

Under section 619 of the *Municipal Government Act (Act)*, a municipality must approve an application for a statutory plan amendment, land use bylaw amendment, subdivision approval, development permit, or other authorization under Part 17 to the extent that it complies with a license, permit, approval, or other authorization granted under s. 619(1). If the application is refused or overdue as per s. 619(3), the applicant may appeal the matter to the Municipal Government Board. A statutory declaration, as per s. 619(5)(b), indicating the status of mediation must accompany this Notice of Appeal.

Part 1 – General Information – Please Print

APPELLANT

Name	Telephone Number
Address (Street, PO Box, RR) (Town/City/Village) (Province) (Postal Code)	
E-mail Address	Fax Number

AGENT INFORMATION AND CERTIFICATION (if Appellant is Represented by a Lawyer/Agent)

Name of Firm	
Designated Contact (Last) (First) Telephone Number (daytime)	
E-mail Address	Fax Number

MUNICIPALITY

Name of Municipality	Telephone Number
Address (Street, PO Box, RR) (Town/City/Village) (Province) (Postal Code)	
E-mail Address	Fax Number

Part 2 – Owner(s) of Land that is the Subject of the Appeal

- Please attach Certificate(s) of Title for the land(s) subject to the appeal.
- If more than one owner, please attach list of the names and addresses of each landowner of any land that will be directly affected by this appeal.

Name (Last) (First) Telephone Number (daytime)	
Address (Street, PO Box, RR) (Suite, Apartment) (Town/City/Village) (Province) (Postal Code)	
E-mail Address	Fax Number

Part 3 - Provincial Authorization

Please indicate which Provincial authority (NRCB, ERCB, AER, AEUB, or AUC) issued the authorization at issue, and briefly describe the aspect of that authorization relevant to your application.

If possible, please attach a copy of the license, permit, approval, or other authorization.

Part 4 - Part 17 Application

Date application submitted _____

Please indicate what is under appeal (statutory plan, land use bylaw amendment, subdivision approval, development application, or other application under Part 17) and provide a brief description.

Date bylaw received second reading (if applicable)	Date bylaw passed / decision received	File # or Bylaw #
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Please attach a copy of the Municipality's decision.

Part 5 – Reasons for Appeal

(attach more pages as necessary).

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Signature of Appellant OR
Person Authorized to Act on Behalf of Appellant

Date

Checklist of documents to be attached and submitted with this Notice of Appeal:

- Certificate(s) of Title
- List of landowners affected (if applicable)
- Copy of the authorization described in Part 3
- Copy of bylaw or application described in Part 4
- Copy of Municipality's decision on application described in Part 4
- Statutory declaration, as required by s. 619(5)(b)

This information is being collected for the purposes of setting up appeal hearings in accordance with Section 33(c) of the Freedom of Information and Protection of Privacy Act. 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)



RETURN TO:
 Municipal Government Board
 1229 – 91 Street SW
 Edmonton AB T6X 1E9
 Telephone: 780-427-4864 Fax: 780-427-0986
 Email: mgbmail@gov.ab.ca
 Web URL: <http://www.mgb.alberta.ca>

Statutory Declaration
 (Satisfying s. 619 of the
 Municipal Government Act)

I _____ of _____ DO SOLEMNLY DECLARE THAT:
 (Name)

1. _____ wishes to file an Appeal with the
 (Appellant)
 Municipal Government Board concerning _____, and that
 (Part 17 application under appeal)

2. (Please choose one of the following)

(a) Mediation with _____ was not undertaken OR
 (Municipality)

(b) Mediation was undertaken but was not successful

4. And further, the reasons why mediation was either not undertaken or not successful are as follows:
 (attach more pages as necessary)

AND I MAKE THIS SOLEMN DECLARATION CONSCIENTIOUSLY BELIEVING IT TO BE TRUE AND KNOWING THAT IT IS OF THE SAME FORCE AND EFFECT AS IF MADE UNDER OATH.

 (Signature of Appellant OR
 Person Authorized to Act on Behalf of Appellant)

 (Print Name)

DECLARED BEFORE ME AT _____

In the Province of Alberta, this _____ day

of _____, 20____

 (Commissioner for Oaths)

 (Print Name)

 (Expiry Date of Commission)

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