

**Mackenzie County
NOTICE OF APPEAL
Subdivision & Development Appeal Board**

Name of Appellant: _____

Address: _____ Home: _____

City: _____ Business: _____

Province: _____ Postal Code: _____ Cell: _____

Email: _____

Civic Address of Site: _____

Legal Land Description of Site: _____

Development Permit Number or Subdivision Application Number: _____

The appeal is herein launched for the following reasons:

Section 678 and 686 of the Municipal Government Act require that the written notice of Appeal must contain specific reasons for the appeal.

(Attach a separate page if required)

**Forward this form, supporting documentation,
and \$362.50 appeal fee (as per Fee Schedule
Bylaw) to:**

Subdivision & Development Appeal Board Clerk
Mackenzie County
Box 640
4511 46 Avenue
Fort Vermilion, AB T0H 1N0
Phone: (780) 927-3718
Fax: (780) 927-4266

Signature of Appellant/Agent

Please Print Name

Date

Receipt No. for Appeal Fee: _____

This personal information is being collected in accordance with Section 22(c) of the Freedom of Information and Protection of Privacy (FOIP) Act. It will be used to process your request for a hearing and to assist in the administration of a development appeal hearing before the Subdivision and Development Appeal Board. This information will form part of a file that is publicly available on request. If you have any questions about the collection, use or disclosure of this personal information, please contact the Subdivision Appeal Board Office at (780) 927-3718.

