

Portland Fire & Rescue, Fire Prevention Division

1300 SE Gideon St. Portland OR 97202-2419

Appeals Phone: (503) 823-3770 Fax: (503) 823-3925

CITATION APPEAL FORM

**TO APPELLANT:**

Please submit a complete **APPEAL PACKET** including:

* Completed Citation Appeal form. If you need help completing the form consult the Inspector who issued the citation or call (503) 823-3770.
* Any photos, illustrations and other information that may further clarify your appeal.
* The details of the appeal described on the attached Information Sheet. A separate sheet is required for each citation.

**MAIL or DELIVER to: Portland Fire & Rescue,**

**Attn: Fire Code Citation Appeal, 1300 SE Gideon St., Portland OR 97202-2419.**

**NOTE: You** **may email the packet to** [**firemarshal@portlandoregon.gov**](mailto:firemarshal@portlandoregon.gov)

**You may also fax the packet to 503-823-3925**

Citation appeals will be reviewed by an Administrative Appeal Board. The appeal will be either granted or denied and a notification of the appeal disposition will be sent by mail.

If you disagree with the Administrative Appeal Board ruling, you may appeal to the Fire Code Board of Appeals. Instructions will be provided on the letter of disposition.

**Citation Information:** Appeal involves (Check One):

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| Public Assembly Violation | | | | | | | Fireworks Violation | | | | | | | | | |
| Certificate of Fitness Violation | | | | | | | General Violation (please specify): | | | | |  | | | | |
| Fire Inspector Name: | | | | |  | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| Business Name (If applicable): | | | | | |  | | | | | | | | | | |
| Business Address: | | | |  | | | | | Cross Streets: | | | |  | | | |
| Owner’s Name: | |  | | | | | | Owner’s Address: | | |  | | | | | |
| **In accordance with City Ordinance, I hereby make application to appeal the citation issued for violation of the Fire Code and or Policies of the City of Portland as outlined in the attached information.** | | | | | | | | | | | | | | | | |
| Appellant Name: | | | |  | | | | | | Phone Number: | | | | | |  |
| Firm Name: |  | | | | | | | | | Fax Number: | | | | |  | |
| Applicant Address: | | |  | | | | | | | | | | | | | |
|  | | | | | | | | | | |
| Applicant Signature: | | | |  | | | | | | | Date: | | |  | | |

# FOR OFFICE USE ONLY

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|  | | |  | | | |
| Received By: |  | | Appeal Date: |  | | |
| Date Received: | |  | Appeal Number: | |  | |
|  | | | Previous Appeals: | | |  |



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CITATION APPEAL INFORMATION SHEET

A separate appeal information sheet must be completed for each citation being appealed. Provide as much detail as possible in all sections. Failure to provide details or complete all sections may cause delays in the appeal review process. If you need assistance in completing this form, consult with the Fire Inspector or who issued the citation or call (503) 823-3770.

**FIRE CODE SECTION AND/OR POLICY:**

**CODE/POLICY REQUIREMENTS:**

**REASON FOR APPEAL: Describe action requested; provide evidence and/or justification for appeal.**