

Appeal Form

Appellant Information: You must complete the following.

Appenant information: 100 must	complete the follow	wiiig.				
Last Name		First Name				
		T 0''				
Street Address		City			Province	Postal Code
Telephone *	Fax			Email *		
Тегерпопе	I ax			Liliali		
* It is important that you provide us	l with a telephone n	number or em	ail address	in case t	he Order or Dec	cision is withdrawn.
installed on y		pe sent. df format whic	ch requires	Adobe R		·
Property or Business Under Appe	eal:					
Property Address					Referer	nce/File No
Property Owner						
Please note that all documents subr	nitted become par	rt of a public f	file. If there	is sometl	hing that you wo	ould like kept private,
please indicate as such.						
Important Notice: Your appeal must the deadline date. The appeal dea					ess below no la	ater than 4:00pm on
	1	loor, Churc 10019 103 A nonton, AB	chill Build Avenue B T5J 0G9	ing		
Appellant's Signature:						
Signature		[Date			
This personal information is being colle	ected under the auth	nority of the Fre	eedom of Info	ormation a	nd Protection of P	rivacv Act. R.S.A. 2000

This personal information is being collected under the authority of the *Freedom of Information and Protection of Privacy Act*, R.S.A. 2000, c. F-25, s. 33(c), and will be used for administrative purposes and to process your complaint. Personal information collected is protected by the privacy provisions of the Act. If you have any questions about the collection, use or disclosure of this personal information, contact the Director, Tribunal and Civic Agency Governance, Main Floor, Churchill Building 10019 103 Avenue Edmonton, AB T5J 0G9