



Code Enforcement
Short Term Rental Appeal Form
Applicant or Permittee

Office Use Only

The form must be returned no later than the required date as listed below

Today's Date: Assessor Parcel Number:

Your Name: Phone:

Location of Property:

Mailing Address:

E-mail Address (please print clearly):

I am appealing a Short-Term Rental Denial. The Appeal Form must be returned no later than 30 days from the Notice Date. Application Number: Notice Date:

I am appealing a Short-Term Rental Suspension or Revocation. The Appeal Form must be returned no later than 10 days from the Notice Date. Permit Number: Notice Date:

Due to ongoing public health concerns in-person hearings have been suspended until further notice.

I wish to appear by: Phone Declaration

For Phone Hearings I prefer A.M. P.M. No Preference

We will try to accommodate your preferred time; however, your selection is not guaranteed.

Required: Reason for appeal (attach additional sheets if needed)

Four horizontal lines for providing the reason for appeal.

The Appeal Form must be submitted in person or by mail to:

San Bernardino County Land Use Services Department
Attn: Code Enforcement Appeals
268 W. Hospitality Lane, Suite 300
San Bernardino, CA 92415

Appellant Signature

Date