

SHORELINES HEARINGS BOARD
STATE OF WASHINGTON

v.	Petitioner(s), Respondent(s).	PETITION FOR REVIEW
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1. Petitioner(s)

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

2. Name of the local government and/or the Department of Ecology whose decision(s) you seek to review (respondent(s) 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. Petitioner(s) (is or are) requesting review of the attached order, decision, regulation or master program (attach also the application if the order or decision is based upon an application).
5. Petitioner(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).
6. The petition 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).
7. Petitioner(s) (seeks or seek) the following relief (set forth the specific nature and extent of relief being sought).
8. Copies of this petition were served upon the respondent(s) and upon the Department of Ecology (you need serve the Department of Ecology only once, even if it is a respondent in the case) and the Attorney General on (date of service).

Signature of the petitioner(s) or representative