



Administrative Interpretation Appeal

Land Development Code Section 4-53

Community Development Department | 9220 Bonita Beach Road, Suite 111 | Bonita Springs, FL 34135 | Phone: (239) 444-6150 | Fax: (239) 444-6140

An administrative action or interpretation may be appealed by the Applicant. The appealing party must file a Notice of Appeal no later than 30 calendar days after the administrative official renders the action appealed. The Notice of Appeal must be filed with the City of Bonita Springs Community Development Department, on this form and the filing fee paid. A Notice of Appeal is not filed until payment of the filing fees.

All administrative appeals will be heard in accordance and must be in compliance with the provisions of LDC Section 4-53(c).

Case No. _____ Case No. Being Appealed: _____

PART 1 APPELLANT DATA

A. Name of Appellant: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____ E-mail: _____

B. Name of Agent: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____ E-mail: _____

C. Name of Property Owner: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____ E-mail: _____

PART 2 SUBJECT OF APPEAL BEING REQUESTED

A. Action being appealed (Attach and label as Action Being Appealed):

- ☐ Copy of Administrative Action being appealed.
☐ Copy of Administrative Interpretation issued by County being appealed.

B. Summarize the action that is being appealed. (Note: If additional space is needed, please attach a separate sheet and label as **Summary of Action Being Appealed.**)

C. Specifically state the error you believe the administrative official made, the relief sought, and the legal basis for the requested relief. The failure to state the error made by the administrative official may result in dismissal of the appeal. (Note: If additional space is needed, please attach a separate sheet and label as **Reason for Appeal**.)

D. Name(s) of Bonita Springs Administrative Official and Department(s) making the original interpretation:

**PART 3
SITE SPECIFIC DATA**

If request is specific to a particular tract of land and is not so general in nature that it would apply to other properties, please complete the following:

A. Owner of Subject Property: _____

B. STRAP No. of Subject Property: _____

C. Street Address of Subject Property: _____

D. Common Description of Subject Property (reference known major streets or landmarks)

E. Legal Description (If additional space is needed, please attach a separate sheet and label as Exhibit A-3.E)

F. Size of Property: _____ G. Council District: _____

**PART 4
CERTIFICATION**

I, _____, being first duly sworn, depose and say that the answers, attachments, and exhibits included herewith as a part of this application are accurate and true to the best of my knowledge and belief.

Signature of Appellant or Authorized Agent

Date

Name (typed or printed legibly) and title

\$ _____
Fee Amount

STATE OF FLORIDA

COUNTY OF LEE

The foregoing instrument acknowledged before me this _____ day of _____, 20____, by _____, who is personally known to me or who has produced _____ as identification.

(SEAL)

Signature of notary public

Printed name of notary public

**PART 5
SUBMITTAL REQUIREMENTS**

THE NUMBER OF COPIES REQUIRED FOR EACH SUBMITTAL ITEM/EXHIBIT IS INDICATED BELOW. COPIES SHOULD BE SUBMITTED TOGETHER IN SETS ALONG WITH ALL OTHER REQUIRED DOCUMENTATION.

Copies Required*	SUBMITTAL ITEMS
2	Completed Application
1	Filing Fee [Ordinance No. 10-01]
2	Summarization of Appeal
2	Copy of Administrative Action Being Appealed
2	Summary of Action Being Appealed
2	Reason for Appeal

*** At least one copy must be an original**