



CITY OF TETONIA

IDAHO

3192 Perry Ave - P.O. Box 57
Tetonia, Idaho 83452
208.456.2249
tetoniagov@silverstar.com

APPEAL APPLICATION

*FILE NO.:	*FEE: \$250	*Date paid: *Check #:
	<input type="checkbox"/> \$	*CITY USE

APPLICANT IS: PROPERTY OWNER LESSEE BUYER DEVELOPER OTHER

APPLICANT: MAILING ADDRESS:

CITY: STATE: ZIP CODE: PHONE: CELL: FAX:

BRIEFLY DESCRIBE THE APPEAL REQUEST AND PROVIDE JUSTIFICATION:

NOTE: APPLICANT/REPRESENTATIVE SHOULD ATTEND THE CITY MEETING WHEN THE APPEAL WILL BE DISCUSSED.

Signature of Applicant/Representative: _____ Date: _____

Signature of receipt by City staff: _____ Date: _____