



Jackson/Teton County Affordable Housing Department Appeals Form (Request for Hearing)

Staff will forward to Jackson/Teton County Housing Authority Board within 30 days. The Hearing will be scheduled at least 30 days following the Housing Department's receipt of the Request for Hearing.

Please submit this form along with \$50.00 fee to The Housing Department.

Date Submitted _____

Name of Applicant(s) _____

Address _____

Phone _____ Email _____

Name and contact information for complainant's representative

Grounds upon which Appeal is based _____

Action or remedy requested _____

Please attach proof that Homeowner's Association has been notified of appeal if applicable.

Applicant Signature

Applicant Signature

Please attach extra pages if more space is needed

For Housing Department use only

Date Received