



RESIDENTIAL RENTAL HOUSING BOARD OF APPEALS

Date: _____

Property Information

Address	TAX ID NUMBER: 4717-
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RENTAL REGISTERED: Yes No

Information of Person Making Appeal:

Name	Relationship to Property (Owner or Tenant)	
Address	Home Phone	Business Phone
City	State	Zip Code
e-mail Address		
Owner's Signature		

Reason for Appeal:

- Error by the Building Official in:
 - Decision Violation Requirement Repair Notice
- Refusal by Building Official
Explain: _____
- Other: _____
- Interpretation of the Ordinance. Ordinance # _____

Date of Notice of Violation I am appealing is (from notice): _____

Date of Inspection (from notice): _____

The part of the repair notice I am appealing is Violation # or time limit of: _____

My solution to the problem would be: _____

List of items completed from the violation: _____

The remaining items can be completed by: _____

Extension of time already given: Yes No

I affirm that all information submitted on this application is correct to the best of my knowledge.

(Signature of person appealing)

Date

Mail or Bring to: City of Howell, Community Development Department, 611 E Grand River Ave., 3rd Floor, Howell, MI 48843
Fee:\$ Payable at time of Application

Office Use Only:

DATE RECEIVED: _____

FEE PAID: _____ AMOUNT: _____

REGISTRATION CONFIRMED: Yes No

INSPECTOR: _____

LAST APPEAL DATE: _____

Code Sections said to be violated: _____

MEETING DATE SET: _____

MEETING RESULTS: _____