

# LUZERNE COUNTY FLOOD PROTECTION AUTHORITY

P O Box 1909  
Kingston, PA 18704

## LEVEE FEE APPEAL FORM

Record Owner (name) \_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

Property Subject of Appeal \_\_\_\_\_

\_\_\_\_\_

Property Identification Number \_\_\_\_\_

Map Number      Block Lot

Building and/or Land Use Type \_\_\_\_\_

Deed/Record Book No. \_\_\_\_\_ Page No. \_\_\_\_\_

State Reasons for Filing the Appeal (Provide photographic or other substantiating information.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Certificate of Appeal

I/We hereby declare my/our intention to appeal from the Levee Fee of the property described above and do hereby verify that the statements made in this appeal are true and correct. I/We understand that false statements herein are made subject to the penalties of 18 Pa. C.S - 4904, relating to unsworn falsification to authorities.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Owner(s) of Record      Date: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ Phone: (Cell) \_\_\_\_\_

Email Address \_\_\_\_\_

Authority Decision \_\_\_\_\_

Meeting Date: \_\_\_\_\_