



Call for Review

Community Development Department
Planning Division
100 Civic Center Drive / P.O. Box 1768
Newport Beach, CA 92658-8915
949-644-3204
www.newportbeachca.gov

For Office Use Only
Date Filed: _____
Received by: _____

**Application to Call for Review
the Decision of the:**

- Zoning Administrator
- Community Development Director
- Hearing Officer
- Planning Commission

City Council or Planning Commission Member:

Name: _____

Application Called for Review:

Name of Applicant: _____ Date of Decision: _____

Project No. (PA): _____ Activity No.: _____

Site Address: _____

Project Description: *(attach separate sheet if necessary)*

Signature of City Council or Planning Commission Member:

Signature _____ **Date:** _____

20.64.030.B.2. - A call for review is exempt from the payment of a filing fee under Section [3.36.030](#), or any successor provision.