
**CODE COMPLIANCE DIVISION
APPEAL REQUEST FORM**

I hereby appeal the Administrative Penalty/ Monitoring fee relative to case # _____, for the property located at: _____ and **agree to pay the Appeal Fee** {per City Code Title 1.28) prior to the City scheduling a date for the Appeal Hearing.

☐ **Weed Abatement Administrative Penalty Appeal \$100**

☐ **Vacant Lot Administrative Penalty Appeal \$50**

☐ **Vacant Lot Monitoring Fee Appeal \$100**

My legal interest in this property is:

☐ Owner

☐ Beneficiary

☐ Other: _____

I submit the following material facts to substantiate action in reversing, modifying, or setting aside the action of the City of Sacramento: _____

I hereby certify under penalty of perjury that the information submitted in the appeal is true.

Print Name: _____

Signature: _____

Address: _____

Date: _____

Phone: (____) _____ - _____

City: _____

Email: _____

State: _____ Zip: _____

NOTE: If this form is received incomplete, it will be returned to you and may result in a delay in scheduling your case before the Hearing Examiner.

Vacant Lot:

Accounting Information:

ACCOUNT: 351020
OPERATING UNIT: 21000
FUND: 1001
DEPARTMENT: 21001314
PROGRAM CODE: 21176

Weed Abatement:

Accounting Information:

ACCOUNT: 343060
OPERATING UNIT: 21000
FUND: 1001
DEPARTMENT: 21001313
PROGRAM CODE: 21148