



Appeal Form

County of Ventura • Resource Management Agency • Code Compliance Division
800 South Victoria Avenue, Ventura, CA 93009 • 805 654-2800 • www.vcrma.org/divisions/code-compliance

Appeal Number or Violation Number:

To: ___ Board of Supervisors
 ___ Planning Commission
 ___ PWA Advisory Agency
 Director Review

Name of Appellant:

Address of Appellant:

Telephone Number of Appellant:

I hereby appeal the:

dated:

The grounds for my appeal are as follows: (attach extra sheets as needed):

I request that the appropriate decision making body take the following action:

Are you a party in the application? Yes No

If the above answer is "no", state your basis for filing this appeal as an "aggrieved person."

Signature of Appellant

Date

Appeal and deposit fee amount \$_____

(pursuant to fee schedule specified by Resolution No. 222 of the Ventura County Board of Supervisors)

Time and Date received by the Code Compliance Division: _____, 20_____.

Jonathon Wood Director-
Code Compliance Division

By _____

LEVINE ACT CAMPAIGN CONTRIBUTION DISCLOSURE FORM

You must submit this completed Disclosure Form to the County of Ventura (County) if you or your company are seeking approval of a discretionary land use permit, subdivision map or approval, or other discretionary land use entitlement (collectively, Entitlement).

Land use-related Entitlement applications are potentially reviewed and decided by the Board of Supervisors, Planning Commission, and Cultural Heritage Board. In making the disclosures below, please see the following websites for a list of these current County officials:

- Board of Supervisors (<https://venturacounty.gov/board-of-supervisors/>)
- Planning Commission (<https://rma.venturacounty.gov/planning-commissioners/>)
- Cultural Heritage Board (<https://rma.venturacounty.gov/cultural-heritage-board-members/>)

☐ Check this box if you previously completed this form and this is a supplemental disclosure.

Have you or your company, or an agent on behalf of you or your company, made campaign contributions totaling more than \$500 to a County official in the past 12 months?

☐ YES ☐ NO

If **YES**, please provide the following information (*attach separate pages as needed*):

- Name of each official to whom a contribution was made: _____
- Name of contributor(s): _____
- Date(s) of contribution(s): _____
- Amount(s) of contribution(s): _____

If the applicant is a corporation, limited liability corporation, partnership, or other form of business entity, please identify any shareholder or owner that has more than a 50% ownership interest:

While your application is pending, you must submit a supplemental form for any new campaign contributions totaling more than \$500 that are made to a County official.

AUTHORIZED SIGNATURE

DATE

NAME