	Phone:
Mailing Address:	
E-mail Address (please print clearly):	
Due to ongoing public health concerns in-persor	hearings have been suspended until further notice.
I wish to appear by: Phone 🔲 Declaration 🔲	
For Phone Hearings I prefer A.M. P.M.	No Preference
We will try to accommodate your preferred time;	however, your selection is not guaranteed.
☐ I have enclosed the required \$100 Appeal Fee	I have submitted an Appeal Fee Hardship Waiver
Important Information for S	urrounding Property Owners
<ul> <li>Witnesses will be required to swear or af</li> <li>The only valid grounds for granting such property as a STR has not complied with esections 84.28.060(b) through (c) or SBC</li> </ul>	pellant, the permittee, and County Code Enforcement start firm to the hearing officer that their testimony is the truth han appeal are limited to the claim that past use of sone or more requirements of San Bernardino County Co CC 84.28.070, or that, based on competent evidence, all y not comply with one or more of such requirements. heets if needed)
Appeal Form and \$100 Appeal Fee, or completed a	Hardship Waiver must be submitted in person or by ma
San Bernardino County Land Attn: Code Enforc	•
268 W. Hospitality	
	o, CA 92415

Appellant Signature FORM: SPO1

Date