



**PLANNING COMMISSION /  
BOARD OF ZONING ADJUSTMENTS APPEAL FORM**

**PJR-021**

To: Board of Supervisors  
County of Sonoma, State of California

File No.: \_\_\_\_\_

Appeal is hereby made by \_\_\_\_\_

Mailing Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

The Sonoma County \_\_\_\_ Planning Commission / \_\_\_\_ Board of Zoning Adjustments on  
(date) \_\_\_\_\_

\_\_\_\_ approved / \_\_\_\_ denied a request by \_\_\_\_\_

for \_\_\_\_\_

Located at \_\_\_\_\_

APN \_\_\_\_\_ Zoning: \_\_\_\_\_ Supervisorial District: \_\_\_\_\_

This appeal is made pursuant to Sonoma County Code Chapter Section 26-92-160 for the following  
specific reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Appellant Signature \_\_\_\_\_ Date: \_\_\_\_\_

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DO NOT WRITE BELOW THIS LINE - TO BE COMPLETED BY PERMIT SONOMA STAFF

This appeal was filed with Permit Sonoma on this date \_\_\_\_\_,  
receipt of which is hereby acknowledged.

Permit Sonoma Staff Signature \_\_\_\_\_