

**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