

**Environment and Land Tribunals  
Ontario**

Ontario Municipal Board

655 Bay Street, Suite 1500  
Toronto ON M5G 1E5  
Telephone: (416) 212-6349  
Toll Free: 1-866-448-2248  
Fax: (416) 326-5370  
Website: [www.elto.gov.on.ca](http://www.elto.gov.on.ca)

**Tribunaux de l'environnement et de  
l'aménagement du territoire Ontario**

Commission des affaires municipales  
de l'Ontario

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Toronto ON M5G 1E5  
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**NOTICE – APPEAL FEE CHANGE**

Effective July 1, 2016, Ontario Municipal Board (OMB) appeal fees have changed from \$125 to \$300. Appeals received and date-stamped by the OMB on or after July 1, 2016, are subject to the new appeal fee.

- The fee of \$25 for each additional consent appeal filed by the same appellant against connected consent applications does not change.
- The fee of \$25 for each additional variance appeal filed by the same appellant against connected variance applications does not change.

OMB appeal fees are still \$125 for appeals with date-stamps from before July 1, 2016.

Thank you.



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**APPELLANT FORM (O1 pre-Bill 51)  
 PLANNING ACT**

**AMEND ZONING BY-LAW**

**SUBMIT COMPLETED FORM TO OMB**

**\*\*\*THIS FORM IS ONLY TO BE USED FOR APPEALS UNDER SUBSECTION 34(11) OF THE PLANNING ACT FOR APPLICATIONS THAT WERE SUBMITTED TO THE MUNICIPALITY BEFORE JANUARY 1, 2007. IF YOUR APPLICATION WAS SUBMITTED ON OR AFTER JANUARY 1, 2007 PLEASE USE THE A1 FORM.**

**Instructions:**

- Complete one form for each type of appeal you are filing.
- Please print clearly.
- A filing fee of \$300 is required for each type of appeal you are filing. To view the Fee Schedule, visit the Board's website.
- The filing fee must be paid by certified cheque or money order, in Canadian funds, payable to the Minister of Finance.
- If you are represented by a solicitor the filing fee may be paid by a solicitor's general or trust account cheque.
- Do not send cash.
- Professional representation is not required but please advise the Board if you retain representation after the submission of this form.
- Submit your completed appeal form(s) and filing fee(s) to the Ontario Municipal Board by the filing deadline.
- The *Planning Act* and the *Ontario Municipal Board Act* are available on the Board's website.

Receipt Number (OMB Office Use Only):

Reference Number (OMB Office Use Only):

Date Stamp - Appeal Received by OMB

**Part 1: Appeal Type (Please check only one box)**

SUBJECT OF APPEAL	TYPE OF APPEAL	PLANNING ACT REFERENCE (SECTION)
Zoning By-law Amendment	<input type="checkbox"/> Application for an amendment to the Zoning By-law – failed to make a decision on the application within 120 days	34(11)
	<input type="checkbox"/> Application for an amendment to the Zoning By-law – refused by the municipality	

**Part 2: Location Information**

Address and/or Legal Description of property subject to the appeal:

Municipality

Upper Tier (Example: county, district, region)

### Part 3: Appellant Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company Name or Association Name (Association must be incorporated – include copy of letter of incorporation)

Professional Title (if applicable): \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street Address Apt/Suite/Unit# City/Town

Province Country (if not Canada) Postal Code

Signature of Appellant: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature not required if the appeal is submitted by a law office)

**Please note: You must notify the Ontario Municipal Board of any change of address or telephone number in writing. Please quote your OMB Reference Number(s) after they have been assigned.**

Personal information requested on this form is collected under the provisions of the *Planning Act*, R.S.O. 1990, c. P. 13, as amended, and the *Ontario Municipal Board Act*, R.S.O. 1990, c. O. 28 as amended. After an appeal is filed, all information relating to this appeal may become available to the public.

### Part 4: Representative Information (if applicable)

**I hereby authorize the named company and/or individual(s) to represent me:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Professional Title: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Fax #: \_\_\_\_\_  
By providing an e-mail address you agree to receive communications from the OMB by e-mail.

Daytime Telephone #: \_\_\_\_\_ Alternate Telephone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street Address Apt/Suite/Unit# City/Town

Province Country (if not Canada) Postal Code

Signature of Appellant: \_\_\_\_\_ Date: \_\_\_\_\_

**Please note: If you are representing the appellant and are NOT a solicitor, please confirm that you have written authorization, as required by the Board's Rules of Practice and Procedure, to act on behalf of the appellant. Please confirm this by checking the box below.**

I certify that I have written authorization from the appellant to act as a representative with respect to this appeal on his or her behalf and I understand that I may be asked to produce this authorization at any time.

**Part 5: Language and Accessibility**

Please choose preferred language:  English  French

We are committed to providing services as set out in the *Accessibility for Ontarians with Disabilities Act, 2005*. If you have any accessibility needs, please contact our Accessibility Coordinator as soon as possible.

**Part 6: Appeal Specific Information**

1. Please provide the Municipal File Number: \_\_\_\_\_

2. **DATE APPLICATION SUBMITTED TO MUNICIPALITY:** \_\_\_\_\_  
(If application submitted on or after January 1, 2007 please use the A1 form.)

3. Outline the nature of your appeal and the reasons for your appeal. Be specific and use land-use planning reasons.  
\*\*If more space is required, please continue in Part 9 or attach a separate page.

(Please print)

4. Provide a brief explanatory note regarding the proposal, which includes the existing zoning category, desired zoning category, the purpose of the desired zoning by-law change, and a description of the lands under appeal:  
\*\*If more space is required, please continue in Part 9 or attach a separate page.

(Please print)

Has a public meeting been held by the municipality? YES  NO   
If yes, please provide date of meeting(s): \_\_\_\_\_

**Part 7: Related Matters**

Are there other appeals not yet filed with the Municipality? YES  NO   
Are there other planning matters related to this appeal? YES  NO

If yes, please provide OMB Reference Number(s) and/or Municipal File Number(s) in the box below:

(Please print)



**Part 10: Required Documentation (Please check boxes to indicate document included in filing)**

I confirm that I have attached the following items to this form.

Signature of Appellant/Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**The following material must be attached to this form where applicable, in the order which it is listed:**

- A copy of the application to Council for a zoning by-law amendment. Please ensure the date the application was filed with the municipality is shown on the application.
- Board fee of \$300 made payable to the Minister of Finance. The appeal will not be processed without this fee.
- Copy of the proposed amending by-law that you seek to have Council enact.
- A copy of Council's refusal or an affidavit or declaration duly sworn certifying that Council refused or neglected to make a decision on the complete application within 120 days.
- If applicable, a copy of the Notice of Public Meeting and a copy of the minutes from the public meeting (printed format).
- An indication of the conformity of the proposed by-law with all applicable official plan provisions. Enclose a copy of the Municipality's planning staff report if one is available.
- Affidavit or sworn declaration certifying that copies of all material listed above, as well as a copy of this form, has been sent to the clerk of the municipality having jurisdiction to pass the amendment and that the clerk has been informed of the filing of this appeal. In addition, the affidavit must provide that the requirements of subsection 34(10.3) of the *Planning Act* have been met. i.e. the prescribed information and material noted in O.Regulation 199/96, as amended, as well as any fee under section 69 have been provided to council, and that the appeal is being filed at least 120 days after the fulfillment of the requirements noted therein.
- A map of the lands under appeal.

**Part 11: Required Fee**

**Total Fee Submitted:** \$ \_\_\_\_\_

**Payment Method:**  Certified cheque  Money Order  Solicitor's general or trust account cheque

- The payment must be in Canadian funds, **payable to the Minister of Finance.**
- **Do not send cash.**
- **PLEASE ATTACH THE CERTIFIED CHEQUE/MONEY ORDER TO THE FRONT OF THIS FORM.**