

APPLICATION FOR APPEAL

Town of White City Development Appeals Board



1. Applicant Information

Name: _____
Company: _____
Address: _____
Municipality: _____ Province: _____ Postal Code: _____
Phone Number: Home () _____ Work: () _____
Cell: () _____ Email: _____

2. Subject Property

Civic Address: _____
_____ ¼ Section _____ Twp. _____ Range _____ West of _____ Meridian
Lot(s) _____ Block(s) _____ Plan/Parcel No. _____

3. Applicants Interest in Property

- | | |
|---|---|
| <input type="checkbox"/> Registered Owner | <input type="checkbox"/> Agent of Owner |
| <input type="checkbox"/> Tenant | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Neighbour | |

4. Property owner (if different from Applicant)

Name: _____
Company: _____
Address: _____
Municipality: _____ Province: _____ Postal Code: _____
Phone Number: Home () _____ Work: () _____
Cell: () _____ Email: _____

5. Description of proposed development (be specific, attach copies of application and decision)

6. Reason For Appeal

- | | |
|--|--|
| <input type="checkbox"/> Misapplication of zoning bylaw | <input type="checkbox"/> Enforcement order has been issued |
| <input type="checkbox"/> Failure to issue development permit | <input type="checkbox"/> Development Levies and/or Servicing Agreement |
| <input type="checkbox"/> Conditions attached are excessive | <input type="checkbox"/> Building maintenance order |
| <input type="checkbox"/> Failure to remove holding symbol | <input type="checkbox"/> Subdivision appeal |
| <input type="checkbox"/> Failure to enter into a development agreement | <input type="checkbox"/> Requesting variance |
| <input type="checkbox"/> Minor variance revoked, refused | |

7. Summary of supporting facts (explain in detail the grounds the appeal is being made, identify sections of the official community plan and zoning bylaw that apply to this appeal, etc.)

8. Any additional information (provide any additional information that may support the appeal)

9. Expectation of the appeal (indicate action requested of the Board)

10. Other requirements

1. This application must include a basic fee of \$50, to help cover expenses relating to the appeal.
2. An agent must have written authorization if they are to act on the applicants behalf at the appeal hearing.
3. Applicants must submit all evidence and materials in support of the related appeal to the secretary at least five days prior to the hearing. All evidence and support material provided to the secretary less than five days before the hearing will be dismissed by the Board.
4. Until the hearing is complete and a decision has been issued, no binding contracts for the land should be made and no construction or site preparation should be started.

11. Authorization

I hereby swear that the information given on this form is full and complete and that all statements contained within this application are true.

Signature

Date

Name

Address