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**REQUEST TO APPEAL A DECISION REGARDING A**

**COMMERCIAL CANNABIS PERMIT (CCP)**

**Business Name (as listed on CCP or application)**:

## CCP No. (if applicable):

**City Decision Being Appealed (indicate original request and whether approved or denied)**:

**Basis for Appeal (attach separate pages if necessary)**:

**Primary Contact Title**:

## Contact's Mailing Address:

**Phone #**:

1. **mail**:

**I THE UNDERSIGNED HEREBY DECLARE THAT ALL THE INFORMATION INCLUDED IN THIS APPEAL IS TRUE TO THE BEST OF MY KNOWLEDGE. I HAVE ENCLOSED THE APPROPRIATE FEES.**

**Signed**:

**Date**: