CONFEDERATED TRIBES OF THE UMATILLA INDIAN RESERVATION Tribal Planning Office

APPLICATION TO APPEAL

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Administrative Decision of the Tribal Planning Office

DEAR APPLICANT:

Please fill out this APPLICATION completely and as accurately as possible. If a block does not apply, write 'N/A" in the space provided. An incomplete application cannot be processed.

- 1) Please fill out your full name, current address and phone number.
- 2) Please fill out the full name, current address and phone number of the legal property owner (s) of the site you are requesting a permit for. If you are the sole property owner, simply write "same" on the first line.
- 3) This is the location of the site as described by section, township and range. If you are not familiar with this method or you do not have access to this information, we can assist in determining the location upon request.
- 4) Indicate whether the property is fee land (tax lot) or trust land (allotment) and the parcel number. Also specify the parcel acreage.
- 5) Indicate the right of way or easement road that allows legal access to the property (e.g., county, road, street, or access road).
- 6) Indicate the current use or uses of the subject property.
- 7) Indicate the specific administrative decision for which you are appealing.
- 8) Explain in details the reason for your appeal and why you disagree with the Planning Office administrative decision. (please attach a separate sheet if necessary)
- 9) Read the statement carefully. Sign and date the application only after the application has been completely filled out.

NOTE: If the information presented is unclear or questionable, you may be required to provide further information.

IF YOU HAVE ANY QUESTIONS CONCERNING THE APPLICATION PROCESS OR CODE
REQUIREMENTS, FEEL FREE TO EITHER STOP BY THE PLANNING OFFICE OR
CONTACT THE OFFICE AT 276-3099

File #: _____

CONFEDERATED TRIBES OF THE UMATILLA INDIAN RESERVATION

Tribal Planning Office 46411 Tímine Way, Pendleton, Oregon, 97801

APPLICATION TO APPEAL

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Administrative Decision of the Tribal Planning Office or Natural Resources Commission

Fee: \$50.00	Please Print
Appellant's Name:Address:	Phone:
Lot Owner's Name:Address:	Phone:
Property Description: Fax Lot () Allotment ():	Section Township Range Present Zone: Total Acreage:
Legal Access:	
Present Use of Property (Descripti	on, including any existing structures and the current use):
Planning Office administrative dec	cision being appealed:
I understand that any false stateme approval by the Natural Resources	ents made on this application may cause subsequent Commission to be null and void.
	hat by signing this permit application, I am giving the authorization to conduct any site inspections necessary in
INCOMPLETE APP	LICATIONS WILL NOT BE ACCEPTED!
Appellant's signature:	Date:

File #: _____

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TRIBAL PLANNING OFFICE USE ONLY

Date Filed Fee Paid:	Reviewed By:	
NOTE:		