



# Short-Term Vacation Rental Appeal of Administrative Citation

## Application Form

Pursuant to Section 19.35.5.C.2(b) of the Henderson Development Code, the undersigned hereby submits the following application and requests an appeal before the Community Development and Services Director.

**\*\*Appeal must be received no later than the 10th day following the date of the administrative citation.**

Short-Term Vacation Rental Registration Number: \_\_\_\_\_

City of Henderson Administrative Citation Number: \_\_\_\_\_

Address of Property Involved: \_\_\_\_\_

Assessor's Parcel Number: \_\_\_\_\_

Provide specific grounds for the appeal, a statement of improper decision, and all relevant supporting documents for the appeal.

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Provide description of relief being requested by filing the appeal.

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Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_ ZIP: \_\_\_\_\_

Applicant Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Applicant E-mail: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

## Appeal submittal must include the following information:

- Identify the enforcement action that the person is contesting;
- Set forth the facts supporting the appeal;
- Identify the requested relief.

The appeal and documentation must be submitted in the following method(s):

1. Personally; or
2. First-class mail and email with confirmed receipt.

Appeal must be received no later than the 10th day following the date of the administrative citation.

Email completed appeal form and documentation to:  
[stvr@cityofhenderson.com](mailto:stvr@cityofhenderson.com), include the Citation Number and property address in the subject line

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## Community Development and Services

240 Water St.  
P. O. Box 95050  
Henderson, NV  
89009-5050

Phone: 702-267-1500

Fax: 702-267-1501

[cityofhenderson.com](http://cityofhenderson.com)