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# Appeal Submission Form Planning Act Section 53

Reference Number (TLAB Office Use Only):

Material and information is to be forwarded to the Toronto Local Appeal Body by the Approval Authority within 15 days after the last day for filing a notice of appeal under the following subsections of the Planning Act, R.S.O. 1990, c. P. 13, as amended. Please check the section of the Act under which the appeal(s) have been filed.

The information collected on this form is considered to be a public record as defined by section 27 of the Municipal Freedom of Information and Protection of Privacy Act. The legal authority to make the information public is section 1.0.1. of the Planning Act. Questions about this form can be directed to the Manager, Planning & Liaison, Court Services, 137 Edward Street, 2<sup>nd</sup> Floor, Toronto Ontario M5G 2P1 or by telephone at 416-338-7320.

### Part 1: Appeal Type (Please check Applicable Type of Appeal box)

SUBJECT OF APPEAL	TYPE OF APPEAL	PLANNING ACT REFERENCE
Planning Act 53	Appeal a decision Appeal conditions imposed	53(19)
	Appeal changed conditions	53(27)
	Appeal for failure to make a decision on the application within 90 days	53(14)

Committee of Adjustment Panel:		Committee of Adjustment File Number:

Part 2: Committee of Adjustment Contact Information					
First Name		I	Last Name		
Professional Title		Email		Telephone	Number
Part 3: Location Information					
Address and/or Legal Description of property subject to the appeal					
Street Number	Street Name		Postal Code		Ward



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# Part 4: Related Matters (a) Is this consent appeal connected with a variance or any other Planning Act application? Yes No If yes, has a decision on that application been appealed to the Toronto Local Appeal Body? Yes No If yes, has a decision on any other application been appealed to the OMB? Yes No Committee of Adjustment Related Application File Number TLAB File Number (b) Are there other matters anticipated or required to be filed? Yes No Unknown

Part 5: Consent/Severance Information		
Date Application Received by Committee of Adjustment (yyyy-m	m-dd)	
Does a conflict with any zoning by-law exist?	☐ Yes ☐ No	
	Reasons for decision?	
If yes, where is this conflict indicated?	Conditions of consent?	
	Written comments from officials or agencies?	
	Other source?	
	Name of source	
If there is a conflict, it is the Toronto Local Appeal Body's practice variance application or by-law amendment before a Toronto Loca scheduled. Has the appellant been advised of this practice?		

Part 7: City of Toronto Legal Representative Information			
First Name		Last Name	
Email		Telephone Number	
		Last Name	

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### Part 8: Required Fees

Copy of payment receipt for the Toronto Local Appeal Body fee paid by <u>each</u> appellant made payable to the City of Toronto. The appeal will not be processed without proof the fee was paid by each appellant.

### **Total Fee Received**

Date of Payment

Ра	rt 9: Sworn declaration, section 53(17) and 53(2	(4) of the Planning Act				
Las	st date for filing notice of appeal to Secretary-Treasurer	Date (yyyy-mm-dd)				
I,						
	(Name of Secretary-Treasurer)					
	ke oath and say (or solemnly declare) that I provided proper in <i>nning Act</i> , and provided written notice to:	notice as prescribed in Section 53(17) and 53(24) of the				
	the applicant; the Appellant					
	each person or public body that made a written request to b	e notified of the decision or conditions;				
	the Minister, with respect to a decision to give a provisional he or she wishes to receive a copy of all decisions made to					
	or					
	the Minister, with respect to a change of conditions by the Committee, if the Minister has notified the Committee that he or she wishes to receive a copy of the changes of conditions; and					
	any other person or public body that is prescribed and all a	s listed in the following schedule.				
Sw	orn before me,	Signature				
at t	he of					
	(City, Town, etc.) (Name of City, Town, etc.)					
in tl	in the of					
(County, Regional Municipality) (Name of County, Regional						
Muni	cipality)					
this	s day of	_				
	(month) (year)					
*A Commissioner, etc.						
A						

# Appeal Submission Form Planning Act Section 53 Part 11: List of all persons, agencies and public bodies that made oral or written submissions at the public meeting.

LAST NAME, First Name	Role (if legal counsel/agent, list name of party represented)	Telephone Number	Email and Address
Ι,			
(Name of Secretary- Treasurer) make oath and say (or solemnly declare) that this is a full and comprehensive list of all persons, agencies and public bodies that made oral submissions at the public hearing.			
Signature of Secretary- Treasurer			Date (yyyy-mm-dd)

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Part 8: Required Documentation (Please check boxes to indicate document included in and through electronic filing only.)			
I confirm that I have submitted the following items with this form.			
Certified copy of each notice of appeal received and reasons for appeal with indication of the date on which each notice was filed. Attach a separate list of the names, email, mailing addresses and telephone numbers of all appellants.			
Certified copy of any other information and material that	t is required to be provided by the official plan		
Copy of Decision of the approval authority with written	reasons.		
Copy of Authorization, if application made by other than	n the owner.		
Copy of minutes of public meeting.			
Copy of all plans and sketches considered by the appro	Copy of all plans and sketches considered by the approval authority.		
Copy of any planning report considered by the approval authority. Certified copies of all written submissions and comments received.			
			<ul> <li>A statement by an employee of the approval authority as to whether the decision of the approval authority,</li> <li>i. is consistent with the policy statements issued under subsection 3(1) of the <i>Act</i>,</li> <li>ii. conforms to or does not conflict with any applicable provincial plan or plans, and</li> <li>iii. conforms to the official plan of the municipality or planning board.</li> </ul>
Copy of relevant extracts from the Official Plan.			
Copy of relevant extracts from the Zoning By-law.			
Copy of relevant extracts from Minister's Zoning Order, if applicable.			
Signature of Secretary Treasurer Date (yyyy-mm-dd)			