



# LAKE HAVASU CITY

## Appeal Application

Return completed application and attachments to:  
City Clerk's Office

2330 McCulloch Blvd. N., Lake Havasu City, AZ 86403 Phone: 928.453.4142 Website: [www.lhcaz.gov](http://www.lhcaz.gov)

For standard regulatory procedures, see Lake Havasu City Code Section 14.05.03(O).

APPLICATION NUMBER \_\_\_\_\_ DATE \_\_\_\_\_

**(1) APPLICANT NAME / MAILING ADDRESS / CONTACT INFO**

\_\_\_\_\_  
PHONE \_\_\_\_\_  
EMAIL \_\_\_\_\_  
\_\_\_\_\_

**(2) SITE LOCATION**

STREET ADDRESS \_\_\_\_\_ TRACT \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_

**(3) REQUEST DESCRIPTION**

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

**(4) SUBMITTAL REQUIREMENTS**

Appeals to the Board of Adjustment, Planning Commission, or City Council shall be filed with the City Clerk and must include:

- a) Appeal application.
- b) Letter addressed to the applicable governing body stating the pertinent facts of the case and the basis for the appeal.
- c) Any additional information required by state statute or City code.

**(5) APPLICATION PROCESSING TIMEFRAME & FEES**

- a) Staff reviews submittal requirements for completeness and compliance with the Lake Havasu City Code (3 business days).
- b) Staff contacts applicant for payment of fee (3 business days). Fees can be paid by credit card, check, or cash.
- c) Staff schedules a Public Hearing before the appropriate governing body (up to 45 days).
- d) Following Public Hearing, Staff mails Notice of Action to applicant (7 business days).

Planning Commission  \$118.46      Board of Adjustment  \$166.05      City Council  \$166.05

**(6) CONTACT PLANNING FOR FURTHER INFORMATION**

Trevor Kearns, City Planner II, Phone: (928) 854-0783, [kearnst@lhcaz.gov](mailto:kearnst@lhcaz.gov)  
Chris Gilbert, Planning Division Manager, Phone: (928) 854-0722, [gilbertc@lhcaz.gov](mailto:gilbertc@lhcaz.gov)

**(7) CLARIFICATION**

A person may request the City to clarify its interpretation or application of a statute, ordinance, code, or policy affecting the processing of this application in accordance with ARS § 9-839.

**(8) CERTIFICATION/ACKNOWLEDGEMENT**

- a) I hereby file the above request as an authorized applicant.
- b) To the best of my knowledge, the information provided herein is accurate and true.
- c) I am aware of the steps and timeframes involved in the processing of this application.

To submit this application electronically, Lake Havasu City requires that you certify your application by submitting an electronic signature. Please type your name in the field below and click the confirm signature check box.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

CONFIRM SIGNATURE

Notice: Arizona Revised Statutes § 9-495 requires in any written communication between the City and a person, the City provide the name, telephone number, and email address of an employee to provide information if the communication: 1) Demands payment of a tax, fee, penalty, fine or assessment; 2) Denies an application for a permit or license that is issued by the City; or 3) Requests corrections, revisions or additional information or materials needed for approval of any application for a permit, license or other authorization that is issued by the City. The employee shall reply within five (5) business days after City's receipt of a communication if authorized and able.