## POLLUTION CONTROL HEARINGS BOARD STATE OF WASHINGTON

Appellant, NOTICE OF APPEAL
v.
Respondent.

## 1. Appellant(s)

Name of appellant(s)
Name of representative (if any)
Mailing address
Telephone number
Facsimile number (if available)
E-mail address (if available)

- 2. Name of the agency, or local air authority, health department or conservation district whose decision is being appealed (respondent in caption)
- 3. Name of applicant (who should be named a respondent, if you are not the applicant and are appealing an order or decision based upon an application)
- 4. Appellant(s) (is or are) appealing from the attached order or decision (attach also the application if the order or decision is based upon an application).
- 5. Appellant(s) (has or have) (not) applied in writing to the agency, or local air authority for remission or mitigation (if this is an appeal of a penalty).
- 6. Appellant(s) (believes or believe) the agency decision is unlawful or unjust because (set forth a short and plain statement of the legal grounds for the appeal).
- 7. The appeal is based upon the following pertinent facts (set forth a clear and concise statement of facts relied upon to support the grounds for the appeal).
- 8. Appellant(s) (seeks or seek) the following relief (set forth the specific nature and extent of relief being sought. If seeking a stay from the agency order or permit decision, set forth the grounds the grounds and factual basis for the stay, either in this notice of appeal, or in a separate motion). See RCW 43.21B.320).
- 9. Copies of this notice were served upon the respondent(s) on (date of service) (attach the proof of service).

Signature of the appellant(s) or representative