

## Applicant's Disclosure Form 3

Questions or concerns about this form or process can be directed to the Toronto Local Appeal Body by telephone 416-392-4697 or by email at <a href="mailto:tlab@toronto.ca">tlab@toronto.ca</a>.

Information, including completed forms, disclosure documents and statements, you disclose to the Toronto Local Appeal Body (TLAB) in relation to a TLAB appeal is an adjudicative record that is a public record available to parties, participants and the general public. As stated in Section 27 of the Municipal Freedom of Information and Protection of Privacy Act, the provisions protecting individual privacy in Part 2 of that Act do not apply to any information collected in the TLAB's prescribed forms and associated filings for appeals. Questions of this collection can be directed to the Manager of Planning & Liaison, Court Services, 137 Edward Street, 2nd Floor, Toronto, Ontario M5G 2P1 or by telephone at 416-338-7320.

| Part 1: Party Information       |                                  |  |  |
|---------------------------------|----------------------------------|--|--|
| First Name                      | Last Nam                         | е  |  |
|                                 |                                  |  |  |
|                                 |                                  | ly to you because you have either a registered a Single Name. Provide your name below. |  |
| Single Name                     |                                  |  |  |
|                                 |                                  |  |  |
| Corporation Name or Associatio  | n Name (Association must be inco | rporated)  |  |
|                                 |                                  |  |  |
| Position Title (if applicable)  | Email                            |  |  |
|                                 |                                  |  |  |
| Street Number Street Name       |                                  | Suite/Unit Number  |  |
|                                 |                                  |  |  |
| City/Town                       | Province                         | Postal Code  |  |
|                                 |                                  |  |  |
| Telephone Number                | Mobile Nu                        | ımber  |  |
|                                 |                                  |  |  |
| Part 2: Appeal Information      |                                  |  |  |
| TLAB Case File Number           |                                  | Scheduled Hearing Date (yyyy-mm-dd)  |  |
| TEMB Case File Harrison         | Sonoua                           | led ricaling Date (yyyy min da)  |  |
| Required Applicant's Disclosure | Date (yyyy-mm-dd)                |  |  |
|                                 | ,                                |  |  |

## Part 3: Proposed Revisions to the original application as heard by the Committee of Adjustment

Provide all the intended alterations, changes, revisions or modifications to the application that was made to the Committee of Adjustment together with a brief explanation. Applicants are responsible for identifying variances correctly and fully.

The purpose of this disclosure is to identify changes that may be relevant to a party or participant in assessing their position.

Note: Materials in support must be served and filed electronically in accordance with TLAB Rules and Practice Directions.

311 toronto at your service

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## Part 3: Proposed Revisions to the original application as heard by the Committee of **Adjustment** (Continued from Page 1) **Declaration by the Applicant** These are the only revisions proposed. Date (yyyy-mm-dd)

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