File #:
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## **Sussex County Notice of Appeal Form Sussex County, Delaware**

Sussex County Planning & Zoning Department
2 The Circle (P.O. Box 417) Georgetown, DE 19947
302-855-7878 ph. 302-854-5079 fax

Name of Subdivision:		
Date of Approval:		
Location of Subdivision:		
Тах Мар #:		Total Acreage:
Appellant Information		
Appellant Name:		
Appellant Address:	<b>C</b>	7' 0 1
City: Phone #:	State: E-mail:	ZipCode:
<u>Developer Information</u>		
Developer Name:		
Attorney Information (If Applicable)		
Attorney Name:		
Attorney Address:		
City:	State:	ZipCode:
Phone #:	E-mail:	





**Basis for Appeal:** (Please provide a written statement regarding reason for appeal - Note that in accordance with Section 99-39B of the Code of Sussex County, the appeal must be on the record of the hearing before the Planning & Zoning Commission.)

## **Check List for Sussex County Appeal Applications**

The following shall be submitted with the Notice of Appeal

Complete	d Application				
Provide re	elevant Application Fe	ee (please refe	er to fees effective July 1, 2022)		
Within thirty (30) days following the filing of this Notice of Appeal, the Appellant shall pay the costs to have a certified court reporter prepare a verbatim written transcript of the hearing before the Commission and to file the transcript with the Clerk of County Council. Failure to file the transcript within this thirty (30) day period shall cause the appeal to be dismissed. Code of Sussex County, Section 99-39B.(2).					
The undersigned hereby certifies that the forms, exhibits, and statements contained in any papers or plans submitted as a part of this appeal are true and correct.					
Signature of Appello	ant/Attorney				
For office use only: Date Submitted: Staff accepting Notice of		Fee:	Check #: n & Case #:		
Date of Commission Hea	aring:	Decision: _			
Date Transcript is due: _					