CITY OF GRANDE prairie

NOTICE OF APPEAL AGRICULTURAL PESTS ACT

Legislative Services – Appeal Clerk

Description

Please fill out and submit this form if you wish to appeal an Agricultural Pests Act Notice.

Payment and Submission Requirements

Your notice of appeal must be accompanied by:

- The $100.00 appeal filing fee and
- A copy of the Notice being appealed.

Appeals must be filed within the time specified in the notice or within ten (10) days, whichever is less. For more information, consult the Notice under the Agricultural Pests Act or contact the General Appeal Board Clerk.

Submission Information

Please Note: Appeals cannot be filed by email or fax. The Agricultural Pests Act requires the notice of appeal and accompanying materials to be delivered personally or sent by certified registered mail.

Mail To: (must be certified registered mail)	Deliver To:
The City of Grande Prairie Legislative Services Appeal Clerk P.O. Bag 4000 Grande Prairie, AB Canada T8V 6V3	Grande Prairie City Hall Legislative Services Appeal Clerk 10205 98 Street Grande Prairie, AB T8V 2E7

If you require further information regarding appeal deadlines and procedures, please check the website at **cityofgp.com/appeals** or contact the General Appeal Board Clerk at 780-357-4954 or **appeals@cityofgp.com**.

FOIP Act Policy

This personal information is collected under the authority of the Freedom of Information and Protection of Privacy Act, section 33(a) and (c). This information will be used for processing your appeal and will become part of a public agenda. If you have any questions regarding the collection of this information, contact the General Appeal Board Clerk at 780-357-4954 or **appeals@cityofgp.com**.

CITY OF GRANDE prairie

NOTICE OF APPEAL
AGRICULTURAL PESTS ACT
Legislative Services – Appeal Clerk

Section 1: Appellant Information			
Name of Appellant:			
Address:		City:	
Province:		Postal Code:	
Email:		Phone Number:	

Section 2: Agent Information (if applicable)			
Name of Agent:			
Address:		City:	
Province:		Postal Code:	
Email:		Phone Number:	

Section 3: Appeal Information	
Legal Description of the Land Affected or a Description of the Livestock Affected and the Land on Which the Livestock Were Located:	
Date of the Decision Being Appealed: (YYYY-MM-DD)	

Section 4: Ground for Appeal

Please state and explain your grounds for appeal. A copy of this notice will be provided to Board members, to the City Administration and become part of the public agenda. Please provide as much detail as possible. Attach a separate page if required.

Signature of the Appellant / Agent:		Date: (YYYY-MM-DD)	

Office Use Only					
Final Date of Appeal:		Date Received:		Fee Paid:	☐ Yes ☐ No
Appeal Number:		Hearing Date:			