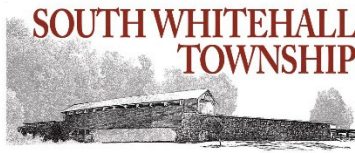


APPEAL MUST BE

RECEIVED BY: ___/___/_____



South Whitehall Township
4444 Walbert Avenue
Allentown, PA 18104
610-398-0401

SOUTH WHITEHALL TOWNSHIP SHADE TREE PERMIT APPEAL REQUEST

Permit # _____

Appealing: Permit Denial _____ Permit Conditions of Approval _____

NAME:	ADDRESS:	DATE:
EMAIL:		DAYTIME PHONE #:

PROPERTY ADDRESS:

(PLEASE WRITE LEGIBLY) State ALL reasons for appeal.
If necessary, use separate sheet of paper and write permit # in **upper** right corner.

FOR OFFICIAL USE ONLY

Date Received: ___/___/_____ Reviewed By: _____

Action Taken

_____ DECISION UPHELD

_____ DECISION WITHDRAWN

Decision Letter Sent/Emailed: ___/___/_____