

Historic Preservation Appeal Period Waiver

PDS	Department Application
	#183

I, _____, received preliminary approval from the Historic Preservation Staff
Name

on _____ for DRH _____ - _____, located at _____.
Date Project Number Property Address

The approval was for (Project Description):

I request a waiver of the ten (10) day appeal period for the project listed above. If the waiver is granted, I can get a building permit immediately.

Applicant Signature

Date

A copy of the approval with conditions imposed by staff is available upon request. Boise City Code 11-03-07 states that a building permit cannot be issued prior to the 10 day appeal. This allows anyone to appeal Staff's decision to the Historic Preservation Commission. However, Boise City Code 2-18-10 (D) (2) states:

Appeal of Staff Level Decisions

A decision of the Planning Director may be appealed to the Commission within ten (10) calendar days from the date the notice is mailed in accordance with Title 11, Chapter 3, Boise City Code. The applicant may request a waiver of the ten (10) day appeal period for staff level approvals if the request is made in writing

and accompanied by the signatures of all adjacent property owners and residents and a representative of the registered neighborhood association indicating that they do not object to the waiver request. The Planning Director shall review all pertinent information and issue a decision on the request.

Note: If you are planning to appeal or would like a few days to think about it, then do not sign this waiver.

- The signatures of all adjacent property owners and residents and a representative of the registered neighborhood association, indicating they do not object to the waiver request, are attached on the next page.



Required Signatures

Below are the signatures of all adjacent property owners/residents and a representative of the registered neighborhood association, indicating they do not object to the waiver request.

- We, the undersigned, do not object to this waiver request.
- We sign this waiver freely and were not in any way coerced into signing it.
- By signing this waiver we have had adequate time to review the approval and have made a determination that we do not want to appeal.

Neighborhood Association: _____

Representative: _____ Signature: _____

Address: _____ Date: _____

Name (print): _____

Signature: _____

Address: _____

Date: _____

Name (print): _____

Signature: _____

Address: _____

Date: _____

Name (print): _____

Signature: _____

Address: _____

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