



CITY OF HUNTINGTON BEACH

Department of Community Development

Meeting/Research Request Form

Name: _____ Date: _____

Telephone No: _____ E-mail address: _____

Meeting \$175/hr. Research \$175/hr (Please check one)

Fee shall be paid at time of request. Additional time and fees may be required as determined by the Planning Division.

Purpose of meeting/research (Please be specific): _____

Address of property in question: _____

Preferred date and time of meeting: _____

Estimated length of meeting: _____

The Department of Community Development will try to accommodate your meeting request, however due to previously scheduled commitments, staff reserves the right to change the time and date of the requested meeting. You will be notified of the approved date and time at least three (3) days prior to the meeting.

For Official Use Only

Meeting/Research Request No: _____ Receipt No: _____ Date: _____ Planner's Initials: _____