

CONTACTS

Telephone: 780-427-4864

Web URL: http://www.mgb.alberta.ca

Appeal Received MGB Use Only

Notice of Subdivision Appeal

SEND TO:

Municipal Government Board 1229 – 91 Street SW Edmonton AB T6X 1E9

Fax: 780-427-0986

Email: mgbmail@gov.ab.ca

A notice for subdivision appeal under section 678 of the *Municipal Government Act* should contain the following information and must be filed with the MGB office within 14 days after receipt of the written decision of the subdivision authority or deemed refusal by the subdivision authority in accordance with section 681.

Part 1 – General Information – Please Print									
PROPERTY UNDER APPE	A.I.								
Name of Municipality	bdivision Authority	ivision Authority (if applicable)				Subdivision Authority File Number			
Does the land that is the subject of the app	eal contain, or is it adjacent to, o	or near, any of the	following? (Check AL	L that apply)					
	Body of Water (Name:	•			☐ Landfi	ш Па	Green Area		
☐ Wastewater Treatment Facility ☐ Waste Management Facility ☐ Historical Site ☐						al Resource			
, , ,									
Legal Description Lot Bloo	ck Plan	AND/OR	Portion	Section	Township	Range	Meridian		
APPELLANT (e.g. Landow	ner or department l								
Name (Last)	(Last) (First)						Telephone Number (daytime)		
Address (Street, PO Box, RR)	(Suite, Apartm	ent) (Town/	/City/Village)		(Provir	nce)	(Postal Code)		
	, , ,	,	, ,		,	,	,		
I consent to receive documents by email	My email address is:				Fax Ni	umber			
☐ YES ☐ NO									
I ANDOWNER INFORMATI	ON (if different from	n Annellant'	1						
LANDOWNER INFORMATION (if different from Appellant) Name (Last) (First)						none Number	(daytime)		
Address (Street, PO Box, RR)	(Suite, Apartm	ent) (Town	City/Village)		(Provir	nce)	(Postal Code)		
I consent to receive documents by email	My email address is:				Fax N	ımber			
YES NO	,								
					I				
AGENT INFORMATION AN	ID CERTIFICATION	(if Appellan	t is Represer	nted by an A	gent)				
Name of Organization									
Contact Name (Last)			(First)		Teleph	none Number	(daytime)		
Address (Street, PO Box, RR)	(Suite, Apartm	ent) (Town	'City/Village)		(Provir	nce)	(Postal Code)		
I consent to receive documents by email	My email address is:				Fax N	ımher			
YES NO	wy chian address is.				I ax IN	uniDGI			
I (We) hereby authorize			to act on my (c	our) behalf on matter	s pertaining to th	us subdivision a	appeal		
Cionatina of Our cuts			0'-	making of Occasion			Doto		
Signature of Owner(s)	Da	IIC	Sig	nature of Owner(s)			Date		

Part 2 – Decision of the Subdivision Authority **DECISION OF SUBDIVISION AUTHORITY** month day Date of ☐ YES Пио Copy of Subdivision Authority Decision Decision attached? Part 3 – Reasons for Appeal All subdivision appeals must contain the reasons for appeal, including the issues in the decision or the conditions imposed in the approval that are the subject of the appeal.* (Attach extra page(s) if required) Approval – What conditions of approval do you disagree with and why? OR Refusal – Why do you think your subdivision application should be approved? * See Municipal Government Act, section 678(4)(b) Part 4 - Pre-Hearing Meetings It is recommended that you discuss your appeal with the Subdivision Authority, Alberta Transportation and Alberta Environment and Parks (if applicable) prior to the appeal hearing. YES ∐ ио Did you discuss your appeal with a representative from the Subdivision Authority? ☐ YES П ио Did you discuss your appeal with a representative from Alberta Transportation? ☐ YES □ NO Did you discuss your appeal with any other agencies or departments? If yes, please specify Signature of Appellant OR Date

This information is being collected for the purposes of setting up appeal hearings in accordance with Section 33(c) of the <u>Freedom of Information and Protection of Privacy Act</u>. It will be provided to those who may be affected by your application including adjacent landowners, government agencies, municipalities, utilities, etc. The contact information you provide may also be used to conduct follow-up surveys designed to measure satisfaction with the appeal process. Questions about the collection of this information can be directed to Alberta Municipal Affairs, Municipal Government Board 1229 – 91 Street SW, Edmonton, Alberta T6X 1E9 780-427-4864. (Outside of Edmonton call 310-0000 to be connected toll free.)

Person Authorized to Act on Behalf of Appellant